

29	28	27	26	25
24				
23	22	21	20	19
18	17	16	15	14
13	12	11	10	9
8	7	6	5	4
3				2

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
Direct Relief6100 Wallace Becknell Road Santa Barbara, CA 931173214	NONE	PC	Disaster Relief - Wildfires in Greece Response	50,000
Direct Relief6100 Wallace Becknell Road Santa Barbara, CA 931173214	NONE	PC	Disaster Relief - Hurricane Florence Response	150,000
Direct Relief6100 Wallace Becknell Road Santa Barbara, CA 931173214	NONE	PC	Improving health access for pediatric cancer patients in underserved communities in Mexico	400,000
<b>Total</b> . . . . . ▶ <b>3a</b>				26,260,041