EXTENDED TO NOVEMBER 17,

**Return of Private Foundation** 

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

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

Department of the Treasury Internal Revenue Service

Form **990-PF** 

Open to Public Inspection For calendar year 2024 or tax year beginning , and ending A Employer identification number Name of foundation JAMES S. BOWER FOUNDATION 77-0229243 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite **B** Telephone number 26 WEST MICHELTORENA ST. (805) 564-8814 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here SANTA BARBARA, CA 93101 G Check all that apply: Initial return Initial return of a former public charity **D** 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation **H** Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Uther taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Accrual Cash F If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here ... 89,017,606. (Part I, column (d), must be on cash basis.) \$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) for charitable purposes (cash basis only) expenses per books income income N/A Contributions, gifts, grants, etc., received ...... Check X if the foundation is not required to attach Sch. B 75,350. Interest on savings and temporary cash investments 54,745. STATEMENT 967,983. 967,983. STATEMENT 4 Dividends and interest from securities 788,891. 788,891. STATEMENT **5a** Gross rents 788,891. **b** Net rental income or (loss) 898,884 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a ...... 6,634,212. 7 Capital gain net income (from Part IV, line 2) 898,884. 8 Net short-term capital gain Income modifications Gross sales less returns and allowances **b** Less: Cost of goods sold ... c Gross profit or (loss) STATEMENT 4 11 Other income 16,720. 14,637. 2,747,828. 2,725,140. Total. Add lines 1 through 11 378,200. 70,530. 307,670. 13 Compensation of officers, directors, trustees, etc. 291,378. 14 Other employee salaries and wages ..... 27,519. 263,565. 23,897. 4,245 19,646. 15 Pension plans, employee benefits 2,877. 16a Legal fees STMT 5 3,197. 320. Expenses 28,649. b Accounting fees STMT 6 8,595. 20,054. 107,371. 102,211. 5,160. c Other professional fees STMT 7 293. 293. 0. 17 Interest 100,266. Taxes STMT 8 45,523. 32,977. 18 Depreciation and depletion 23,695 0. 19 20 Occupancy 21 Travel, conferences, and meetings 1,983. 1,244. 739. and 22 Printing and publications ...... 23 Other expenses STMT 9 372,079. 114,372. 201,068. 24 Total operating and administrative 853,756. 3,170,750. 1,331,008 374,852. expenses. Add lines 13 through 23 3,170,750. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 4,501,758 374,852. 4,024,506. Add lines 24 and 25 27 Subtract line 26 from line 12: -1,753,930. **a** Excess of revenue over expenses and disbursements 2,350,288. **b Net investment income** (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-).

OMB No. 1545-0047

40,000.

40,000.

0.

Beginning of year

(a) Book Value

60,943.

443,972.

40,000.

4,800.

126,000.

Form 990-PF (2024)

1 Cash - non-interest-bearing

Less: allowance for doubtful accounts

Less: allowance for doubtful accounts

3 Accounts receivable

4 Pledges receivable

Grants receivable

JAMES S. BOWER FOUNDATION

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.

2 Savings and temporary cash investments

Receivables due from officers, directors, trustees, and other

Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations **b** Investments - corporate stock c Investments - corporate bonds

disqualified persons

Other notes and loans receivable .....

Less: allowance for doubtful accounts

11 Investments - land, buildings, and equipment: basis Less: accumulated depreciation ..... 12 Investments - mortgage loans

77-0229243 Page 2 End of year (b) Book Value (c) Fair Market Value 141,917. 141,917. 45,605. 45,605. 40,000. 40,000. 40,000. 40,000. 39,752,304. 39,752,304.

	'2	Investments - other STMT 10	40,003,561.	39,752,304.	39,752,304.
	13	Investments - other STMT 10	40,003,301.	39,734,304.	39,732,304.
	14	Land, buildings, and equipment; basis 2,511,964.	0.016.400	2 050 060	2 050 060
		Less: accumulated depreciation STMT 11 461,895.	2,016,408.	2,050,069.	2,050,069.
		Other assets (describe STATEMENT 12)	43,371,132.	46,947,711.	46,947,711.
	16	Total assets (to be completed by all filers - see the	06 066 016	00 045 606	00 015 606
_		instructions. Also, see page 1, item I)	86,066,816.	89,017,606.	89,017,606.
	17	1	63,854.	63,025.	
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iab	21	Mortgages and other notes payable			
_	22		23,826.	40,119.	
	23	Total liabilities (add lines 17 through 22)	87,680.	103,144.	
		Foundations that follow FASB ASC 958, check here			
S		and complete lines 24, 25, 29, and 30.			
ŭ	24	Net assets without donor restrictions	85,979,136.	88,914,462.	
sala	25	Net assets with donor restrictions			
Fund Balances		Foundations that do not follow FASB ASC 958, check here			
Fu		and complete lines 26 through 30.			
þ	26	Capital stock, trust principal, or current funds			
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
SS	28	Retained earnings, accumulated income, endowment, or other funds			
Net Assets	29	Total net assets or fund balances	85,979,136.	88,914,462.	
	30	Total liabilities and net assets/fund balances	86,066,816.	89,017,606.	
P	art	III Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	29		
		st agree with end-of-year figure reported on prior year's return)		1	85,979,136.
2		r amount from Part I, line 27a		2	-1,753,930.
3	Othe	er increases not included in line 2 (itemize) UNREALIZED LOS	NTS 3	4,689,256.	
		lines 1, 2, and 3			88,914,462.
		reases not included in line 2 (itemize)		5	0.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 29		88,914,462.
				<u> </u>	Form <b>990-PF</b> (2024)
					,

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Part IV Capital Gains and Losses for Tax on Investment Income

Part IV Capital Gains	and Losses for Tax on Ir	vestment	Incon	ne					
(a) List and describe	the kind(s) of property sold (for example of the kind (s) of property sold (for example of the kind (s) of property sold (for example of the kind (s) of property sold (for example of the kind (s) of property sold (for example of the kind (s) of property sold (for example of the kind (s) of property sold (for example of the kind (s) of property sold (for example of the kind (s) of property sold (for example of the kind (s) of property sold (for example of the kind (s) of the	mple, real estate	ļ,		( <b>b)</b> How a P - Pur D - Do	acquired		acquired	(d) Date sold
2-story brick wa	arehouse; or common stock, 200 sh	s. MLC Co.)			D - Do	nation	(mo., d	ay, yr.)	(mo., day, yr.)
1a									
b SEE ATTACHED	STATEMENT								
С									
d									
е									
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost plus ex	or other pense of				<b>(h)</b> Ga ((e) plus	ain or (loss s (f) minus (	) (g))
a									
b									
С									
d									
e 6,634,212.				5,32	8.				898,884.
Complete only for assets showing	ng gain in column (h) and owned by	the foundation o	n 12/31	1/69.				ol. (h) gain	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of co ol. (j), if			col.	(k), but r Losses	not less thai (from col. (	n -0-) <b>or</b> (h))
a									
b									
С									
d									
e									898,884.
2 Capital gain net income or (net ca	apital loss)	r in Part I, line 7			} 2				898,884.
,					/ <del>  −</del>				
	column (c). See instructions. If (loss				<b>)</b>			NT / 7A	
Part I, line 8	sed on Investment Incon	aa (Caatian	4040	)/o\40	) 3 (40/b)	01 4049	i	N/A	
			_	• • •			see ii	istructi	ons)
	described in section 4940(d)(2), che								22 660
Date of ruling or determination	`	tach copy of let				ructions)	, 1		32,669.
	enter 1.39% (0.0139) of line 27b. Ex								
4% (0.04) of Part I, line 12, col	l. (b)					J			0
	tic section 4947(a)(1) trusts and taxa								22 ((0)
3 Add lines 1 and 2							3		32,669.
, , ,	stic section 4947(a)(1) trusts and tax				, ,				22 ((0)
	ome. Subtract line 4 from line 3. If ze	ro or less, enter	-0				5		32,669.
6 Credits/Payments:						04 516			
	and 2023 overpayment credited to 20		6a		•	34,516	-		
	tax withheld at source		6b			<u> </u>	-		
	tension of time to file (Form 8868)		6c			6,000	<u>-</u>		
	ly withheld		6d			0	<u>-</u>		40 516
7 Total credits and payments. Ad	ld lines 6a through 6d						7		40,516.
	/ment of estimated tax. Check here $lacksquare$		220 is at	tached					0.
	and 8 is more than line 7, enter <b>amo</b>						9		
	than the total of lines 5 and 8, enter	the amount over	erpaid				10		7,847.
11 Enter the amount of line 10 to I	be: Credited to 2025 estimated tax			7,8	847.	Refunded	11		0.

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JAMES S. BOWER FOUNDATION

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Pa	rt VI-A   Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ O • (2) On foundation managers. \$ O •			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. \$O .			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	CA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	0.1	v	
•	of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			v
40	year 2024 or the tax year beginning in 2024? See the instructions for Part XIII. If "Yes," complete Part XIII	9		X
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		^
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions  STATEMENT 14  STMT 15	11	Х	1
10	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	<del>  '''</del>	21	$\vdash$
12	If "Voo " attach atatament. Cas instructions	12		x
12	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	<del></del>
, 0	Website address WWW.JSBOWERFOUNDATION.ORG	_ 10		
14	The books are in care of JAMES S. BOWER FOUNDATION  Telephone no. (805)	564	-88	14
•	Located at 26 WEST MICHELTORENA ST., SANTA BARBARA, CA ZIP+4 93			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> - check here			
	and enter the amount of tax-exempt interest received or accrued during the year   15		/A	
16	At any time during calendar year 2024, did the foundation have an interest in or a signature or other authority over a bank,			No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
	Fo	rm <b>99</b> 0	)-PF	(2024)

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Part VI-B   Statements Regarding Activities for Which Form 4720 May Be Required  File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		٧٤	es No
1a During the year, did the foundation (either directly or indirectly):		+	10 110
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a	(1)	х
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		-/	
a disqualified person?	1a	(2)	Х
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		` _	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		` '	
(5) Transfer any income or assets to a disqualified person (or make any of either available		-/-	
for the benefit or use of a disqualified person)?	1a	(5)	х
(6) Agree to pay money or property to a government official? (Exception. Check "No"			
if the foundation agreed to make a grant to or to employ the official for a period after			
termination of government service, if terminating within 90 days.)	1a	(6)	Х
<b>b</b> If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1	b	Х
c Organizations relying on a current notice regarding disaster assistance, check here			
d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
before the first day of the tax year beginning in 2024?	1	d	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
<b>a</b> At the end of tax year 2024, did the foundation have any undistributed income (Part XII, lines			
6d and 6e) for tax year(s) beginning before 2024?	2	a	Х
If "Yes," list the years , , , ,			
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach			
statement - see instructions.)	N/A 2	ь	
c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
during the year?	3	a	Х
b If "Yes," did it have excess business holdings in 2024 as a result of (1) any purchase by the foundation or disqualified persons after			
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to disp	ose		
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
Schedule C, to determine if the foundation had excess business holdings in 2024.)	N/A 3	b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		a	Х
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose the	nat		
had not been removed from jeopardy before the first day of the tax year beginning in 2024?	4	ь	X

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Part VI-B Statements Regarding Activities for Which  5a During the year, did the foundation pay or incur any amount to:	i onin <del>1</del> 720 Way De i	required (contin	ueu)		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e)) <b>?</b>			5a(1)		X
(2) Influence the outcome of any specific public election (see section 4955); of						
any voter registration drive?				5a(2)		Х
(3) Provide a grant to an individual for travel, study, or other similar purposes	s?			5a(3)		Х
(4) Provide a grant to an organization other than a charitable, etc., organization						
4945(d)(4)(A)? See instructions				5a(4)		Х
(5) Provide for any purpose other than religious, charitable, scientific, literary.	, or educational purposes, or t	for				
the prevention of cruelty to children or animals?				5a(5)		Х
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify un	der the exceptions described	in Regulations				
section 53.4945 or in a current notice regarding disaster assistance? See instr	uctions		N/A	5b		
c Organizations relying on a current notice regarding disaster assistance, check						
<b>d</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption f						
expenditure responsibility for the grant?			N/A	5d		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).						
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on					
a personal benefit contract?				6a		X
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b		X
If "Yes" to 6b, file Form 8870.						
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?			7a		X
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attrib	utable to the transaction?		N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than S	\$1,000,000 in remuneration o	r				
excess parachute payment(s) during the year?				8		Х
Part VII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highl	У			
List all officers, directors, trustees, and foundation managers and to the second	their compensation.					
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions t employee benefit pla and deferred	0 (	(e) Exp	ense
(a) Name and address	nours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	is ac	ccount, allowar	otner ices
HARVEY BOTTELSEN (THRU 12/31/24)	CHAIRMAN	<u> </u>	compondation			
26 WEST MICHELTORENA ST.	1					
SANTA BARBARA, CA 93101	3.00	30,000.	0	١. ا		0.
CHRISTOPHER A. JACOBS	SECRETARY					
26 WEST MICHELTORENA ST.	1					
SANTA BARBARA, CA 93101	3.00	30,000.	0	١.		0.
DAVID ALVARADO (THRU 12/31/24)	TREASURER					
26 WEST MICHELTORENA ST.	1					
SANTA BARBARA, CA 93101	3.00	30,000.	0	١. ا		0.
JON CLARK	PRESIDENT					
26 WEST MICHELTORENA ST.						
SANTA BARBARA, CA 93101	40.00	288,200.	61,164	:•		0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) o		. <b>.</b> F	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions t employee benefit pla and deferred	is ac	(e) Expo count, allowar	other
PATRICIA MADRIGAL - 26 WEST	· ·	DUCATION	compensation GRANTMA			1003
MICHELTORENA ST., SANTA BARBARA, CA	40.00	181,301.	14,016		•	0.
JOLETTE CORBETT - 26 WEST	FINANCIAL MAN		,	+		
MICHELTORENA ST., SANTA BARBARA, CA	30.00	110,077.	37,118			0.
		,	. , ,	+		
				4		
	-					
Total number of other employees paid over \$50,000	1	<u> </u>				0

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Part VII Information About Officers, Directors, Trustees, Foundate Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
MERCER ADVISORS - 800 MARKET STREET STE 1800,	INVESTMENT	
ST LOUIS, MO 63101	MANAGEMENT	100,000.
	7	
	7	
<b>Total</b> number of others receiving over \$50,000 for professional services		
Part VIII-A   Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statisti		Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produ	uced, etc.	
1 N/A		
2		
3		
4		
Part VIII-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on li	ines 1 and 2.	Amount
1		
·		
SEE STATEMENT 16		0.
2		
All other program-related investments. See instructions.		
3		

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0.

Total. Add lines 1 through 3

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Subtract line 2 from line 1d

Part IX

3

JAMES S. BOWER FOUNDATION

Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:

foreign organizations, check here and do not complete this part.)

Minimum investment return from Part IX, line 6

Income tax for 2024. (This does not include the tax from Part V.)

e Reduction claimed for blockage or other factors reported on lines 1a and

Minimum investment return. Enter 5% (0.05) of line 5

Tax on investment income for 2024 from Part V, line 5

77-0229243 Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 40,849,920. a Average monthly fair market value of securities 1a 511,715. **b** Average of monthly cash balances 1b 46,903,977. c Fair market value of all other assets (see instructions) 1c 88,265,612. d Total (add lines 1a, b, and c) 1d Acquisition indebtedness applicable to line 1 assets 2 88,265,612. 3 1,323,984. Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3 86,941,628 5 4,347,081. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain 4,347,081. 32,669. 32,896. Add lines 2a and 2b 2c 4,314,185. Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 210,000. 4 5 4,524,185 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6

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7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	4,524,185.
Pa	rt XI Qualifying Distributions (see instructions)		
1 /	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a l	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	4,024,506.
b I	Program-related investments - total from Part VIII-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions, Add lines 1a through 3b. Enter here and on Part XII, line 4	4	4,024,506.

2a

2b

423571 12-06-24

Form 990-PF (2024)

JAMES S. BOWER FOUNDATION

77-0229243

Page 9

Part XII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	(b) Years prior to 2023	(c) 2023	( <b>d)</b> 2024
1 Distributable amount for 2024 from Part X, line 7				4,524,185.
2 Undistributed income, if any, as of the end of 2024:				1,321,233
<b>a</b> Enter amount for 2023 only			0.	
<b>b</b> Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2024:				
<b>a</b> From 2019				
<b>b</b> From 2020				
c From 2021				
dFrom 2022 318,890.				
eFrom 2023 36,366.	255 256			
f Total of lines 3a through e	355,256.			
4 Qualifying distributions for 2024 from				
Part XI, line 4: \$ 4,024,506.			0.	
<b>a</b> Applied to 2023, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		0.		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)  d Applied to 2024 distributable amount	0.			4,024,506.
e Remaining amount distributed out of corpus	0.			4,024,500.
Excess distributions carryover applied to 2024	0.			
(If an amount appears in column (d), the same amount must be shown in column (a).)	355,256.			355,256.
6 Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
<b>d</b> Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2023. Subtract line			_	
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2024. Subtract				
lines 4d and 5 from line 1. This amount must				144,423.
be distributed in 2025  7 Amounts treated as distributions out of				144,443.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2019	•			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2025.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:	•			
a Excess from 2020				
<b>b</b> Excess from 2021				
c Excess from 2022				
d Excess from 2023				
e Excess from 2024				

JAMES S. BOWER FOUNDATION Form 990-PF (2024) 77-0229243 Page 10 Part XIII | Private Operating Foundations (see instructions and Part VI-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2024, enter the date of the ruling **b** Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5) Prior 3 years 2 a Enter the lesser of the adjusted net Tax year **(b)** 2023 (a) 2024 (c) 2022 (d) 2021 (e) Total income from Part I or the minimum investment return from Part IX for each year listed **b** 85% (0.85) of line 2a c Qualifying distributions from Part XI, line 4, for each year listed ..... d Amounts included in line 2c not used directly for active conduct of exempt activities ..... e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i)**b** "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization ..... (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) **Information Regarding Foundation Managers:** a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address of the person to whom applications should be addressed; SEE STATEMENT 17 **b** The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

423601 12-06-24 Form **990-PF** (2024)

JAMES S. BOWER FOUNDATION 77-0229243 Form 990-PF (2024) Page 11 Supplementary Information (continued) Part XIV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year AHA! ATTITUDE HARMONY ACHIEVMENT NONE PC AHA! PEACE BUILDERS: 1209 DE LA VINA STREET, STE A LEADERSHIP AND SOCIAL SANTA BARBARA, CA 93101 EMOTIONAL LEARNING FOR TEENS 15,000. ALL SAINTS-BY-THE-SEA NONE PC JIM BOWER GOLF 83 EUCALYPTUS LANE TOURNAMENT FORE SANTA BARBARA, CA 93108 COMMUNITY OUTREACH 20,000. AT STILL UNIVERSITY OF HEALTH NONE ЬC BACHELOR'S AND SCIENCES MASTER'S DEGREE 800 W JEFFERSON STREET PROGRAMS IN SOCIAL KIRKSVILLE, MO 63501 work 25,000. BLUE SKY SUSTAINABLE LIVING CENTER NONE ЬC RESILIENT CUYAMA PO BOX 271 VALLEY NEW CUYAMA, CA 93254 30,000. CARPINTERIA CHILDREN'S PROJECT NONE PC EARLY CHILDHOOD 5201 8TH STREET, STE 100 EDUCATION & FAMILY CARPINTERIA, CA 93013 RESOURCE CENTER 290,000. SEE CONTINUATION SHEET(S) 3,170,750. 3a Total **b** Approved for future payment NONE

Form **990-PF** (2024)

Total

Form 990-PF (2024)

JAMES S. BOWER FOUNDATION

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Part XV-A	Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
	(a) Business	<b>(b)</b> Amount	(C) Exclu- sion	<b>(d)</b> Amount	Related or exempt function income
Program service revenue:	code		code	7 tillount	Tunodon moonio
a INTEREST INCOME ON					
b PROGRAM-RELATED			1 4	4 105	
c INVESTMENT			14	4,185.	
d					
e					
f					
<b>g</b> Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments			14		
Dividends and interest from securities			14	967,983.	
Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property			16	788,891.	
Net rental income or (loss) from personal				,	
property					
Other investment income			18	12,535.	
Gain or (loss) from sales of assets other			+	12,555.	
			18	898,884.	
than inventory			+ + 3	0,004.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
<u>a</u>					
b					
c					
c					
c d e Subtotal. Add columns (b), (d), and (e)			•	2,747,828.	
c					
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)					
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)				13	
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XV-B Relationship of Activities t	to the Acco	omplishment of l	Exemp	t Purposes	2,747,82
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities to the substitution of the substit	to the Acco	omplishment of I	Exemp	t Purposes	2,747,828
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XV-B Relationship of Activities t	to the Acco	omplishment of I	Exemp	t Purposes	2,747,828
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities t ine No.   Explain below how each activity for which inco	to the Acco	omplishment of I	Exemp	t Purposes	2,747,828
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities to the substitution of the substit	to the Acco	omplishment of I	Exemp	t Purposes	2 , 747 , 828 2 lishment of
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities t ine No.   Explain below how each activity for which inco	to the Acco	omplishment of I	Exemp	t Purposes	2,747,828
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities to the substitution of the substit	to the Acco	omplishment of I	Exemp	t Purposes	2,747,828
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities to the substitution of the substit	to the Acco	omplishment of I	Exemp	t Purposes	2,747,82
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities to the substitution of the substit	to the Acco	omplishment of I	Exemp	t Purposes	2,747,82
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities t ine No.   Explain below how each activity for which inco	to the Acco	omplishment of I	Exemp	t Purposes	2,747,82
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities to the substitution of the substit	to the Acco	omplishment of I	Exemp	t Purposes	2,747,82
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities to the substitution of the substit	to the Acco	omplishment of I	Exemp	t Purposes	2,747,82
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities to the substitution of the substit	to the Acco	omplishment of I	Exemp	t Purposes	2,747,82
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities to the substitution of the substit	to the Acco	omplishment of I	Exemp	t Purposes	2,747,82
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities to the substitution of the substit	to the Acco	omplishment of I	Exemp	t Purposes	2,747,82
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities t  ine No. Explain below how each activity for which inco	to the Acco	omplishment of I	Exemp	t Purposes	2,747,82
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities to the substitution of the substit	to the Acco	omplishment of I	Exemp	t Purposes	2,747,82
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities to the substitution of the substit	to the Acco	omplishment of I	Exemp	t Purposes	2,747,82
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities t  ine No. Explain below how each activity for which inco	to the Acco	omplishment of I	Exemp	t Purposes	2,747,82
c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) 6 We worksheet in line 13 instructions to verify calculations.)  Part XV-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acco	omplishment of I	Exemp	t Purposes	2,747,82

Form 990-PF (2024) JAMES S. BOWER FOUNDATION 77-0229243

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

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		Exempt Organi	izations							
1	Did the	organization directly or indir	ectly engage in any	of the followin	ng with any other organization	on described in secti	on 501(c)		Yes	No
	(other t	han section 501(c)(3) organi	izations) or in sectio	n 527, relatin	g to political organizations?					
а	Transfe	rs from the reporting founda	ition to a noncharital	ole exempt or	ganization of:					
	(1) Cas	sh						1a(1)		Х
		er assets						1a(2)		X
b		ansactions:								
	(1) Sal	es of assets to a noncharitat	ole exempt organizat	ion				1b(1)		Х
		rchases of assets from a nor						1b(2)		X
		ntal of facilities, equipment, o						1b(3)		Х
		mbursement arrangements						1b(4)		Х
	( <b>5</b> ) Loa	ans or loan guarantees						1b(5)		Х
	(6) Per	formance of services or mer	mbership or fundrais	sing solicitatio	ons			1b(6)		Х
C		of facilities, equipment, mai						1c		Х
		swer to any of the above is '						ther ass	ets,	
		ces given by the reporting fo	· · ·	-	• •	-			•	
		(d) the value of the goods, of				·				
a)∟	ine no.	(b) Amount involved	(c) Name of	noncharitable	e exempt organization	(d) Description	of transfers, transactions, and s	haring ar	rangeme	nts
				N/A						
	-									
2 0	le the fe	undation directly or indirect	ly affiliated with or r	alated to one	or more tay exempt organi	izations described				
Za		on 501(c) (other than section					Г	Yes	x	No
h				221			∟	169	_ 21	_ NO
U	ii res,	complete the following sche (a) Name of orga			(b) Type of organization		(c) Description of relationsh	in		
		N/A	umzation		(b) Type of organization	<u> </u>	(b) Description of relations	ip		
		N/A				+				
						+				
						-				
	Ur	nder penalties of perjury, I declare	that I have examined th	is return, includ	ing accompanying schedules an	Indistatements, and to the	e best of my knowledge			
Qi,		d belief, it is true, correct, and co					er has any knowledge.	the IRS o	discuss t e prepar	:his er
Ηe	ere				I	DDECTDEN	sho	wn below	? See ins	str. □
		anature of officer or tructee			Data	PRESIDEN		✓ Yes		J No
	اد	gnature of officer or trustee		Preparer's s	Date	Title Date	Check   if PTIN			
		Preparer's name		riepaiei SS	iyiiatui <del>t</del>	Date	self-employed			
D-	id	CAMILED THE 15	3 (13 TTT 3 TT				' '	1170	700	
	iid opera	CATHERINE M		DT 005 ~	100D 11D			$\frac{178}{2000}$		
	epare		HINSON &	RFOODG	оор, ггь		Firm's EIN 95-085	, 8 5 B	9	
US	se Onl				A	- 202				
		•			STREET, SUIT	E 303				
		SAN'	TA BARBAR	A, CA	93101		Phone no. 805-96			
							Fo	rm <b>99</b> 0	)-PF	(2024)

Public Disclosure (Public Disclosure Open Part IV 77-0229243 PAGE 1 OF 1

JAMES S. BOWER FOUNDATION

Part IV Capital Gains and Losses for Tax on Investment Income (**b)** How acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold P - Purchase D - Donation 2-story brick warehouse, or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) 1a CHARLES SCHWAB #7784 12/31/2312/31/24 b LEGACY VENTURE X P 12/31/2312/31/24 c LAPIS P 12/31/2312/31/24 d LEGACY NALANDA P 12/31/23|12/31/24  $\overline{\mathtt{P}}$ e LEGAL & GENERAL S&P 500 12/31/2312/31/24 12/31/2312/31/24 f LEGACY VENTURE IX P 12/31/2312/31/24 q LEGACY VENTURE XI P h CORTEN CAPITAL I P 12/31/2312/31/24 CAPITAL GAINS DIVIDENDS m n 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 5,728,718 5,735,328 -6,610.а 1,595. 1,595. b <u>18,</u>772. 18,772. 16,627.16,627. d 439,027. 439,027. 6,420. 6,420. <u>613.</u> 613. 1,029. 1,029. h 421,411. 421,411. m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any -6,610. a 1,595. b 18,772. С 16,627. 439,027. е 6,420. 613. 1,029. 421,411. m n 0  $\textbf{2} \quad \text{Capital gain net income or (net capital loss)} \quad \cdots \quad \left\{ \begin{array}{l} \text{If gain, also enter in Part I, line 7} \\ \text{If (loss), enter "-0-" in Part I, line 7} \end{array} \right\}$ 898,884. 2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 N/A 3

Part XIV Supplementary Information 3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual,	Foundation	Durnoss of great or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CENTER FOR URBAN AGRICULTURE AT	NONE	PC	PHASE 1 OF THE	
FAIRVIEW GARDENS			CAMPAIGN TO REDESIGN	
598 N FAIRVIEW AVENUE			AND REBUILD FAIRVIEW	
GOLETA, CA 93117			GARDENS FARM	100,000.
CHILD ABUSE LISTENING MEDIATION INC.	NONE	PC	COALITION CONSULTANT	
1236 CHAPALA STREET			REGARDING PAYMENT	
SANTA BARBARA, CA 93101			REFORM; INVEST IN	
			INFRASTRUCTURE &	
			EXCELLENCE	150,000
COASTAL RANCHES CONSERVANCY	NONE	₽C	GAVIOTA COAST TASK	
68 HOLLISTER RANCH ROAD			FORCE PROJECT	
GAVIOTA, CA 93117				20,000
COMMUNITY ENVIRONMENTAL COUNCIL, INC.	NONE	PC	CLIMATE CHANGE 50TH	
26 W ANAPAMU STREET, 2ND FLOOR			ANNIVERSARY CAMPAIGN	
SANTA BARBARA, CA 93101				400,000
·				,
COMMUNITY INITIATIVES	NONE	PC	CENTRAL COAST CLIMATE	
1000 BROADWAY, STE 480	NONE		JUSTICE NETWORK	
OAKLAND, CA 94607			Sobiler Hermon	30,000.
COUNCIL ON ALCOHOLISM & DRUG ABUSE	NONE	D.C.	THE COMMINITAL CARTAL	
PO BOX 28	NOINE	PC	THE COMMUNITY CAPITAL CAMPAIGN	
SANTA BARBARA, CA 93102			CAMPAIGN	50,000.
BANTA BARBARA, CA 93102				30,000.
COURT APPOINTED SPECIAL ADVOCATES OF	NONE	PC	EARLY YEARS ADVOCACY	
SANTA BARBARA COUNTY			PROGRAM	
118 E FIGUEROA STREET				
SANTA BARBARA, CA 93101				10,000.
DIGNITYMOVES	NONE	PC	INTERIM SUPPORTIVE	
2406 BUSH STREET			HOUSING IN SANTA	
SAN FRANCISCO, CA 94115			BARBARA COUNTY	50,000.
ENVIRONMENTAL DEFENSE CENTER	NONE	PC	SANTA BARBARA CHANNEL	
906 GARDEN STREET			CLEAN ENERGY	
SANTA BARBARA, CA 93101			TRANSITION PROJECT	20,000.
FAMILY SERVICE AGENCY OF SANTA	NONE	PC	LOMPOC COMMUNITY	
BARBARA	NOME		CHANGERS PROGRAM	
BARBAKA 123 W GUTIERREZ STREET			CHANGERS FROGRAM	
125 W COLLEWING DIVERI			1	15,000.
SANTA BARBARA, CA 93101	I .			

# Public Disclosure Copy JAMES S. BOWER FOUNDATION

Part XIV Supplementary Information

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the				
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
FAMILY THERAPY INSTITUTE	NONE	PC	SHARED CROSSING	
23 W MISSION STREET			RESEARCH INITIATIVE	
SANTA BARBARA, CA 93101				10,000.
FREEDOM 4 YOUTH	NONE	PC	EDUCATION & YOUTH	
187 S PATTERSON AVENUE			SUPPORT PROGRAMMING	30 000
SANTA BARBARA, CA 93111			EXPANSION	30,000.
EUDID HOD GANIIA DADDADA TNG	NONE	D.C.	MDDN C GADAGIMY	
FUND FOR SANTA BARBARA, INC. 1524 1/2 STATE STREET	NONE	PC	NPRN & CAPACITY	
SANTA BARBARA, CA 93101			BUILDING; SOCIAL JUSTICE ACADEMY	80,000.
DANIA BARDARA, CA 93101			DUSTICE ACADEMI	00,000.
FUTURE LEADERS OF AMERICA	NONE	₽C	CORE OPERATING SUPPORT	
402 E GUTIERREZ STREET	NOINE	FC	CORE OPERATING SUPPORT	
SANTA BARBARA, CA 93101				50,000.
				,
GATEWAY EDUCATIONAL SERVICES	NONE	PC	LIFT EVERY STUDENT	
185 S PATTERSON AVENUE, STE E				
GOLETA, CA 93111				25,000.
GAVIOTA COAST CONSERVANCY	NONE	₽C	GAVIOTA COAST	
PO BOX 1099			CONSERVANCY OPERATIONS	
GOLETA, CA 93116				50,000.
GIRLS INC. OF CARPINTERIA	NONE	₽C	CORE PROGRAM SUPPORT	
5315 FOOTHILL ROAD CARPINTERIA, CA 93013				20,000.
				·
GIRLS INC. OF GREATER SANTA BARBARA	NONE	₽C	SBUSD LUNCHTIME	
PO BOX 236			PROGRAM	
SANTA BARBARA, CA 93102				15,000.
HEALING JUSTICE SANTA BARBARA	NONE	₽C	MENTORSHIP FOR	
PO BOX 8628			BLACK/AFRICAN AMERICAN	
SANTA BARBARA, CA 93101			STUDENTS	15,000.
HOSPICE OF SANTA BARBARA, INC.	NONE	PC	ADVANCE CARE PLANNING	
2050 ALAMEDA PADRE SERRA			AND PATIENT CARE	222 502
SANTA BARBARA, CA 93101  Total from continuation sheets		1	SERVICES	222,500.

Part XIV Supplementary Information			<del>_</del>	
3 Grants and Contributions Paid During the		_		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
KINGDOM CAUSES LONG BEACH	NONE	₽C	LOMPOC HUMAN	
946 LINDEN AVENUE			TRAFFICKING PREVENTION	
LONG BEACH, CA 90813			PILOT	25,000.
LEADING FROM WITHIN	NONE	PC	IMPLEMENTING SHIFTS IN	
PO BOX 806			OUR SOCIAL SECTOR	
SANTA BARBARA, CA 93102				20,000.
LEAP: LEARN. ENGAGE. ADVOCATE.	NONE	PC	GENERAL OPERATING	
PARTNER. (FORMERLY IVYP)	10112		SUPPORT	
PO BOX 1332				
GOLETA, CA 93116				175,000.
LEGACY PHILANTHROPY WORKS	NONE	PC	BRIDGES TO RESILIENCE	
521 SANTA BARBARA STREET	NONE		CONFERENCE;	
SANTA BARBARA, CA 93101			VANDENBERG SENTINEL	
,			LANDSCAPE PARTNERSHIP	55,000.
				•
LOMPOC TEEN CENTER	NONE	PC	YES I CAN/SI SE PUEDE,	
732 N H STREET	10112		LOMPOC TEEN CENTER	
LOMPOC, CA 93436				25,000.
				-
LOMPOC VALLEY COMMUNITY HEALTHCARE	NONE	PC	LOMPOC EQUITY PROJECT	
ORGANIZATION				
PO BOX 368 LOMPOC, CA 93438				30,000.
	17017			
LOS PADRES FOREST WATCH, INC. PO BOX 831	NONE	PC	ROOM TO ROAM PROJECT	
SANTA BARBARA, CA 93102				25,000.
MARTIN LUTHER KING JR. COMMITTEE	NONE	PC	GENERAL OPERATING	
PO BOX 371			SUPPORT	
ANNAPOLIS, MD 21404				10,000.
NATURAL CAPITALISM SOLUTIONS	NONE	PC	CLEAN COALITION	
11823 N 75TH STREET				
LONGMONT, CO 80503				60,000.
NEW VENTURE FUND	NONE	PC	AMERICA VOTES	
1828 L STREET NW, STE 300A				
WASHINGTON, DC 20036				50,000.
Total from continuation sheets				

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
OPENMINDS MENTAL HEALTH SERVICES	NONE	PC	PSYCHOLOGICAL	
1919 STATE STREET, STE 303			ASSESSMENT TRAINING	
SANTA BARBARA, CA 93101			PROGRAM	20,000.
SAN MARCOS HIGH SCHOOL ROYAL PRIDE	NONE	₽C	SAN MARCOS BUILDING	
FOUNDATION	NONE		COMMUNITY WELLNESS	
4750 HOLLISTER AVENUE			PROJECT	
SANTA BARBARA, CA 93110				30,000.
				·
a.v.a.v. av. a				
SANSUM CLINIC	NONE	PC	PALLIATIVE CARE &	
PO BOX 1200			ADVANCED CARE PLANNING	50,000.
SANTA BARBARA, CA 93102				30,000.
SANTA BARBARA ALTERNATIVE TO VIOLENCE	NONE	PC	SBUSD PROGRAMMING AND	
PROJECT			CASE MANAGEMENT	
PO BOX 3294				
SANTA BARBARA, CA 93130				40,000.
SANTA BARBARA BOTANIC GARDEN, INC.	NONE	PC	BIODIVERSITY IMPACT &	
1212 MISSION CANYON ROAD	10112		ADVOCACY INITIATIVE	
SANTA BARBARA, CA 93105				20,000.
				·
SANTA BARBARA COTTAGE HOSPITAL	NONE	PC	COTTAGE/PEAC OUTREACH	
FOUNDATION			PROGRAM; GOALS OF CARE	
400 W PUEBLO STREET			PROGRAM	90 000
SANTA BARBARA, CA 93105				80,000.
SANTA BARBARA EDUCATION FOUNDATION	NONE	PC	INNOVATE DP; MISSION	
1330 STATE STREET, STE #201			SCHOLARS; OLLIN	
SANTA BARBARA, CA 93101			PROJECT; KIND MIND	
			PROGRAM	112,000.
SANTA BARBARA FOUNDATION	NONE	₽C	YOUTH MENTAL HEALTH 4R	
15 E CARRILLO STREET	NONE		FUND; ROOTED SANTA	
SANTA BARBARA, CA 93101			BARBARA; PARTNERSHIP	
,			FOR EXCELLENCE & NPRN	80,000.
SANTA BARBARA MUSEUM OF NATURAL	NONE	PC	REPATRIATION OF NATIVE	
HISTORY			ANCESTORS & SACRED	
2559 PUESTA DEL SOL			OBJECTS	E 000
SANTA BARBARA, CA 93105				5,000.
SANTA BARBARA PARTNERS IN EDUCATION	NONE	PC	PROGRAM EVALUATION	
3970 LA COLINA ROAD #9			PROJECT PHASE II	
SANTA BARBARA, CA 93110				25,000.
Total from continuation sheets				

Public Disclosure Copy

JAMES S. BOWER FOUNDATION

Part XIV Supplementary Information 77-0229243

3 Grants and Contributions Paid During the		1		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
SARAH HOUSE	NONE	₽C	GENERAL OPERATING	
2612 MODOC ROAD			SUPPORT	
SANTA BARBARA, CA 93105				30,000
SAVIE HEALTH CORP	NONE	₽C	SAVIE HEALTH CLINIC IN	
1111 E OCEAN AVENUE # 2			LOMPOC	
LOMPOC, CA 93436				25,000
STORYTELLER CHILDREN'S CENTER, INC.	NONE	PC	GENERAL OPERATING	
2115 STATE STREET			SUPPORT	
SANTA BARBARA, CA 93105				40,000
THE CHELSEY INITIATIVE	NONE	PC	LONG COVID MEDICAL	
721 GRAND LAKES DRIVE			EDUCATION PROGRAM	10 000
BATON ROUGE, LA 70810				10,000
THE DALMATIAN DREAMS FOUNDATION DBA	NONE	PC	DREAMS FOR SANTA	
DREAM FOUNDATION			BARBARA SENIORS	
1528 CHAPALA STREET, #304				
SANTA BARBARA, CA 93101				5,000
THE FREEDOM TO CHOOSE PROJECT	NONE	₽C	GENERAL OPERATING	
315 MEIGS ROAD, STE A295			SUPPORT	10.000
SANTA BARBARA, CA 93109				10,000
THE VOTER PARTICIPATION CENTER	NONE	PC	VOTER MOBILIZATION	
122 BRYANT STREET NW 2 WASHINGTON, DC 20001				50,000
TO A NOTITION LIGHT	NONE	₽C	MOM'S INFANT CARE	
TRANSITION HOUSE 425 E COTA STREET	MOINE		CENTER	
SANTA BARBARA, CA 93101				25,000
·				,
UNITE TO LIGHT	NONE	PC	PILOTING CLEAN,	
1117 STATE STREET, #19			RELIABLE ENERGY FOR	
SANTA BARBARA, CA 93101			GLOBAL CLIMATE ACTION	150,000
IINITHEN WAY OF CANIMA DADDADA COIMINA	NONE	₽C	ACADEMIC ACUTETIEMENTO	
UNITED WAY OF SANTA BARBARA COUNTY, INC.	NOINE		ACADEMIC ACHIEVEMENT PARTNERSHIP	
320 E GUTIERREZ STREET				
SANTA BARBARA, CA 93101				25,000
Total from continuation sheets				

Part XIV Supplementary Information								
3 Grants and Contributions Paid During the								
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient	oonans anon					
MINGEMONE GOLLEGE	NONE		DELAG MUDGING PROGRAM					
WESTMONT COLLEGE 955 LA PAZ ROAD	NONE	PC	PEAC NURSING PROGRAM					
SANTA BARBARA, CA 93108				14,250.				
Diametric Control of the Control of								
WILDERNESS YOUTH PROJECT	NONE	₽C	GENERAL OPERATING					
5386 HOLLISTER, STE D			SUPPORT					
SANTA BARBARA, CA 93111				30,000.				
WOMEN'S ECONOMIC VENTURES OF SANTA	NONE	PC	FINANCIAL EMPOWERMENT					
BARBARA	NONE		PARTNERSHIP W/PEAC					
21 E CANON PERDIDO STREET, STE 301			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
SANTA BARBARA, CA 93101				7,000.				
WORKMONEY FOUNDATION INC	NONE	PC	GENERAL OPERATING					
790 N MILWAUKEE STREET, STE 300			SUPPORT	E0 000				
MILWAUKEE, WI 53202				50,000.				
WORLD TELEHEALTH INITIATIVE	NONE	PC	VOLUNTEERISM TO					
7402 HOLLISTER AVENUE			ALLEVIATE PROVIDER					
SANTA BARBARA, CA 93117			BURNOUT	20,000.				
Total from continuation sheets								

Department of the Treasury

### **Underpayment of Estimated Tax by Corporations**

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

OMB No. 1545-0123

Internal Revenue Service

Go to www.irs.gov/Form2220 for instructions and the latest information.

2024

JAMES S. BOWER FOUNDATION

**Employer identification number** 77-0229243

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the

_	imated tax penalty line of the corporation's income tax	retur	n, but <b>do not</b> attach F	OIIII 2220.					
ŀ	Part I Required Annual Payment								
1	Total tax (see instructions)							1	32,669.
2 :	a Personal holding company tax (Schedule PH (Form 1120), lin	e 26)	included on line 1		2a				
	b Look-back interest included on line 1 under section 460(b)(2)								
	contracts or section 167(g) for depreciation under the income				2b				
	(0)		***************************************						
(	Credit for federal tax paid on fuels (see instructions)				2c				
	d Total. Add lines 2a through 2c							2d	
3	Subtract line 2d from line 1. If the result is less than \$500, do	<b>not</b> c	omplete or file this form.	The corpor	ation				
	does not owe the penalty							3	32,669.
4	Enter the tax shown on the corporation's 2023 income tax ret								
	or the tax year was for less than 12 months, skip this line and	enter	the amount from line 3 o	on line 5				4	31,361.
5	Required annual payment. Enter the smaller of line 3 or line			-					
_	enter the amount from line 3							5	31,361.
ŀ	Part II Reasons for Filing - Check the boxes belo	w tha	it apply. If any boxes are	checked, th	e corpor	ation	must file Form 222	20	
_	even if it does not owe a penalty. See instructions.								
6	The corporation is using the adjusted seasonal install								
0	X The corporation is using the annualized income install			n the prior	voor'o to				
8	The corporation is a "large corporation" figuring its firs	streq	ulleu ilistallitietit baseu o	ii tile prioi	year 5 ia	х.			
Г	Part III Figuring the Underpayment		(a)		/ <b>L</b> \		(2)		(4)
٥	Installment due dates. Enter in columns (a) through (d) the	$\vdash$	(a)		(b)	$\dashv$	(c)	-	(d)
9	<b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th ( <b>Form 990-PF filers:</b> Use 5th month),								
	6th, 9th, and 12th months of the corporation's tax year	9	05/15/24	06/	15/2	<u> </u>	09/15/2	24	12/15/24
10	Required installments. If the box on line 6 and/or line 7	9	03/13/24	007	13/2	-	05/15/2	<u> </u>	12/13/24
10	above is checked, enter the amounts from Sch A, line 38. If								
	the box on line 8 (but not 6 or 7) is checked, see instructions								
	for the amounts to enter. If none of these boxes are checked,								
	enter 25% (0.25) of line 5 above in each column	10							
11	Estimated tax paid or credited for each period. For	"							
•	column (a) only, enter the amount from line 11 on line 15.								
	See instructions	11	34,516.						
	Complete lines 12 through 18 of one column	<del>                                     </del>	, ,						
	before going to the next column.								
12	Enter amount, if any, from line 18 of the preceding column	12		3	4,51	6.	34,51	L6.	34,516.
	Add lines 11 and 12	13			4,51		34,51		34,516.
	Add amounts on lines 16 and 17 of the preceding column	14							
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	34,516.	3	4,51	6.	34,51	L6.	34,516.
	If the amount on line 15 is zero, subtract line 13 from line	П							
	14. Otherwise, enter -0-	16							
17	Underpayment. If line 15 is less than or equal to line 10,								
	subtract line 15 from line 10. Then go to line 12 of the next								
	column. Otherwise, go to line 18	17							
18	<b>Overpayment.</b> If line 10 is less than line 15, subtract line 10	$  \  $							
	from line 15. Then go to line 12 of the next column	18	34,516.		4,51		34,51	L6.	
Go	to Part IV on page 2 to figure the penalty. Do not go to Part IV	√ if th	ere are no entries on lin	e 17 - no p	enalty is	owed	l.		

For Paperwork Reduction Act Notice, see separate instructions.

FORM 990-PF

Form 2220 (2024)

JAMES S. BOWER FOUNDATION

77-0229243 Pag

Page 2

		(a)	(b)	(c)	(d)
Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier.  (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month.  Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19				
Number of days from due date of installment on line 9 to the					
date shown on line 19	20				
Number of days on line 20 after 4/15/2024 and before 7/1/2024	21				
Underpayment on line 17 x Number of days on line 21 x 8% (0.08)	22	\$	\$	\$	\$
Number of days on line 20 after 6/30/2024 and before 10/1/2024	23				
Underpayment on line 17 x Number of days on line 23 x 8% (0.08) 366	24	\$	\$	\$	\$
Number of days on line 20 after 9/30/2024 and before 1/1/2025	25				
Underpayment on line 17 x Number of days on line 25 x 8% (0.08)	26	\$	\$	\$	\$
Number of days on line 20 after 12/31/2024 and before 4/1/2025	27				
Underpayment on line 17 x Number of days on line 27 x 7% (0.07) 365	28	\$	\$	\$	\$
Number of days on line 20 after 3/31/2025 and before 7/1/2025	29				
Underpayment on line 17 x Number of days on line 29 x *% 365	30	\$	\$	\$	\$
Number of days on line 20 after 6/30/2025 and before 10/1/2025	31				
Underpayment on line 17 x Number of days on line 31 x *% 365	32	\$	\$	\$	\$
Number of days on line 20 after 9/30/2025 and before 1/1/2026	33				
Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$	\$
Number of days on line 20 after 12/31/2025 and before 3/16/2026	35				
Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$	\$
	37	l e	\$	<b> </b>	\$

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

Form **2220** (2024)

0.

38 \$

line for other income tax returns

JAMES S. BOWER FOUNDATION

FORM 990-PF Form 2220 (2024) Page 3

#### Adjusted Seasonal Installment Method and Annualized Income Installment Method Schedule A See instructions.

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

### **Adjusted Seasonal Installment Method**

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

See instructions.					
		(a)	(b)	(c)	(d)
1 Enter taxable income for the following periods.		First 3 months	First 5 months	First 8 months	First 11 months
a Tax year beginning in 2021	1a				
<b>b</b> Tax year beginning in 2022	1b				
<b>c</b> Tax year beginning in 2023	1c				
2 Enter taxable income for each period for the tax year beginning in					
2024. See the instructions for the treatment of extraordinary items	2				
		First 4 months	First 6 months	First 9 months	Entire year
<b>3</b> Enter taxable income for the following periods.		1 1131 4 1110111113	Thot o months	1 1131 3 1110111113	Littiro your
<b>a</b> Tax year beginning in 2021	3a				
<b>b</b> Tax year beginning in 2022	3b				
• Tay year beginning in 2022	,				
c Tax year beginning in 2023	3c				
4 Divide the amount in each column on line 1a by the amount in column (d) on line 3a	4				
5 Divide the amount in each column on line 1b by the	+				
amount in column (d) on line 3b	5				
6 Divide the amount in each column on line 1c by the					
amount in column (d) on line 3c	6				
amount in obtainin (a) on time oo	<del>                                     </del>				
7 Add lines 4 through 6	7				
•					
8 Divide line 7 by 3.0	8				
9a Divide line 2 by line 8	9a				
<b>b</b> Extraordinary items (see instructions)	9b				
c Add lines 9a and 9b	9с				
10 Figure the tax on the amt on In 9c using the instr for Form					
1120, Sch J, line 1, or comparable line of corp's return $_{\dots}$	10				
<b>11a</b> Divide the amount in columns (a) through (c) on line 3a					
by the amount in column (d) on line 3a	11a				
<b>b</b> Divide the amount in columns (a) through (c) on line 3b					
by the amount in column (d) on line 3b	11b				
<b>c</b> Divide the amount in columns (a) through (c) on line 3c					
by the amount in column (d) on line 3c	11c				
12 Add lines 11a through 11c	12				
13 Divide line 12 by 3.0	13				
14 Multiply the amount in columns (a) through (c) of line 10					
by columns (a) through (c) of line 13. In column (d), enter	,,				
the amount from line 10, column (d)	14				
15 Enter any alternative minimum tax for each payment	45				
period. See instructions	15				
16 Enter any other taxes for each navment period. See instr	16				
<ul><li>16 Enter any other taxes for each payment period. See instr.</li><li>17 Add lines 14 through 16</li></ul>	17				
18 For each period, enter the same type of credits as allowed	<del>  ''  </del>				
on Form 2220, lines 1 and 2c. See instructions	18				
19 Total tax after credits. Subtract line 18 from line 17. If	<del>-"</del>		1		
zero or less, enter -0-	19				
			I	I.	Form 2000 (2024)

JAMES S. BOWER FOUNDATION

Form 2220 (2024) FORM 990-PF Page 4

Part II	Annualized Income Installment M	letho	d			
			(a)	(b)	(c)	(d)
			First 2	First 3	First 6	First 9
<b>20</b> Annua	alization periods (see instructions)	20	months	months	months	months
	taxable income for each annualization period. See	-0	montais	montais	montais	montais
	ctions for the treatment of extraordinary items	21				
modu	cutons for the trouthout of extraordinary froms	<del></del> -				
22 Annua	alization amounts (see instructions)	22	6.000000	4.000000	2.000000	1.333330
<b>23a</b> Annua	alized taxable income. Multiply line 21 by line 22	23a				
	ordinary items (see instructions)	23b				
	nes 23a and 23b	23c				
	the tax on the amount on line 23c using the					
-	ctions for Form 1120, Schedule J, line 1,					
	nparable line of corporation's return	24				
	any alternative minimum tax for each payment					
	I. See instructions	25				
•						
26 Enter a	any other taxes for each payment period. See instr.	26				
27 Total t	ax. Add lines 24 through 26	27				
28 For ea	ch period, enter the same type of credits as allowed					
on For	rm 2220, lines 1 and 2c. See instructions	28				
29 Total t	ax after credits. Subtract line 28 from line 27. If					
zero o	r less, enter -0-	29				
30 Applic	able percentage	30	25%	50%	75%	100%
31 Multip	ly line 29 by line 30	31				
Part III	Required Installments					
Note:	Complete lines 32 through 38 of one column		1st	2nd	3rd	4th
before	completing the next column.		installment	installment	installment	installment
-	Part I or Part II is completed, enter the amount in					
	column from line 19 or line 31. If both parts are					
	leted, enter the <b>smaller</b> of the amounts in each	_	_	_	_	•
	n from line 19 or line 31	32	0.	0.	0.	0.
	ne amounts in all preceding columns of line 38.					
	structions	33				
	ted seasonal or annualized income installments.	34				
	act line 33 from line 32. If zero or less, enter -0 25% (0.25) of line 5 on page 1 of Form 2220 in	34	+			
	column. <b>Note:</b> "Large corporations," see the					
	ations for line 40 for the amounts to anter	35	7,840.	7,841.	7,840.	7,840.
	act line 38 of the preceding column from line 37 of	"	7,040•	,,041.	7,040	7,040.
	eceding column	36		7,840.	15,681.	23,521.
alo più	socaring solution			.,0230		
37 Add lir	nes 35 and 36	37	7,840.	15,681.	23,521.	31,361.
	red installments. Enter the smaller of line 34 or	<del>  </del>	,,,,,,,	,	,	,
	7 here and on page 1 of Form 2220, line 10.					
	structions	38	0.	0.	0.	0.

Form **2220** (2024)

77-0229243

\*\* ANNUALIZED INCOME INSTALLMENT METHOD USING STANDARD OPTION

FORM 990-PF INTER	EST ON SAVING	S AND T	EMPOR	ARY CA	SH IN	IVESTMENTS	ST	ATEMENT	1
SOURCE			(A) EVENUE R BOOKS			(B) IVESTMENT ICOME		(C) ADJUSTED ET INCOM	E
INTEREST INCOME PASSTHROUGH TAX EX	EMPT INCOME		54,74 20,60			54,745.			
TOTAL TO PART I, L	INE 3		75,3			54,745.			
FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM S	SECUR	RITIES	ST	ATEMENT	2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	1S	(A REVEI PER B	NUE	(B) NET INVES MENT INCO		(C) ADJUSTI NET INCO	
DIVIDEND INCOME	1,389,394.	421,	411.	967	,983.	967,98	33.		
TO PART I, LINE 4	1,389,394.	421,	411.	967	,983.	967,98	33.		
FORM 990-PF		RENTAL	INCOM	<del></del> 3			ST	ATEMENT	3
KIND AND LOCATION (	OF PROPERTY					ACTIVITY NUMBER	RE	GROSS NTAL INC	OME
PASSTHROUGH RENTAL	INCOME					6		788,89	91.
TOTAL TO FORM 990-1	PF, PART I, L	INE 5A						788,89	91.
FORM 990-PF		OTHER	RINCOL	ME			ST	ATEMENT	4
DESCRIPTION			REV	(A) VENUE BOOKS		(B) IET INVEST- IENT INCOME		(C) ADJUSTEI NET INCOI	
OTHER REVENUE FROM				10,4	52 <b>.</b>	10,452	<u> </u>		
PARTNERSHIP UNRELATINCOME				2,0	83.	0	).		
INTEREST INCOME ON INVESTMENT	PROGRAM-RELA	TED		4,1	85.	4,185	j.		
TOTAL TO FORM 990-1	PF, PART I, L	INE 11		16,7	20.	14,637	<u> </u>		

FORM 990-PF	LEGAL	FEES	S'	PATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	3,197.	320.		2,877.
TO FM 990-PF, PG 1, LN 16A	3,197.	320.		2,877.
FORM 990-PF	ACCOUNTI	NG FEES	S'	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
THOMAS RIDGE CPA HUTCHINSON & BLOODGOOD LLP	14,450. 14,199.	4,335. 4,260.		10,115. 9,939.
TO FORM 990-PF, PG 1, LN 16B	28,649.	8,595.		20,054.
FORM 990-PF C	THER PROFES	SIONAL FEES	S'	ratement 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT CONSULTING	100,000.	100,000.		0. 5,160.
TO FORM 990-PF, PG 1, LN 16C	107,371.	102,211.		5,160.
FORM 990-PF	TAX	ES	S'	ratement 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL TAXES PROPERTY TAXES FOREIGN TAXES STATE TAXES EXCISE TAXES	41,339. 63. 40,477. 200. 18,187.	5,046. 0. 40,477. 0. 0.		32,714. 63. 0. 200.
TO FORM 990-PF, PG 1, LN 18	100,266.	45,523.		32,977.

FORM 990-PF	OTHER E	XPENSES		STATEMENT 9		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN		(C) ADJUSTEI NET INCOM		
BUSINESS MEALS	12,745.		0.		12.	745.
DUES AND SUBSCRIPTIONS	3,832.		0.		-	832.
OFFICE EXPENSES	6,029.		0.			029.
REPAIRS AND MAINTENANCE	44,042.		,669.			373.
COMPUTER EXPENSES	11,639.		0.		11,	639.
INTERNET	1,755.		0.			755.
INSURANCE	88,401.		,209.			192.
POSTAGE & DELIVERY	278.		0.			278.
TELEPHONE	3,079.		256.		2,	823.
UTILITIES	3,548.		296.		3,	253.
PAYROLL PROCESSING	5,007.		0.			007.
BUSINESS INSURANCE	34,337.		0.		34,	337.
SECURITY	724.		0.		1	725.
NONDEDUCTIBLE PASSTHROUGH						
EXPENSES	6,641.		0.			0.
PORTFOLIO DEDUCTIONS FROM						
PASSTHROUGH	94,902.		,902.			0.
BANK SERVICE CHARGES	320.		320.			0.
CAR LEASE - JON	4,800.		720.		4,	080.
WHITE BUFFALO LOAN						
FORGIVENESS	50,000.		0.			0.
TO FORM 990-PF, PG 1, LN 23	372,079.	114	,372.		201,	068.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	10
	VA	LUATION			FAIR MARK	ET
DESCRIPTION	M	IETHOD	B00	K VALUE	VALUE	
MERCER HEDGE FUND INVESTORS S	 SP-I	FMV				
SERIES B	-		9	,960,501.	9,960,	501.
MFS INTL VALUE		FMV		,510,853.	1,510,	
GRANDEUR PEAK INTL		FMV		,445,645.	1,445,	
TRANSAMERICA INTERNATIONAL		FMV		,943,929.	2,943,	
VANGUARD TOTAL BOND MARK		FMV		,015,833.	8,015,	
BOSTON COMMON ESG IMPACT		FMV		,698,207.	1,698,	
BOSTON TRUST WALDEN SMALL		FMV		,260,230.	3,260,	230.
MIROVA GLOBAL SUSTAINABILITY		FMV		,561,000.	3,561,	
NINETY ONE EMERGING MARK		FMV		,203,098.	4,203,	
IMPAX GLOBAL ENVIRONMENTAL		FMV		,856,558.	1,856,	
PIMCO DIVERSIFIED INC		FMV	1	,296,450.	1,296,	450.
TOTAL TO FORM 990-PF, PART II	I, LINE 13		39	,752,304.	39,752,	304.

FORM 990-PF DEPRECIATION OF ASSI	ETS NOT HELD FOR	INVESTMENT	STATEMENT 11
	COST OR	ACCUMULATED	
DESCRIPTION	OTHER BASIS	DEPRECIATION	BOOK VALUE
FURNISHINGS AND EQUIPMENT	86,513.	86,242.	271.
BUILDINGS	777,990.	348,453.	429,537.
ARTWORK	34,457.	0.	34,457.
LAND	1,408,204.	0.	1,408,204.
IMPROVEMENTS	204,800.	27,200.	177,600.
TOTAL TO FM 990-PF, PART II, LN 14	2,511,964.	461,895.	2,050,069.
FORM 990-PF	OTHER ASSETS		STATEMENT 12
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN TOURNAMENT PATIO			
APTS, LLC	18,672,446.	18,456,791.	18,456,791.
INVESTMENT IN 2151 MICHELSON, LP	812,763.	792,144.	792,144.
INVESTMENT IN CITY OFFICE, LP	680,901.	694,328.	694,328.
INVESTMENT IN WILLOW TREE APTS,			
LP	3,630,272.	3,604,035.	3,604,035.
INVESTMENT IN CAMINO DE ORO APTS, LP	700,049.	690,713.	690,713.
INVESTMENT IN CASA DEL LAGO	700,045.	050,715.	050,715.
INVESTORS, LTD	1,869,187.	1,824,732.	1,824,732.
INVESTMENT IN LEGACY VENTURE IX,			
LLC	1,410,115.	1,430,414.	1,430,414.
INVESTMENT IN LAPIS MUNICIPAL	004 551	756 040	756 040
OPPORTUNITIES FUND IV, LP INVESTMENT IN NALANDA INDIA	904,551.	756,848.	756,848.
EQUITY FUND LIMITED	294,647.	332,204.	332,204.
INVESTMENT IN CORTEN CAPITAL I LP	900,192.	1,181,422.	1,181,422.
INVESTMENT IN LEGACY VENTURE X,			
LLC	280,786.	395,855.	395,855.
ACCRUED DIVIDENDS RECEIVABLE	23,944.	40,119.	40,119.
ACCRUED INTEREST RECEIVABLE	1,288.	1,800.	1,800.
INVESTMENT IN LEGACY VENTURE XI	52,230.	178,618.	178,618.
INVESTMENT IN LEGAL & GENERAL S&P	12 005 020	16 226 125	16 226 125
500 EXCISE TAX RECEIVABLE	12,995,830.	16,236,125.	16,236,125.
INVESTMENT IN CORTEN CAPITAL II	20,000. 0.	1,813. 329,750.	1,813. 329,750.
DUE FROM CAMINO DEL ORO	42,500.	329,750. 0.	329,730.
DUE FROM WILLOW TREE	79,431.	0.	0.
TO FORM 990-PF, PART II, LINE 15	43,371,132.	46,947,711.	46,947,711.

JAMES S. BOWER FOUNDATION

FORM 990-PF	OTHER LIABILITIES		STATEMENT	13
DESCRIPTION		BOY AMOUNT	EOY AMOUNT	1
ACCRUED FOREIGN TAX ON DIVIDEND		23,826.	40,1	19.
TOTAL TO FORM 990-PF, PART II,	LINE 22	23,826.	40,1	19.

JAMES	S.	BOWER	FOUNDATION

FORM 990-PF	TRANSFERS FROM CONTROLLED ENTITIES PART VI-A, LINE 11	STATEMENT 14
NAME OF CONTROLLED	ENTITY	EMPLOYER ID NO
TOURNAMENT PATIO APARTMENTS, LLC		20-3359021
ADDRESS		
 26 WEST MICHELTOREN SANTA BARBARA, CA 9		
DESCRIPTION OF TRAN	SFER	
CASH		
		AMOUNT OF TRANSFER
		600,000
TOTAL AMOUNT OF TRANSFERS FROM CONTROLLED ENTITIES		600,000

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TO FORM 990-PF, PART VIII-B, LINE 1

77-0229243

0.

FORM 990-PF SCHEDULE OF CONTROLLED ENTITIES 15 STATEMENT PART VI-A, LINE 11 NAME OF CONTROLLED ENTITY EMPLOYER ID NO 20-3359021 TOURNAMENT PATIO APARTMENTS, LLC ADDRESS EXCESS BUSINESS HOLDING [ ] YES [X] NO 26 WEST MICHELTORENA STREET SANTA BARBARA, CA 93101 FORM 990-PF SUMMARY OF PROGRAM-RELATED INVESTMENTS STATEMENT DESCRIPTION ON MARCH 31, 2021 THE FOUNDATION LOANED \$300,000 TO THE WHITE BUFFALO LAND TRUST (A 501C3 ORGANIZATION). THE INTEREST RATE ON THE LOAN IS 3.75%. AS OF DECEMBER 31, 2024, THE OUTSTANDING BALANCE OF THE NOTE IS \$40,000, WITH AN ACCRUED INTEREST RECEIVABLE OF \$1,800. THE NOTE RECEIVABLE AND ALL UNPAID INTEREST IS DUE ON MARCH 28, 2024. AMOUNT

JAMES S. BOWER FOUNDATION

77-0229243

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FORM 990-PF

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

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

JON CLARK 26 W MICHELTORENA SANTA BARBARA, CA 93101

TELEPHONE NUMBER

805-564-8814

FORM AND CONTENT OF APPLICATIONS

ALL APPLICATIONS DONE ELECTRONICALLY. SEE INSTRUCTIONS AND CONTACT INFO ON WEBSITE (JSBOWERFOUNDATION.ORG)

ANY SUBMISSION DEADLINES

SEE WEBSITE FOR CYCLE SUBMISSION

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE FOUNDATION LIMITS ITS GRANTS TO FOUR CATEGORIES: EDUCATION, SCIENTIFIC, RELIGIOUS AND CHARITABLE

GENERAL EXPLANATION

STATEMENT 18

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

FORM 990-PF, PAGE 5, PART VI-A, LINE 11 - LIST OF CONTROLLED ENTITIES

**EXPLANATION:** 

NAME OF ORGANIZATION OWNERSHIP

TOURNAMENT PATIO APARTMENTS, LLC 26 W. MICHELTORENA STREET SANTA BARBARA, CA 93101 PARTNERSHIP FEDERAL ID #20-3359021 EXCESS BUSINESS HOLDING: NO

100%