

EXTENDED TO NOVEMBER 15, 2021

Form **990**

Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

- ▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public Inspection

**A For the 2020 calendar year, or tax year beginning and ending**

**B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return/terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization

**TIDES CENTER**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

**P.O. BOX 29907**

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

**SAN FRANCISCO, CA 94129-0907**

**F** Name and address of principal officer: **JANIECE EVANS - PAGE**

**SAME AS C ABOVE**

**D** Employer identification number

**94-3213100**

**E** Telephone number

**(415) 561-6300**

**G** Gross receipts \$

**268,872,323.**

**H(a)** Is this a group return

for subordinates? ..... ☐ Yes ☒ No

**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

**H(c)** Group exemption number ▶

**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

**J** Website: ▶ **WWW.TIDES.ORG**

**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

**L** Year of formation: **1994**

**M** State of legal domicile: **CA**

**Part I Summary**

Activities & Governance	<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>TIDES CENTER ACCELERATES THE PACE OF SOCIAL CHANGE, WORKING WITH INNOVATIVE PARTNERS TO SOLVE</b>
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a) ..... <b>6</b>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b) ..... <b>6</b>
	<b>5</b>	Total number of individuals employed in calendar year 2020 (Part V, line 2a) ..... <b>993</b>
	<b>6</b>	Total number of volunteers (estimate if necessary) ..... <b>500</b>
		<b>7a</b>
<b>7b</b>		Net unrelated business taxable income from Form 990-T, Part I, line 11 ..... <b>12,375.</b>
Revenue	<b>8</b>	Contributions and grants (Part VIII, line 1h) ..... <b>171,030,552.</b>
	<b>9</b>	Program service revenue (Part VIII, line 2g) ..... <b>27,737,842.</b>
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d) ..... <b>2,188,364.</b>
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) ..... <b>-541,667.</b>
	<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ..... <b>200,415,091.</b>
	Expenses	<b>13</b>
<b>14</b>		Benefits paid to or for members (Part IX, column (A), line 4) ..... <b>0.</b>
<b>15</b>		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) ..... <b>77,626,185.</b>
<b>16a</b>		Professional fundraising fees (Part IX, column (A), line 11e) ..... <b>122,767.</b>
<b>b</b>		Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>13,258,767.</b>
<b>17</b>		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) ..... <b>58,277,026.</b>
<b>18</b>		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) ..... <b>155,533,057.</b>
<b>19</b>		Revenue less expenses. Subtract line 18 from line 12 ..... <b>44,882,034.</b>
Net Assets or Fund Balances	<b>20</b>	Total assets (Part X, line 16) ..... <b>166,214,850.</b>
	<b>21</b>	Total liabilities (Part X, line 26) ..... <b>16,804,088.</b>
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20 ..... <b>149,410,762.</b>

**Part II Signature Block**

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

Sign Here	Signature of officer		Date	
	<b>HOLDEN LEE, CFO/TREASURER</b> Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/> PTIN
	<b>JESSICA KARANTONIS</b>		<b>11/8/2021</b>	<b>P00969387</b>
	Firm's name ▶ <b>DELOITTE TAX LLP</b>	Firm's EIN ▶ <b>86-1065772</b>		
	Firm's address ▶ <b>695 TOWN CENTER DRIVE, SUITE 1000 COSTA MESA, CA 92626</b>		Phone no. (714) 736-7100	

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

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

OMB No. 1545-0047

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

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

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

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

<b>Type or print</b>  File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. <b>Tides Center</b>	Taxpayer identification number (TIN) <b>94-3213100</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>P.O. Box 29907</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>San Francisco, CA 94129-0907</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) . . . . . **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

• The books are in the care of ► Judith Hill, CFO (1014 Torney Avenue, San Francisco, CA 94129)

Telephone No. ► (415) 561-6400 Fax No. ► \_\_\_\_\_

• If the organization does not have an office or place of business in the United States, check this box . . . . . ► ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . . . . . ► ☐. If it is for part of the group, check this box . . . . . ► ☐ and attach a list with the names and TINs of all members the extension is for.

**1** I request an automatic 6-month extension of time until November 15, 20 21, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► ☒ calendar year 20 20 or

► ☐ tax year beginning \_\_\_\_\_, 20 \_\_\_\_\_, and ending \_\_\_\_\_, 20 \_\_\_\_\_.

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

☐ Change in accounting period

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

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

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

**TIDES CENTER ACCELERATES THE PACE OF SOCIAL CHANGE, WORKING WITH INNOVATIVE PARTNERS TO SOLVE SOCIETY'S TOUGHEST PROBLEMS.**

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

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

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code: ) (Expenses \$ 64,268,701. including grants of \$ 23,351,883. ) (Revenue \$ 6,253,668. )

**EQUITY: WITHIN OUR LARGEST AREA OF IMPACT, TIDES CENTER PROJECTS WORK MULTILATERALLY TO CREATE MORE EQUAL OPPORTUNITY AND EQUITABLE TREATMENT FOR ALL. PROJECTS FOCUS ON ETHNIC AND RACIAL EQUITY, ECONOMIC OPPORTUNITY, HUMAN RIGHTS POLICIES, REPRODUCTIVE JUSTICE, REFUGEE AID, AND INCREASED CIVIC ENGAGEMENT. SEVERAL PROGRAMS WORKED TO END HOMELESSNESS BY PROVIDING TRANSITIONAL HOUSING AND SOCIAL SERVICES. OTHERS ADVOCATED FOR ISSUES SUCH AS THE SOCIAL AND ECONOMIC EMPOWERMENT OF WOMEN AND GIRLS, ACCESS TO QUALITY HEALTH CARE, AND CRIMINAL JUSTICE REFORM.**

**4b** (Code: ) (Expenses \$ 99,029,101. including grants of \$ 36,020,097. ) (Revenue \$ 9,630,206. )

**EDUCATION: IN 2020, TIDES CENTER PROJECTS ENRICHED THE EDUCATION OF YOUTH AND ADULTS LIVING IN LOCAL, UNDER-SERVED COMMUNITIES, FOCUSING ON AREAS SUCH AS LEADERSHIP DEVELOPMENT, ARTS EDUCATION, HEALTH AND NUTRITION, FAMILY SELF-SUFFICIENCY, AND STEM. INTERNATIONALLY, TIDES CENTER PROJECTS PROVIDED TRAINING IN PUBLIC HEALTH PRACTICES FOR HEALTHCARE PROVIDERS AND IN EFFECTIVE CONDOM USAGE TO PREVENT THE SPREAD OF HIV/AIDS. OTHER TIDES CENTER PROJECTS INSTITUTED A VARIETY OF PROGRAMS THAT RANGED FROM EDUCATING MEN TO ADVOCATING AGAINST DOMESTIC VIOLENCE, TO SUPPORTING QUALIFIED CANDIDATES SEARCHING FOR CAREERS IN HIGHER EDUCATION, TO EXPLORING THE INTERSECTION OF THE ARTS AND SOCIAL JUSTICE.**

**4c** (Code: ) (Expenses \$ 2,765,029. including grants of \$ 1,005,731. ) (Revenue \$ 268,889. )

**ENVIRONMENT: IN 2020, TIDES CENTER PROJECTS WORKED IN THE AREAS OF ENVIRONMENTAL SUSTAINABILITY, CLIMATE CHANGE, AND SUSTAINABLE AGRICULTURE PRACTICES. PROGRAMS WORKED AT THE LOCAL LEVEL TO ADDRESS ENVIRONMENTAL ISSUES FACING LOW-INCOME, MARGINALIZED COMMUNITIES, AS WELL AS THE NATIONAL AND INTERNATIONAL LEVELS TO SPEARHEAD CAMPAIGNS FOR THE PRESERVATION OF OUR NATURAL ENVIRONMENT AND ANIMAL WELFARE. TIDES CENTER PROJECTS ADVOCATED FOR A MORE JUST, CLEAN, AND SUSTAINABLE WORLD FROM A VARIETY OF PERSPECTIVES, FROM REDUCING ENVIRONMENTAL MERCURY EXPOSURE TO DEVELOPING REGIONAL FOOD SYSTEMS AND ENHANCING FOOD SECURITY TO SUPPORTING THE FARM TO SCHOOL FOOD MOVEMENT.**

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

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

**4e** Total program service expenses **166,062,831.**Form **990** (2020)

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<b>1</b> X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	<b>2</b> X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	<b>3</b>	X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	<b>4</b> X	
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	<b>5</b>	X
<b>6</b> 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? <i>If "Yes," complete Schedule D, Part I</i>	<b>6</b>	X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	<b>7</b>	X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	<b>8</b> X	
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV</i>	<b>9</b> X	
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	<b>10</b>	X
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	<b>11a</b> X	
<b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	<b>11b</b>	X
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII</i>	<b>11c</b>	X
<b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX</i>	<b>11d</b>	X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<b>11e</b> X	
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i>	<b>11f</b> X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	<b>12a</b>	X
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	<b>12b</b> X	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<b>13</b>	X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b>	X
<b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	<b>14b</b> X	
<b>15</b> 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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	<b>15</b> X	
<b>16</b> 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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	<b>16</b>	X
<b>17</b> 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? <i>If "Yes," complete Schedule G, Part I</i>	<b>17</b> X	
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<b>18</b> X	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<b>19</b>	X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	<b>20a</b>	X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20b</b>	
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i>	<b>21</b> X	

**Part IV Checklist of Required Schedules** (continued)

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

Note: All Form 990 filers are required to complete Schedule O

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .....	<b>1a</b> 1256	
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .....	<b>1b</b> 0	
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	<b>1c</b> X	

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

		Yes	No
<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	<b>2a</b> 993		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>2b</b>	X	
<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	X	
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	<b>3b</b>	X	
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4a</b>		X
<b>b</b> If "Yes," enter the name of the foreign country			
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>		X
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>		
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6a</b>		X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>a</b> 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>7a</b>	X	
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>	X	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>		X
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>		X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>		X
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>	N/A	
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>	N/A	
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>	N/A	
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>a</b> Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>	N/A	
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>	N/A	
<b>10 Section 501(c)(7) organizations.</b> Enter:			
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>	N/A	
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter:			
<b>a</b> Gross income from members or shareholders	<b>11a</b>	N/A	
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	N/A	
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state?	<b>13a</b>	N/A	
<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
<b>b</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	<b>13b</b>		
<b>c</b> Enter the amount of reserves on hand	<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>		X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>		
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	<b>15</b>		X
If "Yes," see instructions and file Form 4720, Schedule N.			
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	<b>16</b>		X
If "Yes," complete Form 4720, Schedule O.			

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

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

☒

**Section A. Governing Body and Management**

	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year ..... <b>1a</b> 6		
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.		
<b>b</b> Enter the number of voting members included on line 1a, above, who are independent ..... <b>1b</b> 6		
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? ..... <b>2</b>	X	
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? ..... <b>3</b>		X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? ..... <b>4</b>		X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets? ..... <b>5</b>		X
<b>6</b> Did the organization have members or stockholders? ..... <b>6</b>	X	
<b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? ..... <b>7a</b>	X	
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? ..... <b>7b</b>	X	
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b> The governing body? ..... <b>8a</b>	X	
<b>b</b> Each committee with authority to act on behalf of the governing body? ..... <b>8b</b>	X	
<b>9</b> 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 ..... <b>9</b>		X

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

	Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates? ..... <b>10a</b>		X
<b>b</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? ..... <b>10b</b>		
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? ..... <b>11a</b>	X	
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13 ..... <b>12a</b>	X	
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? ..... <b>12b</b>	X	
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done ..... <b>12c</b>	X	
<b>13</b> Did the organization have a written whistleblower policy? ..... <b>13</b>	X	
<b>14</b> Did the organization have a written document retention and destruction policy? ..... <b>14</b>	X	
<b>15</b> 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?		
<b>a</b> The organization's CEO, Executive Director, or top management official ..... <b>15a</b>	X	
<b>b</b> Other officers or key employees of the organization ..... <b>15b</b>	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? ..... <b>16a</b>		X
<b>b</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? ..... <b>16b</b>		

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed ► **AL, AR, CA, FL, GA, HI, IL, KS, KY, MA, MD, MI**

**18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

**19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, address, and telephone number of the person who possesses the organization's books and records ►  
**HOLDEN LEE - (415) 561-6300**  
**1012 TORNEY AVENUE, SAN FRANCISCO, CA 94129**

**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 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JUDITH HILL TREASURER/CFO	16.00 34.00			X				0.	602,954.	58,860.
(2) TUTI SCOTT INTERIM CEO	16.00 34.00			X				0.	447,467.	74,816.
(3) MARK SMOLINSKI PRESIDENT - ENDING PANDEMICS	40.00 0.00				X			329,878.	0.	63,371.
(4) CATHERINE LENORE ANDERSON PRESIDENT - ASJ/CSJ	40.00 0.00				X			321,731.	0.	66,331.
(5) TOMIQUIA MOSS FOUNDER, ALL HOME	40.00 0.00				X			347,396.	0.	32,614.
(6) KELLY FITZSIMMONS FINDER/MAN DIR - PROJ EVIDENT	40.00 0.00				X			306,777.	0.	52,287.
(7) TALIA MILGROM-ELCOTT EXEC DIR, STARFISH INSTITUTE	40.00 0.00				X			280,500.	0.	60,215.
(8) SUNEELA JAIN SECRETARY/CHIEF LEGAL & ETHICS OFFIC	16.00 34.00			X				0.	266,420.	54,155.
(9) MICHAEL MOSBY INTERIM COO	16.00 34.00			X				0.	222,286.	53,870.
(10) KRISS DEIGLMEIER ADVISOR TO THE CEO THROUGH 12/19	0.00 0.00					X		0.	272,592.	0.
(11) JENNIFER MARIE LANDIG ASSISTANT SEC./CHIEF OF STAFF	16.00 34.00			X				0.	143,439.	35,712.
(12) MICHAEL FERNANDEZ CHAIR	2.00 2.00	X		X				0.	0.	0.
(13) CHERYL D. ALSTON DIRECTOR	2.00 2.00	X						0.	0.	0.
(14) EDWARD G. LLOYD DIRECTOR	2.00 2.00	X						0.	0.	0.
(15) JACOB WELDON DIRECTOR/ADVISOR	2.00 2.00	X						0.	0.	0.
(16) MARC DIAZ DIRECTOR (FROM 11/2020)	2.00 2.00	X						0.	0.	0.
(17) PETER MELLEN DIRECTOR THROUGH 11/2020	2.00 2.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) SUZANNE NOSSELL DIRECTOR	2.00 2.00	X						0.	0.	0.
(19) JASON WINGARD DIRECTOR	2.00 2.00	X						0.	0.	0.
<b>1b Subtotal</b>								1,586,282.	1,955,158.	552,231.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								1,586,282.	1,955,158.	552,231.

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

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- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3	X	
4	X	
5		X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
RESOURCE MEDIA, 9450 SW GEMINI DRIVE, 59115, BEAVERTON, OR 97008	CONSULTING SERVICES	928,350.
DISCOVERY EDUCATION, INC., 4350 CONGRESS STREET, SUITE 700, CHARLOTTE, NC 28209	CONSULTING SERVICES	622,875.
EMERGENCE CREATIVE INC. 1725 YORK AVENUE, #18B, NEW YORK, NY 10128	CONSULTING SERVICES	493,649.
HOME FRONT COMMUNICATIONS LLC, 1201 NEW YORK AVE NW SUITE 900, WASHINGTON, DC	CONSULTING SERVICES	488,700.
RED DIRT PRODUCTIONS LLC 422 W 20TH ST. APT 5EF, NEW YORK, NY 10011	CONSULTING SERVICES	380,100.

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

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**Part VIII Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>	543,006.				
	<b>d</b> Related organizations .....	<b>1d</b>	9,078,503.				
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	18,412,187.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	222,324,096.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 3,302,759.				
	<b>h Total.</b> Add lines 1a-1f .....		250,357,792.				
	<b>Program Service Revenue</b>	<b>2 a</b> CONTRACT FEES	<b>Business Code</b>	541900	5,163,955.	5,163,955.	
<b>b</b> GOVERNMENT CONTRACTS			541900	5,136,921.	5,136,921.		
<b>c</b> MEMBERSHIP REVENUE			900099	2,502,403.	2,502,403.		
<b>d</b> RENTAL INCOME - NP ORGS			531120	2,136,468.	2,136,468.		
<b>e</b> CONFERENCE/EVENT REVENUE			900099	654,809.	654,809.		
<b>f</b> All other program service revenue .....			900099	558,207.	558,207.		
<b>g Total.</b> Add lines 2a-2f .....			16,152,763.				
<b>Other Revenue</b>		<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....			2,344,268.		
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....						
	<b>6 a</b> Gross rents .....	<b>6a</b>	(i) Real (ii) Personal				
	<b>b</b> Less: rental expenses ...	<b>6b</b>					
	<b>c</b> Rental income or (loss) .....	<b>6c</b>					
	<b>d</b> Net rental income or (loss) .....						
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	<b>7a</b>	(i) Securities (ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses .....	<b>7b</b>					
	<b>c</b> Gain or (loss) .....	<b>7c</b>					
	<b>d</b> Net gain or (loss) .....						
	<b>8 a</b> Gross income from fundraising events (not including \$ 543,006. of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>		0.			
	<b>b</b> Less: direct expenses .....	<b>8b</b>		125,646.			
	<b>c</b> Net income or (loss) from fundraising events .....			-125,646.			-125,646.
	<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>					
<b>b</b> Less: direct expenses .....	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>						
<b>b</b> Less: cost of goods sold .....	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory .....							
<b>Miscellaneous Revenue</b>	<b>11 a</b> CONSULTING	<b>Business Code</b>	541611	17,500.		17,500.	
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> All other revenue .....						
	<b>e Total.</b> Add lines 11a-11d .....			17,500.			
	<b>12 Total revenue.</b> See instructions .....			268,746,677.	16,152,763.	17,500.	2,218,622.

**Part IX Statement of Functional Expenses**

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

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

☒ X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	57,688,480.	57,688,480.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	1,153,567.	1,153,567.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	1,535,664.	1,535,664.		
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees				
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	68,196,810.	48,385,839.	9,501,903.	10,309,068.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,349,742.	1,667,149.	327,391.	355,202.
<b>9</b> Other employee benefits	8,990,834.	6,379,024.	1,252,698.	1,359,112.
<b>10</b> Payroll taxes	5,204,745.	3,692,782.	725,180.	786,783.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal	492,378.		492,378.	
<b>c</b> Accounting	148,970.		148,970.	
<b>d</b> Lobbying	670,532.	670,532.		
<b>e</b> Professional fundraising services. See Part IV, line 17	29,578.			29,578.
<b>f</b> Investment management fees	90,555.		90,555.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	27,776,900.	27,725,029.		51,871.
<b>12</b> Advertising and promotion	3,243,776.	3,217,239.		26,537.
<b>13</b> Office expenses	2,176,562.	2,176,562.		
<b>14</b> Information technology	1,206,181.	1,197,040.		9,141.
<b>15</b> Royalties				
<b>16</b> Occupancy	4,926,043.	4,924,264.		1,779.
<b>17</b> Travel	1,279,267.	1,278,997.		270.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	1,757,672.	1,750,036.		7,636.
<b>20</b> Interest	989.	989.		
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	67,649.	67,649.		
<b>23</b> Insurance	796,664.	796,664.		
<b>24</b> 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.)				
<b>a</b> ADMIN, IT, HR	5,585,846.		5,585,846.	
<b>b</b> BANKING FEES	502,950.	502,950.		
<b>c</b> LICENSES	250,307.	248,697.		1,610.
<b>d</b> BOARD EXPENSES	12,841.		12,841.	
<b>e</b> All other expenses	1,323,858.	1,003,678.		320,180.
<b>25</b> Total functional expenses. Add lines 1 through 24e	197,459,360.	166,062,831.	18,137,762.	13,258,767.
<b>26</b> 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)

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	3,499,917.	<b>1</b>	1,231,922.
	<b>2</b> Savings and temporary cash investments .....	34,570,730.	<b>2</b>	73,830,879.
	<b>3</b> Pledges and grants receivable, net .....	32,895,382.	<b>3</b>	54,524,559.
	<b>4</b> Accounts receivable, net .....	1,581,908.	<b>4</b>	2,601,743.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	761,617.	<b>9</b>	475,020.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 3,538,886.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 1,902,422.	<b>10c</b>	1,636,464.
	<b>11</b> Investments - publicly traded securities .....	88,917,426.	<b>11</b>	103,841,053.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	2,411,193.	<b>15</b>	1,956,787.
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	166,214,850.	<b>16</b>	240,098,427.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	10,117,591.	<b>17</b>	9,272,808.
	<b>18</b> Grants payable .....	1,771,444.	<b>18</b>	293,476.
	<b>19</b> Deferred revenue .....	231,200.	<b>19</b>	248,278.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....	246,859.	<b>21</b>	158,077.
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	4,436,994.	<b>25</b>	7,314,255.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	16,804,088.	<b>26</b>	17,286,894.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	64,273,863.	<b>27</b>	96,764,529.
	<b>28</b> Net assets with donor restrictions .....	85,136,899.	<b>28</b>	126,047,004.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	149,410,762.	<b>32</b>	222,811,533.
	<b>33</b> Total liabilities and net assets/fund balances .....	166,214,850.	<b>33</b>	240,098,427.

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**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☐

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	268,746,677.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	197,459,360.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	71,287,317.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	149,410,762.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	2,113,454.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	222,811,533.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>2a</b>	<b>X</b>
<b>b</b> Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>2b</b>	<b>X</b>
<b>c</b> 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? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	<b>2c</b>	<b>X</b>
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	<b>3a</b>	<b>X</b>
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	<b>3b</b>	<b>X</b>

Form 990 (2020)



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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	97647384.	140466455	137116829	171030552	250396656	796657876
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
3 The value of services or facilities furnished by a governmental unit to the organization without charge .....						
4 <b>Total.</b> Add lines 1 through 3 .....	97647384.	140466455	137116829	171030552	250396656	796657876
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) .....						6725869.
6 <b>Public support.</b> Subtract line 5 from line 4.						789932007

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4 .....	97647384.	140466455	137116829	171030552	250396656	796657876
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	671,144.	1273700.	1722664.	2113792.	4457722.	10239022.
9 Net income from unrelated business activities, whether or not the business is regularly carried on .....	12,046.	2,494.			13,375.	27,915.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....			162,840.			162,840.
11 <b>Total support.</b> Add lines 7 through 10						807087653
12 Gross receipts from related activities, etc. (see instructions) .....					12 79,104,794.	
13 <b>First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						► <input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) .....	14	97.87 %
15 Public support percentage from 2019 Schedule A, Part II, line 14 .....	15	97.43 %
16a <b>33 1/3% support test - 2020.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		► <input checked="" type="checkbox"/>
b <b>33 1/3% support test - 2019.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		► <input type="checkbox"/>
17a <b>10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		► <input type="checkbox"/>
b <b>10% -facts-and-circumstances test - 2019.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		► <input type="checkbox"/>
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		► <input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2020

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ..... ☐

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2019 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2019 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2020.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ..... ☐

**b 33 1/3% support tests - 2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ..... ☐

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ..... ☐

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>c</b> 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)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
<b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> 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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> 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)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> 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.		
<b>1</b>		
<b>2</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>1</b>		
<b>2</b> 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>2</b>		
<b>3</b> By reason of the relationship described in 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

	Yes	No
<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<b>a</b> 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 <b>Part VI</b> identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
<b>2a</b>		
<b>b</b> Did the activities described in 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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
<b>2b</b>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
<b>a</b> 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 <b>Part VI</b> .		
<b>3a</b>		
<b>b</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 <b>Part VI</b> the role played by the organization in this regard.		
<b>3b</b>		

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

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

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

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

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2020

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

Section D - Distributions		Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>	
<b>4</b> Amounts paid to acquire exempt-use assets	<b>4</b>	
<b>5</b> Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>	
<b>6</b> Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>	
<b>7</b> <b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>	
<b>9</b> Distributable amount for 2020 from Section C, line 6	<b>9</b>	
<b>10</b> Line 8 amount divided by line 9 amount	<b>10</b>	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
<b>1</b> Distributable amount for 2020 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2020			
<b>a</b> From 2015			
<b>b</b> From 2016			
<b>c</b> From 2017			
<b>d</b> From 2018			
<b>e</b> From 2019			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2020 distributable amount			
<b>i</b> Carryover from 2015 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2020 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2020 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2021.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2016			
<b>b</b> Excess from 2017			
<b>c</b> Excess from 2018			
<b>d</b> Excess from 2019			
<b>e</b> Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

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

**SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:****REIMBURSEMENTS****2018 AMOUNT: \$ 162,840.**

**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

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

OMB No. 1545-0047

**2020**

Name of the organization

TIDES CENTER

Employer identification number

94-3213100

Organization type (check one):

**Filers of:****Section:**

Form 990 or 990-EZ

☒ 501(c)( 3 ) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

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

**Special Rules**

- ☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

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

Name of organization

Employer identification number

**TIDES CENTER****94-3213100****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
<u>1</u>		\$ <u>12,500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>11,126,001.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>10,578,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>10,192,143.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>		\$ <u>8,951,843.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>		\$ <u>8,060,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

**TIDES CENTER****94-3213100****Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 6,403,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 5,943,333.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

TIDES CENTER

94-3213100

**Part II** **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

**TIDES CENTER****94-3213100**

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

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527  
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

**If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

**If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

**TIDES CENTER**

Employer identification number

**94-3213100**

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures ..... ▶ \$

3 Volunteer hours for political campaign activities .....

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... ☐ Yes ☐ No

4a Was a correction made? ..... ☐ Yes ☐ No

b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527  
exempt function activities ..... ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,  
line 17b ..... ▶ \$

4 Did the filing organization file **Form 1120-POL** for this year? ..... ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990 or 990-EZ) 2020

LHA

032041 12-02-20

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying)															
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)															
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)															
<b>d</b> Other exempt purpose expenditures															
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)															
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.															
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)															
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0-															
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0-															
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes	<input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  
See the separate instructions for lines 2a through 2f.)

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2020

**Part II-B** Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers? .....	X		
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..	X		
<b>c</b> Media advertisements? .....	X		50,193.
<b>d</b> Mailings to members, legislators, or the public? .....	X		11,245.
<b>e</b> Publications, or published or broadcast statements? .....	X		2,148.
<b>f</b> Grants to other organizations for lobbying purposes? .....	X		27,320.
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....	X		769,228.
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....	X		4,278.
<b>i</b> Other activities? .....	X		58,715.
<b>j</b> Total. Add lines 1c through 1i .....			923,127.
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	1	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	2	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? .....	3	

**Part III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

<b>1</b> Dues, assessments and similar amounts from members .....	1	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year .....	2a	
<b>b</b> Carryover from last year .....	2b	
<b>c</b> Total .....	2c	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	3	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? .....	4	
<b>5</b> Taxable amount of lobbying and political expenditures (See instructions) .....	5	

**Part IV** Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

**PART II-B, LINE 1, LOBBYING ACTIVITIES:**

TIDES CENTER, THROUGH ITS FISCALLY SPONSORED PROJECTS, ENGAGES IN

LOBBYING ACTIVITIES IN SUPPORT OF A WIDE VARIETY OF ISSUES AND CAUSES

TO ADVANCE TIDES' MISSION TO ACCELERATE THE PACE OF SOCIAL CHANGE,

INCLUDING IN THE AREAS OF EDUCATION, ENVIRONMENT, AND EQUITY.

**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](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2020****Open to Public Inspection****Name of the organization**

TIDES CENTER

**Employer identification number**

94-3213100

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
☐ Preservation of land for public use (for example, recreation 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 qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

☐ Yes ☐ No

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

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ .....

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

☐ Yes ☐ No

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

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

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

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

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

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

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

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

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

b Assets included in Form 990, Part X .....

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

Schedule D (Form 990) 2020

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

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

- a ☒ Public exhibition d ☒ Loan or exchange program  
 b ☐ Scholarly research e ☐ Other \_\_\_\_\_  
 c ☒ Preservation for future generations

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

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

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

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

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

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

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

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

- (i) Unrelated organizations  
 (ii) Related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		2,531,892.	1,469,409.	1,062,483.
d Equipment		527,994.	433,013.	94,981.
e Other		479,000.		479,000.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,636,464.

Schedule D (Form 990) 2020

**Part VII Investments - Other Securities.**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely held equity interests .....		
(3) Other .....		
(A) .....		
(B) .....		
(C) .....		
(D) .....		
(E) .....		
(F) .....		
(G) .....		
(H) .....		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments - Program Related.**

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

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

**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) .....	
(2) .....	
(3) .....	
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

**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	217,240.
(3) DUE TO RELATED ORGANIZATIONS	7,097,015.
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	7,314,255.

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 ... ☒

Schedule D (Form 990) 2020

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

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

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

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

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

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

**Part XIII Supplemental Information.**

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

**PART III, LINE 4:**

ONE OF TIDES CENTER'S PROJECTS, THE NATIONAL AIDS MEMORIAL GROVE, HOLDS TITLE TO THE AIDS MEMORIAL QUILT. THE NATIONAL AIDS MEMORIAL GROVE IS A FEDERALLY DESIGNATED AIDS MEMORIAL, ENCOMPASSING EFFORTS TO RESTORE, CREATE AND PERPETUALLY MAINTAIN A 15-ACRE WOODED SITE IN SAN FRANCISCO'S GOLDEN GATE PARK. THE GROVE IS DEDICATED TO ALL LIVES TOUCHED BY AIDS. IN NOVEMBER 2019, THE NATIONAL AIDS MEMORIAL GROVE BECAME THE PERMANENT CARETAKER AND STEWARD OF THE AIDS MEMORIAL QUILT, RETURNING IT TO SAN FRANCISCO, WHERE ITS STORY BEGAN DURING THE HEIGHT OF THE AIDS EPIDEMIC. THE NATIONAL AIDS MEMORIAL GROVE WORKS WITH HUNDREDS OF PARTNERS ACROSS THE COUNTRY TO ORCHESTRATE MORE THAN 1,000 DISPLAYS EVERY YEAR IN SCHOOLS, UNIVERSITIES, PLACES OF WORSHIP, CORPORATIONS AND COMMUNITY CENTERS. ON

**Part XIII** Supplemental Information (continued)

WORLD AIDS DAY, DECEMBER 1ST OF EACH YEAR, MORE THAN 1/2 OF THE QUILT GOES ON DISPLAY AROUND THE NATION.

PART IV, LINE 2B:

DURING 2020, THE ORGANIZATION HELD FUNDS IN AN AGENCY CAPACITY (ON BEHALF OF THE THOMAS J. LONG FOUNDATION, WHICH IS WINDING DOWN OPERATIONS) FOR THE ULTIMATE BENEFIT OF LINCOLN ELEMENTARY SCHOOL IN THE WEST CONTRA COSTA UNIFIED SCHOOL DISTRICT. TIDES CENTER HAS NO VARIANCE POWER IN DETERMINING THE GRANTEE, AND THUS RECORDED AN ASSET (CASH) AS WELL AS A CORRESPONDING LIABILITY UPON RECEIPT OF THE PASS-THROUGH FUNDS; ITEMS ARE NOT RECORDED WITHIN REVENUES OR EXPENSES IN REGARDS TO THIS ARRANGEMENT.

PART X, LINE 2:

MANAGEMENT EVALUATED TIDES ORGANIZATIONS' TAX POSITIONS AND CONCLUDED THAT THEY HAD MAINTAINED THEIR TAX EXEMPT STATUS AND HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE CONSOLIDATED FINANCIAL STATEMENTS. THEREFORE, NO PROVISION OR LIABILITY FOR INCOME TAXES HAS BEEN INCLUDED IN THE CONSOLIDATED FINANCIAL STATEMENTS.

**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

Employer identification number

**TIDES CENTER**

**94-3213100**

**Part I 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? ..... ☒ **Yes** ☐ **No**

**2 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	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		444,252.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		44,168.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		438,270.
RUSSIA AND NEIGHBORING STATES	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		148,055.
SOUTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		168,005.
SOUTH ASIA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		75,544.
SUB-SAHARAN AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		146,592.
NORTH AMERICA - USA, CANADA, MEXICO	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		70,778.
<b>3 a Subtotal</b> .....	0	0			1,535,664.
<b>b Total from continuation sheets to Part I</b> .....	0	0			0.
<b>c Totals</b> (add lines 3a and 3b) .....	0	0			1,535,664.

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

Schedule F (Form 990) 2020

**Part II** **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.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT	430,774.	ELECTRONIC FUND/WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	COMMUNITY IMPROVEMENT; COMMUNITY ORGANIZING; CULTURAL AWARENESS	13,478.	ELECTRONIC FUND/WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	ECONOMIC DEVELOPMENT & HEALTHY INDIVIDUALS	44,168.	ELECTRONIC FUND/WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT	249,178.	ELECTRONIC FUND/WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	HEALTHY INDIVIDUALS AND COMMUNITIES	189,091.	ELECTRONIC FUND/WIRE TRANSFER	0.		
		NORTH AMERICA	HEALTHY INDIVIDUALS AND COMMUNITIES	70,778.	ELECTRONIC FUND/WIRE TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT	148,055.	ELECTRONIC FUND/WIRE TRANSFER	0.		
		SOUTH AMERICA	EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT	88,290.	ELECTRONIC FUND/WIRE TRANSFER	0.		

2 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

11

3 Enter total number of other organizations or entities

0

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	HEALTHY INDIVIDUALS AND COMMUNITIES	79,715.	ELECTRONIC FUND/WIRE TRANSFER	0.		
		SOUTH ASIA	EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT	66,304.	ELECTRONIC FUND/WIRE TRANSFER	0.		
		SOUTH ASIA	HEALTHY INDIVIDUALS AND COMMUNITIES	9,240.	ELECTRONIC FUND/WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT	146,592.	ELECTRONIC FUND/WIRE TRANSFER	0.		



**Part IV Foreign Forms**

- 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 Instructions for Form 926)* ..... ☒ **Yes** ☐ **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 Instructions for Forms 3520 and 3520-A; don't file with Form 990)* ..... ☐ **Yes** ☒ **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 Instructions for Form 5471)* ..... ☐ **Yes** ☒ **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 Instructions for Form 8621)* ..... ☐ **Yes** ☒ **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 Instructions for Form 8865)* ..... ☐ **Yes** ☒ **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 Instructions for Form 5713; don't file with Form 990)* ..... ☐ **Yes** ☒ **No**

Schedule F (Form 990) 2020

**Part V Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

**PART I, LINE 2:**

DUE DILIGENCE IS CONDUCTED IN ADVANCE OF FUNDING TO DETERMINE WHETHER A GROUP WILL BE AN APPROPRIATE GRANTEE. POTENTIAL RECIPIENTS ARE REQUIRED TO PROVIDE PROOF OF TAX STATUS AND/OR REGISTRATION DOCUMENTS AND THEIR ORGANIZATIONAL DOCUMENTS. ALL GRANTEES ARE NOTIFIED OF THE TERMS AND CONDITIONS OF EACH GRANT SHOULD IT BE AWARDED AND GRANTEES INDICATE ACCEPTANCE BY SIGNATURE. ALL INTERNATIONAL GRANTS ARE RESTRICTED TO A CLEARLY CHARITABLE OR EDUCATIONAL PURPOSE AND MUST BE USED EXCLUSIVELY FOR ACTIVITIES CONDUCTED OUTSIDE OF THE UNITED STATES. ALL GRANTEES RECEIVE A WRITTEN GRANT AGREEMENT, AND BY ACCEPTING PAYMENT, THE GRANTEE AGREES TO THE CONDITIONS OF THE AWARD.

**PART I, LINE 3:**

THE ORGANIZATION UTILIZES THE ACCRUAL METHOD TO ACCOUNT FOR EXPENDITURES ON SCHEDULE F, PART I, LINE 3.

**PART IV, LINE 1:**

ALL CORPORATE TRANSFERS WERE IN THE FORM OF GRANTS TO INTERNATIONAL ORGANIZATIONS TO ADVANCE TIDES CENTER'S MISSION, AND NOT IN EXCHANGE FOR GOODS, SERVICES OR ANY OTHER RIGHTS OR PROPERTY.

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

**TIDES CENTER**

Employer identification number

**94-3213100**

**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.

- |   |  |
|---|--|
| <b>a</b> <input checked="" type="checkbox"/> Mail solicitations               | <b>e</b> <input checked="" type="checkbox"/> Solicitation of non-government grants |
| <b>b</b> <input checked="" type="checkbox"/> Internet and email solicitations | <b>f</b> <input checked="" type="checkbox"/> Solicitation of government grants     |
| <b>c</b> <input checked="" type="checkbox"/> Phone solicitations              | <b>g</b> <input checked="" type="checkbox"/> Special fundraising events            |
| <b>d</b> <input checked="" type="checkbox"/> In-person solicitations          |  |

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

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
DO GOOD STUFF-PAUL TYRONE SMITH - 2261 MARKET ST. SUITE	CONSULTING		X	0.	13,078.	-13,078.
BING CONSULTING SERVICES - 3361 MISSION ST., SAN	CONSULTING		X	0.	6,500.	-6,500.
HEADFIRST ARTS & MEDIA - 7128 PLANK AVE, EL CERRITO,	MEDIA COMMUNICATIONS		X	0.	5,000.	-5,000.
HPA STRATEGIC COMMUNICATIONS - 3777 EFFINGHAM PLACE, LOS	MEDIA COMMUNICATIONS		X	0.	5,000.	-5,000.
<b>Total</b>					29,578.	-29,578.

**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.

AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, MA, MD, MI, ME, MN, MS, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		LIGHT IN THE GROVE (event type)	CREATING HOPE (event type)	4 (total number)	
Revenue	1 Gross receipts .....	241,759.	147,260.	153,987.	543,006.
	2 Less: Contributions .....	241,759.	147,260.	153,987.	543,006.
	3 Gross income (line 1 minus line 2) .....				
Direct Expenses	4 Cash prizes .....				
	5 Noncash prizes .....				
	6 Rent/facility costs .....			1,779.	1,779.
	7 Food and beverages .....			270.	270.
	8 Entertainment .....				
	9 Other direct expenses .....	26,841.	32,017.	64,739.	123,597.
	10 Direct expense summary. Add lines 4 through 9 in column (d) .....				125,646.
11 Net income summary. Subtract line 10 from line 3, column (d) .....				-125,646.	

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

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

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

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

b If "No," explain: \_\_\_\_\_

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

b If "Yes," explain: \_\_\_\_\_

- 11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in:
- |                                      |            |   |
|--------------------------------------|------------|---|
| <b>a</b> The organization's facility | <b>13a</b> | % |
| <b>b</b> An outside facility         | <b>13b</b> | % |
- 14** Enter the name 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? ☐ Yes ☐ No

**b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_

**c** If "Yes," enter name and address of the third party:

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

- 16** Gaming manager information:

Name ► \_\_\_\_\_

Gaming manager compensation ► \$ \_\_\_\_\_

Description of services provided ► \_\_\_\_\_

☐ Director/officer ☐ Employee ☐ Independent contractor

- 17** Mandatory distributions:

**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

**b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ \_\_\_\_\_

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

**SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:**

(I) NAME OF FUNDRAISER: DO GOOD STUFF-PAUL TYRONE SMITH

(I) ADDRESS OF FUNDRAISER:

2261 MARKET ST. SUITE 188, SAN FRANCISCO, CA 94114

(I) NAME OF FUNDRAISER: BING CONSULTING SERVICES

(I) ADDRESS OF FUNDRAISER: 3361 MISSION ST., SAN FRANCISCO, CA 94110

**Part IV** Supplemental Information (continued)

(I) NAME OF FUNDRAISER: HEADFIRST ARTS & MEDIA

(I) ADDRESS OF FUNDRAISER: 7128 PLANK AVE, EL CERRITO, CA 94530

(I) NAME OF FUNDRAISER: HPA STRATEGIC COMMUNICATIONS

(I) ADDRESS OF FUNDRAISER: 3777 EFFINGHAM PLACE, LOS ANGELES, CA 90027

**SCHEDULE I**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization

**TIDES CENTER**

**Employer identification number**

**94-3213100**

**Part I General Information on Grants and Assistance**

**1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....

☒ **Yes** ☐ **No**

**2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
(F)EMPOWER INC 446 NE 72ND STREET MIAMI, FL 33138	83-4334503	501(C)(3)	10,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
215 PEOPLE'S ALLIANCE EDUCATION FUND - C/O MEDIA MOBILIZING PROJECT 924 CHERRY STREET 5TH FLOOR - PHILADELPHIA, PA 19107	26-0307123	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
A NEW WAY OF LIFE REENTRY PROJECT PO BOX 875288 LOS ANGELES, CA 90087	95-4782503	501(C)(3)	40,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ACTION CENTER INC 1434 ELBRIDGE STREET PHILADELPHIA, PA 19149	30-0246999	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
ADASTRA COLLECTIVE 275 PARK AVE, APT 5J BROOKLYN, NY 11205	52-2094677	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
AFRICAN BUREAU OF IMMIGRATION & SOCIAL AFFAIRS (ABISA) - CARIBBEAN COMMUNITY SERVICE CENTER 111E EAST KIRBY STREET - DETROIT, MI 48202	47-4386750	501(C)(3)	25,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

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

▶ **387.**

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

▶ **30.**

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

**Schedule I (Form 990) 2020**

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AGITARTE P.O. BOX 391791 CAMBRIDGE, MA 02139	04-3420465	501(C)(3)	55,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
AHRI C4 3727 W 6TH STREET SUITE 512 LOS ANGELES, CA 90020	94-3153687	501(C)(3)	174,096.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ALEPH - ALLIANCE FOR JEWISH RENEWAL - P.O. BOX 35118 - PHILADELPHIA, PA 19128	23-2081703	501(C)(3)	18,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
ALIMENTACIN SEGURA INFANTIL PO BOX 816 DORADO, PR 00646	66-0888032		5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
ALLIANCE FOR EDUCATION SOLUTIONS INC. - 1111 H STREET SUITE 205 - SACRAMENTO, CA 95814	68-0232078	501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
ALLIANCE TO MOBILIZE OUR RESISTANCE - 669 ELMWOOD AVENUE BOX B13 - PROVIDENCE, RI 02907	65-1224536	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
ALLIED MEDIA PROJECTS INC. 4126 THIRD STREET DETROIT, MI 48201	01-0559608	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
AMERICAN FRIENDS SERVICE COMMITTEE ATTN: AFSC DEVELOPMENT 1501 CHERRY PHILADELPHIA, PA 19102	23-1352010	501(C)(3)	200,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
AMIGOS DEL M.A.R., INC. CALLE MALLORCA 710 SAN JUAN, PR 00907	66-0864878		5,000.	0.			QUALITY EDUCATION

Schedule I (Form 990)

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ANDEAN ALLIANCE FOR SUSTAINABLE DEVELOPMENT - 560 ORCHARD ROAD - MARSHALL, MI 49068	90-0701120	501(C)(3)	30,000.	0.			SUSTAINABLE ENVIRONMENT
ANISHINAABE AGRICULTURE INSTITUTE PO BOX 152 OSAGE, MN 56570	83-1587091	501(C)(3)	5,000.	0.			SUSTAINABLE ENVIRONMENT
ANTI POLICE-TERROR PROJECT 1201 MARTIN LUTHER KING JR WAY SUIT OAKLAND, CA 94612	47-4111501	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
API CULTURAL CENTER INC 388 NINTH STREET SUITE 290 OAKLAND, CA 94607	73-1649335	501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
ARIZONA STATE UNIVERSITY FOUNDATION FOR A NEW AMERICAN UNIVERSITY - ATTN: FINANCIAL SERVICES PO BOX 2260 - TEMPE, AZ	86-6051042	501(C)(3)	15,000.	0.			QUALITY EDUCATION
ARRIBA LAS VEGAS WORKER CENTER 1948 E. CHARLESTON BOULEVARD LAS VEGAS, NV 89104	83-4206510	501(C)(3)	50,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ASIAN AMERICANS ADVANCING JUSTICE LOS ANGELES - ATTN: DEVELOPMENT 1145 WILSHIRE BOULEVARD - LOS ANGELES, CA 90017	95-3854152	501(C)(3)	57,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ASIAN PACIFIC ENVIRONMENTAL NETWORK - 426 17TH STREET SUITE 500 - OAKLAND, CA 94610	94-3261846	501(C)(3)	15,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ASOCIACIN DE COMUNIDADES UNIDES TOMANDO ACCIN SOLIDARIA INC. - PO BOX 52 - TOA BAJA, PR 00951			15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSATA'S DAUGHTERS 5700 S. PRAIRIE AVENUE CHICAGO, IL 60637	52-2094677	501(C)(3)	20,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ASSOCIATION OF CHAMBER OF COMMERCE EXECUTIVES FOUNDATION - 1330 BRADDOCK PLACE SUITE 300 - ALEXANDRIA, VA 22314	23-7204514	501(C)(3)	75,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
AYUDA LEGAL PUERTO RICO INC PO BOX 195321 SAN JUAN, PR 00918	66-0890750	501(C)(3)	50,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
BALTIMORE COUNTY GREEN ALLIANCE C/O NEIGHBOR SPACE OF BALTIMORE COUNTY P.O. BOX 6715 - TOWSON, MD 21285	41-2096888	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
BALTIMORE LEGAL ACTION TEAM (BALT) C/O FUSION PARTNERSHIPS 1601 GUILFORD AVE 2 SOUTH - BALTIMORE, MD 21202	52-2148413	501(C)(3)	355,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
BATTELLE FOR KIDS ATTN: JONI LANGUIS 4525 TRUEMAN BLV HILLIARD, OH 43026	31-1781583	501(C)(3)	15,000.	0.			QUALITY EDUCATION
BAY AREA COMMUNITY RESOURCES 171 CARLOS DRIVE SAN RAFAEL, CA 94903	94-2346815	501(C)(3)	180,000.	0.			QUALITY EDUCATION
BAY AREA IMMIGRATION BOND FUND 1322 WEBSTER STREET SUITE 300 OAKLAND, CA 94612	80-0875881	501(C)(3)	8,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
BAY AREA JEWISH HEALING CENTER 2530 TARAVAL STREET SUITE #202 SAN FRANCISCO, CA 94116	45-1504826	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

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**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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BAY AREA REGIONAL HEALTH INEQUITIES INITIATIVE - 555 12TH STREET, FIFTH FLOOR - OAKLAND, CA 94607	94-3213100	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
BEDFORD STUYVESANT RESTORATION CORPORATION - 1368 FULTON STREET - BROOKLYN, NY 11216	11-6083182	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
BELIEVERS BAIL OUT C/O SIRAT CHICAGO 4572 S LAKE PARK CHICAGO, IL 60653	47-4847984	501(C)(3)	42,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
BELOVED ECONOMIES 776 TOLMAN DRIVE STANFORD, CA 94305	04-2738794	501(C)(3)	6,750.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
BERKSHIRE HILLS REGIONAL SCHOOL DISTRICT - P.O. BOX 617 50 MAIN STREET - STOCKBRIDGE, MA 01262	04-2426357	GOVERNMENT ENTIT	336,709.	0.			QUALITY EDUCATION
BLACK COMMUNITY DEVELOPMENT CORPORATION - 1619 W MAIN STREET - LOUISVILLE, KY 40203	61-1233868	501(C)(3)	12,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
BLACK ENVIRONMENTAL LEADERS ASSOCIATION - C/O WESTERN RESERVE LAND CONSERVANCY 3850 CHAGRIN RIVER ROAD - MORELAND HILLS, OH	34-1571233	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
BLACK FUTURES LAB 436 14TH ST SUITE 723 OAKLAND, CA 94612	23-7404756	501(C)(3)	284,140.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
BLACK JEWISH LIBERATION COLLECTIVE 2427 MORRIS AVE BRONX, NY 10468	27-2654975	501(C)(3)	5,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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BLACK LGBTQIA+ MIGRANT PROJECT P.O. BOX 70976 OAKLAND, CA 94612	05-0544006	501(C)(3)	20,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
BLACK LIVES MATTER - OKLAHOMA CITY 907 NE GRAND BLVD. OKLAHOMA CITY, OK 73111	52-2094677	501(C)(3)	4,750,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
BLACK LIVES MATTER GLOBAL NETWORK PROJECT - 1330 BROADWAY, SUITE 301 - OAKLAND, CA 92612	51-0198509	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
BLACK ORGANIZING FOR LEADERSHIP AND DIGNITY (BOLD) - BOLD C/O HIGHLAND CENTER 1959 HIGHLANDER WAY - NEW MARKET, TN 37820	62-0646373	501(C)(3)	5,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
BLACK ORGANIZING PROJECT INC 1035 W. GRAND AVENUE OAKLAND, CA 94607	46-4578588	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
BLACK PHOENIX ORGANIZING COLLECTIVE - 3358 W PORTLAND STREET - PHOENIX, AZ 85009	46-2284158	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
BLACK SOCIALISTS IN AMERICA 347 FIFTH AVENUE, SUITE 1402-126 NEW YORK, NY 10016	84-3589987	501(C)(3)	22,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
BLACK SWAN ACADEMY INC 104 MICHIGAN AVENUE NE C23 WASHINGTON, DC 20017	46-4244374	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
BLACKOUT COLLECTIVE C/O RUCKUS SOCIETY INC PO BOX 28741 OAKLAND, CA 94604	81-0504390	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

Schedule I (Form 990)

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BLACKSTONE ACADEMY INC 334 PLEASANT STREET PAWTUCKET, RI 02860	80-0025718	501(C)(3)	6,700.	0.			QUALITY EDUCATION
BLUE RIDGE ENVIRONMENTAL DEFENSE LEAGUE INC - P.O. BOX 88 - GLENDALE SPRINGS, NC 28629	58-1624130	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
BLUEPRINT NORTH CAROLINA 3125 POPLARWOOD COURT RALEIGH, NC 27604	27-2459538	501(C)(3)	100,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
BORDER ANGELS 2258 ISLAND AVENUE SAN DIEGO, CA 92102	01-0777554	501(C)(3)	25,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
BRIGADA SOLIDARIA DEL OESTE PO BOX 1073 BOQUERON, PR 00622	66-0891938		25,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
BUILD PROGRAM 1409 WEST VERNON AVENUE LOS ANGELES, CA 90062	95-4488635	501(C)(3)	25,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
BUKIT BAIL FUND OF PITTSBURGH 225 E 26TH STREET SUITE 1 TUCSON, AZ 85713	52-2094677	501(C)(3)	25,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
BUSINESS COALITION FOR JUSTICE 404 E. GRACE STREET RICHMOND, VA 23219	82-1533505	501(C)(3)	32,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
CALIFORNIA COLLABORATIVE FOR IMMIGRANT JUSTICE - 530 DIVISADERO STREET #808 - SAN FRANCISCO, CA 94117	46-1323531	501(C)(3)	250,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

Schedule I (Form 990)

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CALIFORNIA DONOR TABLE 436 14TH STREET SUITE 700 OAKLAND, CA 94612	94-3153687	501(C)(3)	30,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CALIFORNIA IMMIGRANT YOUTH JUSTICE ALLIANCE - 634 S. SPRING STREET #1206 - LOS ANGELES, CA 90014	74-1563270	501(C)(3)	57,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
CAM BARTOLO PO BOX 313 CASTANER LARES, PR 00631	66-0917085	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CAMINANDO LA UTOPIA P.O. BOX 190922 SAN JUAN, PR 00919-0922			15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CAMPAMENTO CONTRA LAS CENIZAS EN PEUELAS, INC. - HC 3 BOX 15516 - PEUELAS, PR 00624	66-0900541		15,000.	0.			SUSTAINABLE ENVIRONMENT
CAN WIGMUNKE 621 ENNEN DRIVE RAPID CITY, SD 57703	20-5841872	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CAROLINA JUSTICE POLICY CENTER PO BOX 309 DURHAM, NC 27702	59-1755809	501(C)(3)	75,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
CENTER FOR COURT INNOVATION 520 8TH AVENUE 18TH FLOOR NEW YORK, NY 10018	13-2612524	501(C)(3)	550,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
CENTER FOR EMBODIED PEDAGOGY AND ACTION - 201 CALLE LAS CAOBAS, BAJOS - SAN JUAN, PR 00927	01-0559608	501(C)(3)	20,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

Schedule I (Form 990)

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CENTER FOR SOCIAL SUSTAINABLE SYSTEMS - 211 10TH STREET SW - ALBUQUERQUE, NM 87102	45-3163638	501(C)(3)	20,000.	0.			SUSTAINABLE ENVIRONMENT
CENTRO DE APOYO A MOVIMIENTOS SOCIALES Y ACTIVISTAS - CALLE SALDAA Nmero 3 SEGUNDO PISO RIO PIEDRAS PO BOX 9300326 - SAN		501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CENTRO DE APOYO MUTUO BUCARABONES UNIDOS INC. - HC 2 BOX 10742 - LAS MARIAS, PR 00670-9050	66-0900105		20,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CENTRO DE APOYO MUTUO Y RESILIENCIA COMUNITARIA LAS CAROLINAS INC. - HC 6 BOX 70390 LAS CAROLINAS - CAGUAS, PR 00725	66-0925900		10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CENTRO DE LA MUJER DOMINICANA INC P.O. BOX 20068 SAN JUAN, PR 00928	66-0642701	501(C)(3)	15,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
CENTRO DE PERIODISMO INVESTIGATIVO INC - P.O. BOX 6834 - SAN JUAN, PR 00914	66-0705065	501(C)(3)	25,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CENTRO LABORAL DE GRATON P.O. BOX 42 GRATON, CA 95444	68-0472311	501(C)(3)	276,200.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
CENTRONIA 1420 COLUMBIA ROAD NW WASHINGTON, DC 20009	25-1689720	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CEPA C/O ALLIED MEDIA PROJECTS INC. 4126 THIRD STREET - DETROIT, MI 48201	01-0559608	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

Schedule I (Form 990)

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CHARLES W REID COMMUNITY HELP CENTER - 2785 E. GRAND BOULEVARD - DETROIT, MI 48211	84-4341085	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CHARLESTON COUNTY SCHOOL DISTRICT 75 CALHOUN STREET CHARLESTON, NC 29401	57-6000322	GOVERNMENT ENTIT	15,000.	0.			QUALITY EDUCATION
CHILD WELFARE INNOVATION INCORPORATED - P.O. BOX 29198 - SAN FRANCISCO, CA 94129	38-4011253	501(C)(3)	1,042,225.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
CHILD WELFARE INNOVATION INCORPORATED - P.O. BOX 29198 - SAN FRANCISCO, CA 94129	38-4011253	501(C)(3)	70,136.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
CIRCUITO DE INNOVACIN Y RESILIENCIA QUEER - 165 AVENIDA DE HOSTOS 322-A - SAN JUAN, PR 00918	66-0903902		10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
CIVIL LIBERTIES DEFENSE CENTER 1430 WILLAMETTE STREET, #359 EUGENE, OR 97401	58-2670951	501(C)(3)	40,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CLIMATE JUSTICE ALLIANCE PO BOX 10202 BERKELEY, CA 94709	20-1037643	501(C)(3)	15,000.	0.			SUSTAINABLE ENVIRONMENT
COACHING CORPS 310 EIGHTH STREET SUITE 300 OAKLAND, CA 94607	94-3310845	501(C)(3)	30,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
COACHING FOR HEALING, JUSTICE AND LIBERATION - 524 MOUNTAIN VIEW STREET - ALTADENA, CA 91001	72-1552165	501(C)(3)	25,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

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**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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COALITION FOR ENVIRONMENT, EQUITY AND RESILIENCE - 2010 NORTH LOOP WEST SUITE 103 - HOUSTON, TX 77018	72-1447742	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
COALITION FOR RESPONSIBLE COMMUNITY DEVELOPMENT - 3101 S. GRAND AVENUE - LOS ANGELES, CA 90007	20-2445113	501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
COLECTIVA FEMINISTA EN CONSTRUCCIN 406 CALLE CAPITN ESPADA ESQUINA CLL PADRE LAS CASAS - APARTADO, PR 00919-300	66-0550935	501(C)(3)	20,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
COLECTIVO EL ANCON DE LOIZA, INC. 401 AVENUE AMRICO MIRANDA, #110B , COOP LOS ROBLES - SAN JUAN, PR 00927	66-0907038		10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
COLECTIVO IL, CORPORACIN LUIS MUOZ MARN #20 PMB 117 URB. VI CAGUAS, PR 00725	66-0808702		109,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
COLECTIVO IL, INC. LUIS MUOZ MARN AVE. #20 PMB 117 URB. VILLA BLANCA - CAGUAS, PR 00725	66-0808702		5,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
COLORADO FREEDOM FUND 1600 N. DOWNING ST. DENVER, CO 80218	52-2094677	501(C)(3)	350,146.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
COLUMBUS FREEDOM FUND C/O WOMEN HAVE OPTIONS 36 E. BEAUMO COLUMBUS, OH 43214	31-1357186	501(C)(3)	407,698.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
COLUMPIO COLECTIVO INC. CALLE IGUINA #55 CAMUY, PR 00627	66-0936773		5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

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COMEDORES SOCIALES DE PUERTO RICO PO BOX 3181 CAGUAS, PR 00726-3181			50,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
COMISION CIUDADANA PARA LA AUDITORIA INTEGRAL DEL CREDITO PUBLICO - PO BOX 21054 - SAN JUAN, PR 00928-1054	66-0880065	501(C)(3)	20,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
COMMUNITIES UNITED FOR PEOPLE PO BOX 33167 PORTLAND, OR 97292	93-1181863	501(C)(3)	35,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
COMMUNITIES UNITED FOR RESTORATIVE YOUTH JUSTICE - 490 LAKE PARK AVENUE #16086 - OAKLAND, CA 94610	27-5008441	501(C)(3)	12,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
COMMUNITY ADVOCATES FOR JUST AND MORAL GOVERNANCE - 2760 5TH AVENUE SUITE 220 - SAN DIEGO, CA 92103	83-4222460	501(C)(3)	22,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
COMMUNITY BONDS INC P.O. BOX 593 NEW HAVEN, CT 06513	81-2912950	501(C)(3)	195,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
COMMUNITY YOUTH CENTER OF SAN FRANCISCO - 1038 POST STREET - SAN FRANCISCO, CA 94109	94-1728818	501(C)(3)	125,000.	0.			QUALITY EDUCATION
CONGO LEADERSHIP INITIATIVE 100 NORTH LAKE DRIVE, APT. 26 ORCHARD PARK, NY 14127	27-2381412	501(C)(3)	30,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
CONGREGATION BONAI SHALOM 1527 CHERRYVALE ROAD BOULDER, CO 80303	84-0891557	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

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CONSTRUYAMOS OTRO ACUERDO P.O. BOX 9052 SAN JUAN, PR PR 00908	45-3813436		55,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
COOPERATION JACKSON OF MISSISSIPPI PO BOX 1932 JACKSON, MS 39215	47-1153202	501(C)(3)	35,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
COORDINADORA PAZ PARA LA MUJER, INC. - APARTADO 193008 - SAN JUAN, PR 00919-3008	66-0550935	501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
COURT WATCH NEW ORLEANS 4035 WASHINGTON AVENUE NEW ORLEANS, LA 70125	33-1190644	501(C)(3)	5,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
CRISTO REY NETWORK 11 EAST ADAMS STREET SUITE 800 CHICAGO, IL 60603	04-3730980	501(C)(3)	30,000.	0.			QUALITY EDUCATION
CRITICAL RESISTANCE NATIONAL OFFICE 1904 FRANKLIN STREE OAKLAND, CA 94612	20-4412916	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
CURE VIOLENCE GLOBAL 227 W. MONROE STREET SUITE 1025 CHICAGO, IL 60606	82-3471223	501(C)(3)	25,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
DADE COUNTY STREET RESPONSE 340 NW 23RD PLACE MIAMI, FL 33125	84-1958579	501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
DARAJA EDUCATION FUND P.O. BOX 4333 SAN RAFAEL, CA 94913	20-8283551	501(C)(3)	30,000.	0.			QUALITY EDUCATION

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DAUPHIN COUNTY BAIL FUND 3915 UNION DEPOSIT ROAD #424 HARRISBURG, PA 17109	82-3997343	501(C)(3)	15,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
DAVINCI MAKER LABS 100 N. GORDON STREET ALVIN, TX 77511	81-3242712	501(C)(3)	30,000.	0.			QUALITY EDUCATION
DAY WORKER CENTER OF MOUNTAIN VIEW 113 ESCUELA AVENUE MOUNTAIN VIEW, CA 94040	20-2874108	501(C)(3)	193,600.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
DEAFBLIND CITIZENS IN ACTION 9939 HIBERT STREET, #108 SAN DIEGO, CA 92131	46-3527815	501(C)(3)	39,358.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
DEBT COLLECTIVE 40 POWERS STREET #2 BROOKLYN, NY 11211	13-4188834	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
DEFINE AMERICAN 822 E BROADWAY LOUISVILLE, KY 40204	46-4610491	501(C)(3)	15,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
DELTA FOUNDATION INC. 819 MAIN STREET GREENVILLE, MS 38701	64-0477962	501(C)(3)	15,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
DENVER METRO CHAMBER LEADERSHIP FOUNDATION - 1445 MARKET STREET - DENVER, CO 80202	74-2489854	501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
DEPLOY-US INC 23 BYRON AVE LEXINGTON, MA 02420	47-2818525	501(C)(3)	15,000.	0.			SUSTAINABLE ENVIRONMENT

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DESTINY DRIVEN INC 1628 QUEEN ELIZABETH COURT MONTGOMERY, AL 36117	83-1232839	501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
DETENTION WATCH NETWORK 1915 I STREET NW, 8TH FLOOR WASHINGTON, DC 20006	83-3874583	501(C)(3)	430,877.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
DETROIT JEWS FOR JUSTICE 440 BURROUGHS SUITE 625 DETROIT, MI 48202	38-2153881	501(C)(3)	70,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
DETROIT LIFE IS VALUABLE EVERYDAY 6071 W OUTER DRIVE LOURDES BUILDING DETROIT, MI 48235	83-3863598	501(C)(3)	75,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
DETROIT REVIVAL ENGAGING AMERICAN MUSLIMS - P.O. BOX 38152 - DETROIT, MI 48238	46-4246696	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
DEVELOPMENT IN GARDENING 1270 CAROLINE STREET SUITE D120-312 ATLANTA, GA 30307	20-4708212	501(C)(3)	30,000.	0.			SUSTAINABLE ENVIRONMENT
DIDI HIRSCH PSYCHIATRIC SERVICE 4760 SOUTH SEPULVEDA BOULEVARD CULVER CITY, CA 90230	95-1816023	501(C)(3)	50,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
DIMENSIONS EDUCATIONAL CONSULTING INC - 716 BEACON STREET POB 590633 - NEWTON, MA 02459	82-2019412	501(C)(3)	123,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
DIRECT WOMEN C/O SCHARF BANKS MARMOR 333 W WACKER DRIVE, SUITE 450 - CHICAGO, IL 60606	83-3461885	501(C)(3)	1,345,878.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

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DISRUPTION PODCAST PROJECT 366 LUDLOW AVENUE CINCINNATI, OH 45220	81-1047750	501(C)(3)	25,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
DIVEST INVEST PROTECT 61 COLBORNE ROAD, APT 3 BRIGHTON, MA 02135	82-5433269	501(C)(3)	20,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
DONKEYSADDLE PROJECTS 248 W 35TH STREET FLOOR 10 NEW YORK, NY 10001	11-3451703	501(C)(3)	19,400.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
DREAMING OUT LOUD FOUNDATION C/O WEWORK 80 M STREET SE WASHINGTON, DC 20003	26-1286043	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
E E ROGERS SDA SCHOOL 5125B ROBINSON ROAD JACKSON, MS 39204	64-0889888	501(C)(3)	5,000.	0.			QUALITY EDUCATION
EAST BAY PERMANENT REAL ESTATE COOPERATIVE - 1428 FRANKLIN STREET - OAKLAND, CA 94612	46-2210531	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
EAST HARLEM EL BARRIO COMMUNITY LAND TRUST INC - 413 E 120TH STREET, SUITE 302 - NEW YORK, NY 10035	47-5082983	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
EAST OAKLAND YOUTH DEVELOPMENT CENTER - 8200 INTERNATIONAL BOULEVARD - OAKLAND, CA 94621	23-7334590	501(C)(3)	29,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
ECO-SOAP BANK 1800 MURRAY AVENUE PO BOX 81188 PITTSBURGH, PA 15217	47-4024469	501(C)(3)	30,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

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EDITORIAL CASA CUNA URB VALLE HERMOSO CALLE BUCARE SB28 HORMIGUEROS, PR 00660	66-0874286	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
EDOT MIDWEST 5 CHEYENNE CIRCLE MADISON, WI 53705	68-0501459	501(C)(3)	36,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
EDUCATION REIMAGINED 1133 19TH STREET NW SUITE 410 WASHINGTON, DC 20036	83-1086088	501(C)(3)	15,000.	0.			QUALITY EDUCATION
EDWARD WATERS COLLEGE 1658 KINGS ROAD JACKSONVILLE, FL 32209	59-1146751	501(C)(3)	5,000.	0.			QUALITY EDUCATION
EL CENTRO HISPANO INC 2000 CHAPEL HILL ROAD SUITE 26A DURHAM, NC 27707	56-2011661	501(C)(3)	11,967.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
EL GRITO INC 195 BROADWAY BROOKLYN, NY 11211	81-2129119	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
EL HANGAR EN SANTURCE 706 CALLE HOARE SANTURCE, PR 00907	66-0550935	501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
EL PUENTE DE WILLIAMSBURG INC 211 SOUTH 4TH STREET BROOKLYN, NY 11211	11-2614265	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
ELDERS ACTION NETWORK INC P.O. BOX 11911 PRESCOTT, AZ 86304	46-4569152	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT

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ELEVATE: PARTNERS FOR EDUCATION 1711 35TH ST NW, #24 WASHINGTON, DC 20007	85-1376553	501(C)(3)	30,000.	0.			QUALITY EDUCATION
EMERGENCY RELEASE FUND 345 WEST 54TH STREET NEW YORK CITY, NY 10019	84-3951807	501(C)(3)	1,607,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
EMERGENT STRATEGY IDEATION INSTITUTE - 4126 THIRD STREET - DETROIT, MI 48201	01-0559608	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
ENDANGERED SPECIES COALITION PO BOX 65195 WASHINGTON, DC 20035	52-2235210	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
ENVISION EDUCATION INC 111 MYRTLE STREET, SUITE 203 OAKLAND, CA 94607	94-3394659	501(C)(3)	34,600.	0.			QUALITY EDUCATION
EPISCOPAL CITY MISSION 138 TREMONT STREET BOSTON, MA 02111	04-2104171	501(C)(3)	514,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
EQUALITY FEDERATION 818 SW 3RD AVENUE SUITE 141 PORTLAND, OR 97204	81-0670151	501(C)(3)	15,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
EQUALITY LABS P.O. BOX 55 HARTSDALE, NY 10530	11-3451703	501(C)(3)	30,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
EQUALITY OHIO EDUCATION FUND 370 S 5TH STREET SUITE G3 COLUMBUS, OH 43215	02-0743268	501(C)(3)	57,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

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ESCR-NET 370 LEXINGTON AVE SUITE 700 NEW YORK, NY 10017		501(C)(3)	12,396.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ESPICYNIPPLES P.O. BOX 2768 GUAYAMA, PR 00785	01-0559608	501(C)(3)	9,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
EVERGLADES COALITION INC P.O. BOX 530218 SAINT PETERSBURG, FL 33747	35-2242463	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
EVERYBLACKGIRL INC 4041 HIGHLAND PARK DRIVE COLUMBIA, SC 29204	81-2865134	501(C)(3)	20,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
EYELLIANCE 33 IRVING PLACE 3RD FLOOR NEW YORK, NY 10003		501(C)(3)	609,032.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
FAIRFAX COUNTY PUBLIC SCHOOLS OFFICE OF FOOD AND NUTRITION SERVICES - 6840 INDUSTRIAL ROAD - SPRINGFIELD, VA 22151		GOVERNMENT ENTIT	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
FAITH IN TEXAS - PICO 1111 W. MOCKINGBIRD LANE SUITE 260 DALLAS, TX 75247	47-3005234	501(C)(3)	22,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
FEDERACIN DE MAESTROS DE PUERTO RICO - URB. EL CARIBE 1572 AVE PONCE DE LEN - SAN JUAN, PR 00926	66-0267056		53,000.	0.			QUALITY EDUCATION
FIDEICOMISO DE LA TIERRA DEL CAO MARTN PEA - PMB 1838 243 CALLE PARS - SAN JUAN, PR 00917	32-6092938		50,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

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FIDEICOMISO PARA EL DESAROLLO DE RIO PIEDRAS - PO BOX 9300448 - SAN JUAN, PR 00928-5848	66-6043399		25,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
FILIPINO ADVOCATES FOR JUSTICE 310 8TH STREET SUITE 308 OAKLAND, CA 94607	94-2218907	501(C)(3)	129,890.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
FIRST FOCUS 1400 EYE STREET NW SUITE 650 WASHINGTON, DC 20005	81-3185002	501(C)(3)	1,500,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
FIRST FRIENDS OF NEW JERSEY AND NEW YORK - 53 S. HACKENSACK AVENUE - KEARNY, NJ 07032	26-2325815	501(C)(3)	17,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
FLORIDA INSTITUTE FOR WORKFORCE INNOVATION - 259 W UNIVERSITY AVENUE, SUITE A - GAINESVILLE, FL 32601	59-2596359	501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
FOND DU LAC RESERVATION BUSINESS COMMITTEE - 1720 BIG LAKE ROAD - CLOQUET, MN 55720	41-0965719	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
FORSYTH COUNTY COMMUNITY BAIL FUND 1500 N PATTERSON AVENUE 1132 WINSTON SALEM, NC 27105	84-3509488	501(C)(3)	22,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
FORTUNATE KIDS 27308 SCHOOLCRAFT REDFORD, MI 48239	46-5579270	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
FOSTERMORE 11849 W. OLYMPIC BOULEVARD SUITE 10 LOS ANGELES, CA 90064	95-1644609	501(C)(3)	69,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

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FREE HEARTS 2013 25TH AVENUE N NASHVILLE, TN 37208	30-0044814	501(C)(3)	50,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
FREEDOM FOR ALL AMERICANS EDUCATION FUND - 1629 K STREET NW SUITE 300 - WASHINGTON, DC 20006	47-4166556	501(C)(3)	57,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
FREEDOM FOR IMMIGRANTS 1322 WEBSTER STREET SUITE 300 OAKLAND, CA 94612	80-0875881	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
FREEDOM INC. 1810 SOUTH PARK STREET MADISON, WI 53713	43-2023570	501(C)(3)	7,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
FRESH FUTURE FARM INC PO BOX 22194 CHARLESTON, SC 29413	46-5699947	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
FRONTERIZO FIANZA FUND 816 MAGOFFIN AVENUE EL PASO, TX 79901	83-2644981	501(C)(3)	22,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
FUERTEFUERTE, INC. PO BOX 367500 SAN JUAN, PR 00936			5,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
FUNDACION TNICA CONDOMINIO ALEXIS PARK 1102 AVENIDA LAGUNA GARDENS - CAROLINA, PR 00979	66-0905922		69,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
G-8: GRUPO DE LAS OCHO COMUNIDADES ALEDANAS AL CANO MARTIN PENA, INC. - PMB 1873 243 CALLE PARIS - SAN JUAN, PR 00917	66-0681723		5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

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GARDEN ISLAND RESOURCE CONSERVATION AND DEVELOPMENT INC - 4253 C RICE STREET - LIHUE, HI 96766	99-0288553	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
GARMENT WORKER CENTER 1250 SOUTH LOS ANGELES STREET SUITE 100 LOS ANGELES, CA 90015	81-0622327	501(C)(3)	124,600.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
GEORGIA LATINO ALLIANCE FOR HUMAN RIGHTS INC - 7 DUNWOODY PARK SUITE 110 - ATLANTA, GA 30338	76-0809155	501(C)(3)	7,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
GEORGIA ORGANICS INC 200-A OTTLEY DRIVE ATLANTA, GA 30324	58-2345310	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
GRANTMAKERS CONCERNED WITH IMMIGRANTS AND REFUGEES - P.O. BOX 1100 - SEBASTOPOL, CA 95473	20-2559651	501(C)(3)	52,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
GRASSROOTS GLOBAL JUSTICE 7000 CARROLL AVENUE, SUITE 200 TAKOMA PARK, MD 20912	26-4633127	501(C)(3)	25,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
GREAT EXPECTATIONS SCHOOL PO BOX 310 GRAND MARAIS, MN 55604	41-1869463	501(C)(3)	5,000.	0.			QUALITY EDUCATION
GREAT LAKES AQUATIC HABITAT NETWORK AND FUND INC - P.O. BOX 2479 - PETOSKEY, MI 49770	20-5693503	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
GREENPEACE FUND INC 702 H STREET NW SUITE 300 WASHINGTON, DC 20001	95-3313195	501(C)(3)	10,000.	0.			SUSTAINABLE ENVIRONMENT

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GRIST MAGAZINE INC 1201 WESTERN AVENUE SUITE 410 SEATTLE, WA 98101	06-1664153	501(C)(3)	10,000.	0.			SUSTAINABLE ENVIRONMENT
GULF COAST CENTER FOR LAW & POLICY P.O.BOX 784 SLIDELL, LA 70459	58-1956686	501(C)(3)	50,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
H.E.A.R.T. CREW 14632 GRAVELLE ST ST LOUIS, MO 63034	43-1900251	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
HAITIAN BRIDGE ALLIANCE 4265 FAIRMONT AVENUE SUITE 280 SAN DIEGO, CA 92150	81-3558713	501(C)(3)	25,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
HAND HEART AND SOUL PROJECT INC 993 FOREST AVENUE FOREST PARK, GA 30297	82-1127395	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
HAND IN HAND: THE DOMESTIC EMPLOYERS NETWORK - 45 BROADWAY, SUITE 302 - NEW YORK, NY 10006	52-1332694	501(C)(3)	157,890.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
HANDS UP UNITED 5269 EDGEMERE DRIVE BLACK JACK, MO 63033	52-2094677	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
HASER INC PO BOX 368035 SAN JUAN, PR 00936-8035	66-0861655	501(C)(3)	40,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
HAWAII ALLIANCE FOR PROGRESSIVE ACTION - P.O. BOX 1534 - KAPA'A, HI 96746	46-5537123	501(C)(3)	16,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

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HEARTLAND ALLIANCE FOR HUMAN NEEDS & HUMAN RIGHTS - 208 S. LASALLE STREET SUITE 1300 - CHICAGO, IL 60604	36-1877640	501(C)(3)	100,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
HERO WOMEN RISING P.O. BOX 944 FLAGSTAFF, AZ 86002	46-4309143	501(C)(3)	30,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE - 800 EIGHTH STREET, NW - WASHINGTON, DC, DC 20001	52-1844823	501(C)(3)	45,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
HO-CHUNK DEVELOPMENT CORP 509 HOCHUNK PLAZA N WINNEBAGO, NE 68071	47-0837036	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
HOLLER HEALTH JUSTICE INC PO BOX 11032 CHARLESTON, WV 25339	83-1203957	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
HOMELESS YOUTH ALLIANCE INC. PO BOX 170427 SAN FRANCISCO, CA 94117	81-3036333	501(C)(3)	65,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
HOPE PROJECT-LIBERIA P.O. BOX 1095 LEAVENWORTH, WA 98826	45-2621553	501(C)(3)	30,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
HUERTO SEMILLA CALLE MANILA 1003, APTO. #1, SANTA RO PIEDRAS, PR 00925	66-0910974	501(C)(3)	5,000.	0.			SUSTAINABLE ENVIRONMENT
IMMIGRANT FREEDOM FUND OF COLORADO 745 EAST 5TH STREET LOVELAND, CO 80537	04-2103733	501(C)(3)	11,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

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IMMIGRANTS RISING P.O. BOX 411512 SAN FRANCISCO, CA 94141	94-3255070	501(C)(3)	57,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
INDIGENOUS EDUCATIONAL NETWORK OF TURTLE ISLAND - P.O. BOX 485 - BEMIDJI, MN 56619	38-3653476	501(C)(3)	16,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
INDIGENOUS VISION 2390 E CAMELBACK ROAD SUITE 130 PHOENIX, AZ 85016	47-4307849	501(C)(3)	20,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
INICIATIVA DE ECO-DESARROLLO DE BAHIA DE JOBOS INC - ANTIGUO CENTRO CIBERNETICO, CALLE 705 INTERIOR - SALINAS, PR 00704	66-0758170		20,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
INLAND COALITION FOR IMMIGRANT JUSTICE - 521 N EUCLID AVENUE - ONTARIO, CA 91762	33-0480298	501(C)(3)	20,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
INSTITUTO DE EDUCACION POPULAR DEL SUR DE CALIFORNIA - 1565 WEST 14TH STREET - LOS ANGELES, CA 90015	95-4431992	501(C)(3)	159,890.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
INSTITUTO PARA LA INVESTIGACION Y ACCION EN AGROECOLOGIA - 273 CALLE SIERRA MORENA - URB. LA CUMBRE PMB 101, PR 00926	66-0910974		5,000.	0.			SUSTAINABLE ENVIRONMENT
INTEGRATIVE HEALTH PROJECTS INC 200 E. 15TH STREET NEW YORK, NY 10003	47-3442650	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
INTELLIGENT MISCHIEF 397 PUTNAM AVENUE #2 BROOKLYN, NY 11216	01-0559608	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

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INTERACTION AMERICAN COUNCIL FOR VOLUNTARY INTERNATIONAL ACTION INC - 1400 16TH STREET NW SUITE 210 - WASHINGTON, DC 20036	13-3287064	501(C)(3)	718,367.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
INTERNATIONAL VILLAGE CLINIC P.O. BOX 386243 BLOOMINGTON, MN 55438	41-1951636	501(C)(3)	30,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ISA(BEL) FATIMA DIAWARA 15 CAROUSEL LANE PUEBLO, CO 81001	52-2971070	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
ITPC (INTERNATIONAL TREATMENT PREPAREDNESS COALITION) - 494 8TH AVENUE, SUITE 505 - NEW YORK, NY 10001		501(C)(3)	60,304.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
JAMESTOWN COMMUNITY CENTER INC 2929 19TH STREET SAN FRANCISCO, CA 94110	94-3213124	501(C)(3)	50,000.	0.			QUALITY EDUCATION
JEWS FOR RACIAL AND ECONOMIC JUSTICE - 330 SEVENTH AVENUE SUITE 1901 - NEW YORK, NY 10001	13-3694790	501(C)(3)	30,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
JEWS IN ALL HUES 7152 CHEW AVENUE, 2ND FLOOR PHILADELPHIA, PA 19119	27-2516792	501(C)(3)	46,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
JOC TORAH ACADEMY 330 SEVENTH AVENUE, STE 1901 NEW YORK, NY 10001	13-3694790	501(C)(3)	36,000.	0.			QUALITY EDUCATION
JOHN HOWARD ASSOCIATION 70 E. LAKE STREET, SUITE 410 CHICAGO, IL 60601	36-2167739	501(C)(3)	15,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

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JOIN FOR JUSTICE INC. 359 BOYLSTON STREET FOURTH FLOOR BOSTON, MS 02116	04-3617885	501(C)(3)	25,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
JUST CITY INC P.O. BOX 41852 MEMPHIS, TN 38174	47-2650826	501(C)(3)	30,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
JUSTICE FOR MUSLIMS COLLECTIVE C/O DEFENDING RIGHTS AND DISSENT INC 1325 G STREET NW, SUITE 500 - WASHINGTON	27-0042821	501(C)(3)	20,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
KANSAS CITY COMMUNITY BAIL FUND 1055 BROADWAY BLVD SUITE 130 KANSAS CITY, MS 64105	43-1152398	501(C)(3)	322,886.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
KERES CHILDREN'S LEARNING CENTER P.O. BOX 113 COCHITI PUEBLO, NM 87072	45-4511408	501(C)(3)	5,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
KILOMETRO 0 206 TETUN, SUITE 800 SAN JUAN, PR 00901	66-0898712	501(C)(3)	20,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
KNOWLEDGEWORKS FOUNDATION ONE WEST 4TH STREET, SUITE 200 CINCINNATI, OH 45202	31-1321973	501(C)(3)	21,400.	0.			QUALITY EDUCATION
LA COLMENA CIMARRONA PO BOX 500 VIEQUES, PR 00765	66-0861655	501(C)(3)	28,333.	0.			SUSTAINABLE ENVIRONMENT
LA MARAA 551 CALLE TRIGO SAN JUAN, PR 00907	66-0838654	501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

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LA RESISTENCIA PO BOX 3040 PMB 512 GURABO, PR 00778	81-1719074	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
LAW FOR BLACK LIVES 45 W. 36TH STREET 6TH FLOOR NEW YORK, NY 10018	13-3191113	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
LEADERSHIP COUNSEL FOR JUSTICE AND ACCOUNTABILITY - 764 P STREET SUITE 12 - FRESNO, CA 93721	46-1517800	501(C)(3)	28,539.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
LIBERTY FUND INC 428 BROADWAY NEW YORK, NY 10013	38-3974312	501(C)(3)	22,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
LIFT UP CONTRA COSTA ACTION 1014 TORNEY AVENUE SAN FRANCISCO, CA 94129	94-3153687	501(C)(3)	362,816.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
LOUISVILLE COMMUNITY BAIL FUND C/O ALLIANCE FOR GLOBAL JUSTICE 225 E 26TH STREET SUITE 1 - TUCSON, AZ 85713	52-2094677	501(C)(3)	737,225.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
LUNAR BE'CHOL LASHON 3198 FULTON ST SAN FRANCISCO, CA 94118	94-3307253	501(C)(3)	5,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MAKE THE ROAD NEW YORK 301 GROVE STREET BROOKLYN, NY 11237	11-3344389	501(C)(3)	30,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MAKER EDUCATION INITIATIVE 1808 FIFTH STREET BERKELEY, CA 94710	83-4594261	501(C)(3)	364,461.	0.			QUALITY EDUCATION

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MASA-MEXED INC 2770 THIRD AVENUE 1ST FLOOR BRONX, NY 10455	11-3640210	501(C)(3)	12,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
MASSACHUSETTS BAIL FUND INC. 2161 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02140	82-4924766	501(C)(3)	880,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MEDIA MOBILIZING PROJECT 924 CHERRY STREET 5TH FLOOR PHILADELPHIA, PA 19107	26-0307123	501(C)(3)	50,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
METRO ATLANTA MUTUAL AID FUND 931 MONROE DR NE 110-552 ATLANTA, GA 30308	81-0976954	501(C)(3)	7,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
MIJENTE SUPPORT COMMITTEE 734 W POLK STREET PHOENIX, AZ 85007	82-1711382	501(C)(3)	35,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
MINNESOTA FREEDOM FUND INC P.O. BOX 6398 MINNEAPOLIS, MN 55406	82-1214607	501(C)(3)	20,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MISSION GRADUATES 3040 16TH STREET SAN FRANCISCO, CA 94103	23-7172909	501(C)(3)	210,000.	0.			QUALITY EDUCATION
MISSISSIPPI REPRODUCTIVE FREEDOM FUND - 210 LORENZ BOULEVARD - JACKSON, MS 39216	04-3236982	501(C)(3)	40,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MISSOURI STREAM TEAM WATERSHED COALITION - PO BOX 483 - SHELBYNA, MI 63468	43-1900822	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT

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MITSUI COLLECTIVE 6 BRANDYWOOD DRIVE PEPPER PIKE, OH 44124	23-2081703	501(C)(3)	58,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
MOHAWK TRAIL REGIONAL SCHOOL DISTRICT - 24 ASHFIELD ROAD - SHELBURNE FALLS, MA 01370	04-6135347	GOVERNMENT ENTIT	375,000.	0.			QUALITY EDUCATION
MOMENTUM COMMUNITY C/O APINYA POKACHAIYAPAT 2901 S. HARCOURT AVENUE - LOS ANGELES, CA 90016	81-4267631	501(C)(3)	35,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MONTGOMERY BAIL OUT FUND C/O FIRST CHRISTIAN CHURCH OF MONTGOMERY 1705 TAYLOR ROAD - MONTGOMERY, AL 3	35-0868116	501(C)(3)	318,827.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MONUMENT IMPACT 1760 CLAYTON ROAD CONCORD, CA 94520	94-3370919	501(C)(3)	219,890.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
MORTAR CINCINNATI 1329 VINE STREET CINCINNATI, OH 45202	47-2431620	501(C)(3)	30,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MOUNT PLEASANT NOW DEVELOPMENT CORPORATION - 13815 KINSMAN ROAD - CLEVELAND, OH 44120	34-1599720	501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
MOUNTAIN ACCESS BRIGADE 5832 WOODED ACRES DRIVE NW KNOXVILLE, TN 37921	83-1203957	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MOVEMENT FOR BLACK LIVES FUND 4316 S VINCENNES AVENUE, UNIT 2S CHICAGO, IL 60653	52-2094677	501(C)(3)	7,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

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MUJERES DE ISLAS, INC. APARTADO 358 CULEBRA, PR 00775	66-0768054		23,333.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
MUJERES UNIDAS Y ACTIVAS 3543 18TH STREET SUITE 23 SAN FRANCISCO, CA 94110	20-2986926	501(C)(3)	89,890.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
NAACP EMPOWERMENT PROGRAMS INC 4805 MOUNT HOPE DRIVE BALTIMORE, MD 21215	13-1084135	501(C)(3)	15,250.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
NAACP EMPOWERMENT PROGRAMS INC 4805 MOUNT HOPE DRIVE BALTIMORE, MD 21215	13-1084135	501(C)(3)	15,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
NATIONAL BAIL OUT C/O HIGHLANDER RESEARCH AND EDUCATION CENTER 1959 HIGHLANDER WAY - NEW MARKE	62-0646373	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
NATIONAL BLACK ENVIRONMENTAL JUSTICE NETWORK - DEEP SOUTH CENTER FOR ENVIRON. JUSTICE 9801 LAKE FOREST BOULEVARD - NEW	56-2466977	501(C)(3)	16,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
NATIONAL BLACK FOOD AND JUSTICE ALLIANCE - 1900 FRUITVALE AVENUE NO 3D - OAKLAND, CA 94601	30-0044814	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
NATIVE YOUTH LEADERSHIP ALLIANCE P.O. BOX 241 PINE RIDGE, SD 57770	27-2503270	501(C)(3)	20,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
NC COMMUNITY BAIL FUND OF DURHAM PO BOX 61114 RALEIGH, NC 27661	16-1702165	501(C)(3)	391,422.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

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NETWORK FOR LANDSCAPE CONSERVATION C/O CLIMATE CONSERVATION PO BOX 158 BOZEMAN, MO 59771	27-1226829	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
NEW YORK CITY NETWORK OF WORKER COOPERATIVES - 495 FLATBUSH AVENUE SUITE 2 - BROOKLYN, NY 11225	20-2264584	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
NEW YORK UNIVERSITY 665 BROADWAY STREET SUITE 801 NEW YORK, NY 10012	13-5562308	501(C)(3)	85,900.	0.			QUALITY EDUCATION
NOBODY LEAVES MID-HUDSON 29 NORTH HAMILTON STREET L05 POUGHKEEPSIE, NY 12601	94-3153687	501(C)(3)	405,575.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
NORCAL RESIST 2121 BROADWAY SACRAMENTO, CA 95818	83-1003248	501(C)(3)	153,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
NORTHWEST COMMUNITY BAIL FUND 2311 N 45TH STREET #303 SEATTLE, WA 98103	83-1096468	501(C)(3)	30,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
OCCIDENTAL COLLEGE 1600 CAMPUS ROAD LOS ANGELES, CA 90041	95-1667177	501(C)(3)	16,000.	0.			QUALITY EDUCATION
OCEANIC ASCENT EDUCATION, INC. 180 GOLONDRINA AVENUE BARRIGADA, PR 96913	66-0747234		5,000.	0.			SUSTAINABLE ENVIRONMENT
OFICINA LEGAL DE LA COMUNIDAD INC PO BOX 194735 SAN JUAN, PR 00919	66-0387277	501(C)(3)	5,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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OKLAHOMA WOMEN IN AG ASSOCIATION 1701 N. MARTIN LUTHER KING AVENUE OKLAHOMA CITY, OK 73111	26-2806089	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
ONE FAIR WAGE 3518 SOUTH EDMUNDS STREET SEATTLE, WA 98118	91-1635554	501(C)(3)	7,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
OPERATION RESTORATION 1450 POYDRAS STREET SUITE 2260 NEW ORLEANS, LA 70112	61-1791941	501(C)(3)	406,044.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ORANGE COUNTY ENVIRONMENTAL JUSTICE PROJECT ACTION FUND - 1905 E. 17TH STREET SUITE 325 - SANTA ANA, CA 92705	94-3153687	501(C)(3)	197,215.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
ORANGE COUNTY JUSTICE FUND C/O NORMA GARCIA GUILLEN 695 TOWN CENTER DRIVE, SUITE 700 - COSTA MESA, CA 9	82-3099041	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
OUR CORE INCORPORATED PO BOX 1371 NEWBURGH, NY 12551	82-2711699	501(C)(3)	5,000.	0.			QUALITY EDUCATION
PALETTE OF EXPRESSIONS 345 S 36TH STREET RICHMOND, CA 94804	83-4477196	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PAN-AFRICAN COMMUNITY DEVELOPMENT INITIATIVE - 1158 INTERVALE AVENUE - BRONX, NY 10459	13-3749744	501(C)(3)	20,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PANGEA PR PO BOX 193008 SAN JUAN SAN JUAN, PR 00919	66-0550935	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

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PARCELERAS AFORCARIBENAS POR LA FORMACION BARRIAL INC - PO BOX 1321 - TRUJILLO ALTO, PR 00978-1321	66-0924847	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PARTNERSHIP FOR THE NATIONAL TRAILS SYSTEM - 1615 M STREET NW SECOND FLOOR - WASHINGTON, DC 20036	39-2015324	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
PEER HEALTH EXCHANGE INC. 100 WEBSTER STREET SUITE 300 OAKLAND, CA 94607	56-2374305	501(C)(3)	16,425.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PEOPLE UNITED FOR SUSTAINABLE HOUSING INCORPORATED - 429 PLYMOUTH AVENUE SUITE 1 - BUFFALO, NY 14213	20-3558447	501(C)(3)	15,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
PEOPLE'S ADVOCACY INSTITUTE P.O. BOX 736 JACKSON, MS 39205	82-2700169	501(C)(3)	22,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
PHILADELPHIA BAIL FUND P.O.BOX 22316 PHILADELPHIA, PA 19110	82-1360589	501(C)(3)	100,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
PHILADELPHIA COMMUNITY BAIL FUND C/O MOVEMENT ALLIANCE PROJECT 924 CHERRY STREET, 5TH FLOOR - PHILADELPHIA, P	26-0307123	501(C)(3)	22,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
PICO CALIFORNIA 2000 FRANKLIN STREET, 3RD FLOOR OAKLAND, CA 94612	94-2206497	501(C)(3)	12,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
PILIPINO WORKERS CENTER OF SOUTHERN CALIFORNIA - 153 GLENDALE BOULEVARD - LOS ANGELES, CA 90026	77-0439301	501(C)(3)	158,140.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

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PINKY SWEAR FOUNDATION 5555 WEST 78TH STREET SUITE E EDINA, MN 55439	56-2384527	501(C)(3)	34,842.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PISO PROYECTO C/O NOEMI SEGARRA RAMIREZ 1411 CALLE ESTRELLA APT. 1A - SAN JUAN, PR 00907	26-3250931	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PLATAFORMA AGRO-CULTURAL PARA EL EMPODERAMIENTO COMUNITARIO - 107 CALLE CASTRO VIA - SAN JUAN, PR 00911	66-0917085		13,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PLAY COUSINS COLLECTIVE 401 NORTHWESTERN PARKWAY LOUISVILLE, KY 40212	82-2811602	501(C)(3)	8,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PORTLAND FREEDOM FUND PO BOX 42671 PORTLAND, OR 97242	93-1009519	501(C)(3)	358,450.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
POWER CALIFORNIA 1720 BROADWAY, 2ND FLOOR OAKLAND, CA 94612	77-0651682	501(C)(3)	57,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PRESS STREET 3718 SAINT CLAUDE AVENUE NEW ORLEANS, LA 70117	20-5154240	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PRISON BOOK PROGRAM 1306 HANCOCK STREET SUITE 100 QUINCY, MS 02169	20-3235673	501(C)(3)	22,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
PROGRESSIVE LEADERSHIP ALLIANCE OF NEVADA - 2330 PASEO DEL PRADO C109 - LAS VEGAS, NV 89102	88-0318655	501(C)(3)	50,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

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PROJECT HAJRA PO BOX 350884 JAMAICA, NY 11435	01-0559608	501(C)(3)	20,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PROJECT SOUTH INC. 9 GAMMON AVENUE SE ATLANTA, GA 30315	58-1956686	501(C)(3)	100,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
PROTEUS FUND INC 15 RESEARCH DRIVE SUITE B AMHERST, MA 01002	04-3243004	501(C)(3)	45,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PROYECTO MATRIA INC PO BOX 1334 CAGUAS, PR 00726	66-0641575	501(C)(3)	25,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PROYECTO NAZE, INC. CALLE KENT J-17 VILLA CONTESSA BAYAMON, PR 00956	66-0938736		5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PROYECTO SALUD Y ACUPUNTURA PARA EL PUEBLO - 1900 CACIQUE STREET APT. #2 - SAN JUAN, PR 00911	47-3442650	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PUBELO OF PICURIS P. O. BOX 127 PENASCO, NM 87553	85-0258099	501(C)(3)	5,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
PUEBLO CRITICO, INC. MANSIONES DE RIO PIEDRAS 1786 BEGON SAN JUAN, PR 00926	66-0882626		35,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
QUEER THE LAND 1510 S HILL STREET SEATTLE, WA 98144	01-0559608	501(C)(3)	20,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

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RE POWER FUND 2639 NICOLLET AVENUE SUITE 220 MINNEAPOLIS, MN 55408	35-2191193	501(C)(3)	22,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
REAL OPTIONS FOR CITY KIDS 73 LELAND AVENUE SAN FRANCISCO, CA 94134	94-3212617	501(C)(3)	125,000.	0.			QUALITY EDUCATION
REALITY SPEAKING INC. 742 HAWS AVENUE NORRISTOWN, PA 19401	16-1696798	501(C)(3)	100,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
REFUGEE & IMMIGRANT CENTER FOR EDUCATION & LEGAL SERVICES - 1305 N. FLORES STREET - SAN ANTONIO, TX 78212	74-2436920	501(C)(3)	35,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
REFUGEE COMMUNITY PARTNERSHIP INC PO BOX 461 CARRBORO, NC 27510	26-3608741	501(C)(3)	12,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
REGENERATION PROJECT 672 13TH STREET SUITE 100 OAKLAND, CA 94612	94-3335236	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
REGENTS OF THE UNIVERSITY OF CALIFORNIA AT BERKELEY - 2195 HEARST AVENUE, ROOM 130F - BERKELEY, CA 94720-1103	94-6002123	501(C)(3)	20,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
REPRODUCTIVE JUSTICE ACTION COLLECTIVE - C/O WOMEN WITH A VISION 1226 N. BROAD STREET - NEW ORLEANS, LA 70119	72-1202185	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
RESTOREHER USAMERICA INC PO BOX 141 READ OAK, GA 30272	83-0907216	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

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REVERENCE PROJECT 1673 E. 108TH STREET LOS ANGELES, CA 90059	47-3427148	501(C)(3)	50,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
RICHMOND DISTRICT NEIGHBORHOOD CENTER INC - 741 30TH AVENUE - SAN FRANCISCO, CA 94121	94-2684271	501(C)(3)	125,000.	0.			QUALITY EDUCATION
RIGHT TO THE CITY ALLIANCE INC 388 ATLANTIC AVENUE 3RD FLOOR BROOKLYN, NY 11217	94-3462187	501(C)(3)	40,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ROCKY MOUNTAIN WOLF PROJECT ACTION FUND - 1600 BROADWAY SUITE #1600 - DENVER, CO 80202	83-2759539	501(C)(3)	64,281.	0.			SUSTAINABLE ENVIRONMENT
ROTHENBERG ROOFTOP GARDEN P.O. BOX 9191 CINCINNATI, OH 45209	81-2686094	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
RUBY'S PLACE 20880 BAKER ROAD CASTRO VALLEY, CA 94546	94-2212241	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
SAFE & JUST MICHIGAN 521 SEYMOUR AVENUE LANSING, MI 48933	38-3520445	501(C)(3)	125,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
SAN FRANCISCO STATE UNIVERSITY BURSAR'S OFFICE 1600 HOLLOWAY AVENUE, ADM 155 - SAN FRANCISCO, CA 94132	93-1137247	GOVERNMENT ENTIT	5,000.	0.			QUALITY EDUCATION
SANTA CRUZ BARRIOS UNIDOS INC 1817 SOQUEL AVENUE SANTA CRUZ, CA 95062	77-0333450	501(C)(3)	11,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

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SANTA FE DREAMERS PROJECT PO BOX 8009 SANTA FE, NM 87504	82-0839645	501(C)(3)	35,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
SAVANNAH RIVERKEEPER INCORPORATED P.O. BOX 60 AUGUSTA, GA 30903	58-2630660	501(C)(3)	15,000.	0.			SUSTAINABLE ENVIRONMENT
SCHAGHTICOKE FIRST NATIONS INC. 4 DINEEN ROAD MILLBROOK, NY 12545	47-4752692	501(C)(3)	20,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
SEEDING SOVEREIGNTY 375 8TH STREET BROOKLYN, NY 11215	94-2889684	501(C)(3)	20,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
SEEDLEAF INC 714 NORTH LIMESTONE STREET LEXINGTON, KY 40508	45-0582109	501(C)(3)	5,000.	0.			SUSTAINABLE ENVIRONMENT
SEEDS IN THE MIDDLE INC 153 WARREN STREET BROOKLYN, NY 11201	27-1847142	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
SEMILLERO DE LAS ARTES, INC. CALLE MARIANO ABRIL 101A BO. BUENA VISTA - MAYAGUEZ, PUERTO RICO, PUERTO RIC	66-0874286		25,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
SHARING INC PO BOX 5441 BERKELEY, CA 94705	83-3636047	501(C)(3)	93,223.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
SHOWING UP FOR RACIAL JUSTICE EDUCATION FUND INC - P.O. BOX 1053 - BUFFALO, NY 14205	82-2309274	501(C)(3)	7,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

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SILICON VALLEY DE-BUG 701 LENZEN AVENUE SAN JOSE, CA 95126	46-4274158	501(C)(3)	50,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
SOCIAL JUSTICE CENTER INC 1202 WILLIAMSON STREET SUITE 1 MADISON, WI 53703	39-1979881	501(C)(3)	318,304.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
SOLIDAIRE NETWORK 1330 BROADWAY, 3RD FLOOR OAKLAND, CA 94612	84-2130536	501(C)(3)	161,488.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
SOUTH FLORIDA HEALING JUSTICE PROJECT - 10505 SW 18TH STREET - MIRIMAR, FL 33025	61-1565139	501(C)(3)	25,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
SOUTH WARD ENVIRONMENTAL ALLIANCE 58 NAIRN PLACE NEWARK, NJ 07108	52-1043444	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
SOUTHERN PARTNERS FUND INC 1776 PEACHTREE STREET NW SUITE 200 ATLANTA, GA 30309	58-2409301	501(C)(3)	143,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
SOUTHERNERS ON NEW GROUND 561 W WHITEHALL STREET ATLANTA, GA 30310	61-1274170	501(C)(3)	100,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
SOUTHWEST ORGANIZING PROJECT 9327 BEAR LAKE WAY ALBUQUERQUE, NM 87120	85-0361425	501(C)(3)	20,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
SPIRITHOUSE PO BOX 61865 DURHAM, NC 27715	58-1318198	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

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SPROUT CITY FARMS INC P.O. BOX 7536 DENVER, CO 80207	35-2415295	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
STANFORD UNIVERSITY FINANCIAL AID FINANCIAL AID ATTN: FUNDS MANAGEMENT TEAM MONTAG HALL 355 GALVEZ STREET - ST	94-1156365	501(C)(3)	5,000.	0.			QUALITY EDUCATION
STEAM ONWARD INCORPORATED 1908 CATHERINE FRAN DRIVE ACCOKEEK, MD 20607	81-2599694	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
STOCKTONIANS TAKING ACTION TO NEUTRALIZE DRUGS - 1209 E. 8TH STREET - STOCKTON, CA 95206	94-3179778	501(C)(3)	95,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
STRATEGIES FOR INTERNATIONAL DEVELOPMENT - 330 PENNSYLVANIA AVENUE, SE, SUITE 304 - WASHINGTON, DC 20003	98-0120837	501(C)(3)	30,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
SUMMIT PUBLIC SCHOOLS 14 BEEKMAN TERRACE SUMMIT, NJ 07901	26-2034843	501(C)(3)	29,575.	0.			QUALITY EDUCATION
TALLER SALUD INC PO BOX 524 LOIZA, PR 00772	66-0494692	501(C)(3)	93,333.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
TEEN UP-WARD BOUND, INC. 717 OPA-LOCKA BLVD OPA-LOCKA, FL 33054	65-1094606	501(C)(3)	31,300.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
TELEGRAPH HILL NEIGHBORHOOD ASSOCIATION - 660 LOMBARD STREET - SAN FRANCISCO, CA 94133	94-1167422	501(C)(3)	115,000.	0.			QUALITY EDUCATION

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THE AHIMSA COLLECTIVE 2129 PARKER STREET BERKELEY, CA 94704	20-5278030	501(C)(3)	30,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
THE ASSOCIATION OF GLEANING ORGANIZATIONS - 1140 S 1100 E - SALT LAKE CITY, UT 84105	45-4320152	501(C)(3)	16,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
THE BOARD OF TRUSTEES OF THE LELAND STANFORD JUNIOR UNIVERSITY - P.O. BOX 44253 - STANFORD, CA 94144-4253	94-1156365	501(C)(3)	109,458.	0.			QUALITY EDUCATION
THE CRENULATED COMPANY LTD 1512 TOWNSEND AVENUE BRONX, NY 10452	14-1719016	501(C)(3)	49,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
THE DREAM DEFENDERS 11643 NE 11TH PLACE APT 1 MIAMI, FL 33161	94-3153687	501(C)(3)	2,024,205.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
THE EDUCATION TRUST 580 2ND STREET SUITE 200 OAKLAND, CA 94607	52-1982223	501(C)(3)	57,500.	0.			QUALITY EDUCATION
THE HEALTH ALLIANCE FOR VIOLENCE INTERVENTION - 101 HUDSON STREET SUITE 2100 - JERSEY CITY, NJ 07304	04-2229839	501(C)(3)	25,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
THE JUSTICE INITIATIVE 600 MAIN STREET SUITE 100 KNOXVILLE, TN 37902	81-2664406	501(C)(3)	50,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
THE LIBERATION HOUSE: KEEPING BALLROOM COMMUNITY ALIVE NETWORK (KBCAN) - 1327 R STREET NW - WASHINGTON, DC 20009	81-0975889	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

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THE SOMO PROJECT 92 MORNINGSIDE AVENUE #7E NEW YORK, NY 10027	46-4140758	501(C)(3)	30,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
THE US CLIMATE ACTION NETWORK ATTN: OPERATIONS DIRECTOR 50 F STREET NW, 8TH FLOOR - WASHINGTON, DC 20001	20-4597308	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
THOUSAND CURRENTS 1330 BROADWAY SUITE 301 OAKLAND, CA 94612	77-0071852	501(C)(3)	27,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
TIDES FOUNDATION P.O. BOX 399389 SAN FRANCISCO, CA 94129-0903	51-0198509	501(C)(3)	19,814,460.	0.			HEALTHY INDIVIDUALS & COMMUNITIES; EQUALITY, HUMAN RIGHTS, & ECONOMIC EMPOWERMENT
TOWN OF BARNSTABLE SCHOOL ADMINISTRATION BUILDING 230 HYANNIS, MA 02601	04-6001079	GOVERNMENT ENTIT	374,910.	0.			QUALITY EDUCATION
TOXICS ACTION CENTER INC 294 WASHINGTON STREET #500 BOSTON, MA 02108	04-3211693	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
TRANS QUEER PUEBLO 1726 E ROOSEVELT STREET PHOENIX, AZ 85006	86-0593601	501(C)(3)	50,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
TRANSGENDER ADVOCATES KNOWLEDGEABLE EMPOWERING (TAKE) RESOURCE CENTER - 1203 FIDLER LANE APT 406 - SILVER SPRING, MD 20910	26-3728794	501(C)(3)	35,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
TRANSGENDER, GENDER VARIANT, INTERSEX JUSTICE PROJECT - 370 TURK STREET SUITE 370 - SAN FRANCISCO, CA 94102	94-3330568	501(C)(3)	20,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRAUMA RECOVERY CENTER 2727 MARIPOSA STREET SUITE 100 SAN FRANCISCO, CA 94110	94-3189424	501(C)(3)	170,604.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
TREES FOUNDATION 439 MELVILLE ROAD GABERVILLE, CA 95542	68-0259810	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
TSURU FOR SOLIDARITY 533 66TH ST OAKLAND, CA 94609	52-2094677	501(C)(3)	10,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
TUCSON SECOND CHANCE COMMUNITY BAIL FUND - 738 N. 5TH AVENUE - TUCSON, AZ 85705	30-0044814	501(C)(3)	22,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
U B FOUNDATION ACTIVITIES INC PO BOX 900 BUFFALO, NY 14226	16-1372561	501(C)(3)	9,264.	0.			QUALITY EDUCATION
U B FOUNDATION ACTIVITIES, INC. PO BOX 900 BUFFALO, NY 14226	16-1372561	501(C)(3)	75,000.	0.			QUALITY EDUCATION
UNITED FOR RESPECT EDUCATION FUND 400 JAY STREET #300 BROOKLYN, NY 11201	13-3885314	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
UNITED FRIENDS OF THE CHILDREN 1055 WILSHIRE BLVD SUITE 1955 LOS ANGELES, CA 90017	95-3665186	501(C)(3)	35,000.	0.			QUALITY EDUCATION
UNIVERSITY OF CALIFORNIA LOS ANGELES EXTENSION - CASHIER'S OFFICE 1145 GAYLEY AVENUE, 2ND FLOOR - LOS ANGELES, CA 90024	95-6006143	501(C)(3)	5,000.	0.			QUALITY EDUCATION

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF COLORADO DENVER FINANCIAL AID & SCHOLARSHIPS OFFICE CAMPUS BOX 125 PO BOX 173364 - DENVER, C	84-6000555	501(C)(3)	5,000.	0.			QUALITY EDUCATION
UNIVERSITY OF UTAH UNIV. OFFICE OF SCHOLARSHIPS& FINANCIAL AID 201 SOUTH 1460 EAST, ROOM 105 -	87-6000525	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
URBAN PEACE INSTITUTE 1910 W SUNSET BOULEVARD SUITE 800 LOS ANGELES, CA 90026	95-4302067	501(C)(3)	25,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
URBE APIE PASEO GAUTIER BNITEZ #16 CAGUAS, PR 00725	66-0895294	501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
URGE: UNITE FOR REPRODUCTIVE AND GENDER EQUITY - 1317 F STREET NW SUITE 501 - WASHINGTON, DC 20004	52-1772575	501(C)(3)	30,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
VIROQUA AREA MONTESSORI SCHOOL 115 N. EDUCATION AVENUE VIROQUA, WI 54665	39-6004944	GOVERNMENT ENTIT	5,000.	0.			QUALITY EDUCATION
VISTA UNIFIED SCHOOL DISTRICT 1234 ARCADIA AVENUE VISTA, CA 92084	95-6003432	GOVERNMENT ENTIT	10,000.	0.			QUALITY EDUCATION
VISUAL ARTS RESEARCH & RESOURCE CTR RELATING TO THE CARIBBEAN INC - 120 EAST 125TH STREET - NEW YORK, NY 10035	13-3054001	501(C)(3)	5,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
WASHINGTON IMMIGRANT SOLIDARITY NETWORK - PO BOX 48159 - SEATTLE, WA 98148	46-1470709	501(C)(3)	14,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST OAKLAND ENVIRONMENTAL INDICATORS PROJECT - 349 MANDELA PKWY - OAKLAND, CA 94607	20-2384563	501(C)(3)	25,000.	0.			SUSTAINABLE ENVIRONMENT
WESTED 730 HARRISON STREET SAN FRANCISCO, CA 94107	94-3233542	GOVERNMENT ENTIT	585,000.	0.			QUALITY EDUCATION
WESTERN MINING ACTION NETWORK 220 S. 27TH STREET, SUITE B BILLINGS, MT 59101	84-1123481	501(C)(3)	20,000.	0.			SUSTAINABLE ENVIRONMENT
WHITTIER SCHOOL ATTN: PARENT ADVISORY COUNCIL 511 N BOZEMAN, MT 59715	81-0544054	GOVERNMENT ENTIT	5,000.	0.			QUALITY EDUCATION
WHOLE WOMAN'S HEALTH ALLIANCE 1001 E. MARKET STREET SUITE 200 CHARLOTTESVILLE, VA 22902	46-5318393	501(C)(3)	150,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
WILLAMETTE RIVER NETWORK C/O TIDES CENTER 1014 TORNEY AVENUE SAN FRANCISCO, CA 94129	94-3213100	501(C)(3)	130,000.	0.			SUSTAINABLE ENVIRONMENT
WISCONSIN ASSOCIATION OF LAKES INC 716 LOIS DRIVE SUN PRAIRIE, WI 53590	39-1926001	501(C)(3)	16,000.	0.			SUSTAINABLE ENVIRONMENT
WOMEN ENGAGED ATTN: ALTERNATE ROOTS 1270 CAROLINE ST BOX D120-353 - ATLANTA, GA 30307	58-1318198	501(C)(3)	30,113.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
WOMEN'S MARCH GLOBAL 118 WEST 22ND STREET 12TH FLOOR NEW YORK, NY 10011	82-1448762	501(C)(3)	9,148.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Y NO HABA LUZ, INC. AVE. PONCE DE LEN 1416 LOCAL 303 SAN JUAN, PR 00909	66-0652205		5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
YOUNG CONSERVATIVES FOR ENERGY REFORM - 1775 EYE STREET NW SUITE 1150 - WASHINGTON, DC 20006	82-4990956	501(C)(3)	180,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
YOUNG WORKERS UNITED 209 GOLDEN GATE AVENUE SAN FRANCISCO, CA 94102	23-7404756	501(C)(3)	75,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
YOUTHWORKS 1000 CORDOVA PLACE, #415 SANTA FE, NM 87505	85-0480524	501(C)(3)	5,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
YWCA GREATER BATON ROUGE 11404 LAKE SHERWOOD AVENUE N. SUITE BATON ROUGE, LA 70816	72-0650993	501(C)(3)	150,000.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
YWCA OF GREATER BATON ROUGE 11404 LAKE SHERWOOD AVENUE N. SUITE BATON ROUGE, LA 70816	72-0650993	501(C)(3)	22,500.	0.			EQUALITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

**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
STIPEND/SUPPORT/SCHOLARSHIP	24	1,153,567.	0.		

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

**PART I, LINE 2:**

DUE DILIGENCE IS CONDUCTED IN ADVANCE OF FUNDING, INCLUDING REVIEW OF THE GROUP'S TAX-EXEMPT STATUS AND WHETHER THE GRANT WOULD ADVANCE TIDES' MISSION. ALL GRANTEEES RECEIVE A WRITTEN GRANT AGREEMENT. BY ACCEPTING PAYMENT, THE GRANTEE AGREES TO THE CONDITIONS OF THE AWARD. IF A GRANT IS RESTRICTED TO A SPECIFIC PROGRAM OR SPECIFIC ACTIVITIES, GRANTEEES FURTHER AGREE THAT ANY PORTION OF THE GRANT NOT USED FOR THE STATED PURPOSE MUST BE REPAYED AND ANY CHANGE OF THE PURPOSE MUST BE REQUESTED AND APPROVED IN ADVANCE IN WRITING. AWARD LETTERS FOR GRANTS THAT ARE RESTRICTED TO A

**Part IV** Supplemental Information

NON-LOBBYING PURPOSE ALSO PROHIBIT THE USE OF GRANT FUNDS TO ENGAGE IN LOBBYING ACTIVITY. BASED ON A RISK ASSESSMENT AND CONSIDERATION OF THE GRANTEE'S TAX-EXEMPT STATUS, NARRATIVE AND FINANCIAL REPORTS DESCRIBING USE OF GRANTS FUNDS ARE REQUIRED FOR CERTAIN GRANTS AFTER THE GRANT AWARD.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

**TIDES CENTER**

Employer identification number

**94-3213100**

**Part I Questions Regarding Compensation**

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

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

Schedule J (Form 990) 2020

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JUDITH HILL	(i)	0.	0.	0.	0.	0.	0.	0.
TREASURER/CFO	(ii)	355,242.	217,385.	30,327.	44,846.	14,014.	661,814.	0.
(2) TUTI SCOTT	(i)	0.	0.	0.	0.	0.	0.	0.
INTERIM CEO	(ii)	439,705.	0.	7,762.	41,170.	33,646.	522,283.	0.
(3) MARK SMOLINSKI	(i)	305,488.	0.	24,390.	38,955.	24,416.	393,249.	0.
PRESIDENT - ENDING PANDEMICS	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) CATHERINE LENORE ANDERSON	(i)	269,988.	50,000.	1,743.	32,502.	33,829.	388,062.	0.
PRESIDENT - ASJ/CSJ	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) TOMIQUIA MOSS	(i)	347,096.	0.	300.	21,000.	11,614.	380,010.	0.
FOUNDER, ALL HOME	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) KELLY FITZSIMMONS	(i)	306,087.	0.	690.	39,213.	13,074.	359,064.	0.
FNDR/MAN DIR - PROJ EVIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) TALIA MILGROM-ELCOTT	(i)	278,443.	0.	2,057.	33,442.	26,773.	340,715.	0.
EXEC DIR, STARFISH INSTITUTE	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) SUNEELA JAIN	(i)	0.	0.	0.	0.	0.	0.	0.
SECRETARY/CHIEF LEGAL & ETHICS OFFIC	(ii)	229,016.	12,915.	24,489.	29,971.	24,184.	320,575.	0.
(9) MICHAEL MOSBY	(i)	0.	0.	0.	0.	0.	0.	0.
INTERIM COO	(ii)	205,030.	0.	17,256.	24,818.	29,052.	276,156.	0.
(10) KRISS DEIGLMEIER	(i)	0.	0.	0.	0.	0.	0.	0.
ADVISOR TO THE CEO THROUGH 12/19	(ii)	0.	0.	272,592.	0.	0.	272,592.	0.
(11) JENNIFER MARIE LANDIG	(i)	0.	0.	0.	0.	0.	0.	0.
ASSISTANT SEC./CHIEF OF STAFF	(ii)	131,110.	5,000.	7,329.	14,099.	21,613.	179,151.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III** Supplemental Information

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

**PART I, LINE 3:**

THE ORGANIZATION'S CEO IS COMPENSATED BY TIDES NETWORK, A RELATED ORGANIZATION AND THE CEO'S LEGAL EMPLOYER. THROUGH A COST SHARING ARRANGEMENT, THE TIDES CENTER PAYS TIDES NETWORK AN ALLOCATED PORTION OF SUCH PERSONS' TOTAL COMPENSATION. TIDES NETWORK UTILIZES THE FOLLOWING METHODS TO ESTABLISH COMPENSATION FOR THE CEO: INDEPENDENT COMPENSATION CONSULTANT, COMPENSATION SURVEY OR STUDY, AND APPROVAL BY THE HUMAN CAPITAL COMMITTEE OF THE BOARD OF DIRECTORS

**PART I, LINE 4A:**

KRISS DEIGLMEIER RECEIVED A SEVERANCE PAYMENT OF \$216,161 IN THE 2020 CALENDAR YEAR.

**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

- ▶ **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](http://www.irs.gov/Form990) for instructions and the latest information.**

Name of the organization

**TIDES CENTER**

Employer identification number

**94-3213100**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art .....				
2 Art - Historical treasures .....				
3 Art - Fractional interests .....				
4 Books and publications .....				
5 Clothing and household goods .....				
6 Cars and other vehicles .....				
7 Boats and planes .....				
8 Intellectual property .....				
9 Securities - Publicly traded .....	<b>X</b>	<b>118</b>	<b>3,302,759.</b>	<b>FMV</b>
10 Securities - Closely held stock .....				
11 Securities - Partnership, LLC, or trust interests .....				
12 Securities - Miscellaneous .....				
13 Qualified conservation contribution - Historic structures .....				
14 Qualified conservation contribution - Other ...				
15 Real estate - Residential .....				
16 Real estate - Commercial .....				
17 Real estate - Other .....				
18 Collectibles .....				
19 Food inventory .....				
20 Drugs and medical supplies .....				
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....				
24 Archeological artifacts .....				
25 Other ▶ ( .....				
26 Other ▶ ( .....				
27 Other ▶ ( .....				
28 Other ▶ ( .....				

29 Number of Forms 8283 received by the organization during the tax year for contributions  
for which the organization completed Form 8283, Part V, Donee Acknowledgement .....

**29**

**0**

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it  
must hold for at least three years from the date of the initial contribution, and which isn't required to be used for  
exempt purposes for the entire holding period? .....

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? .....

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash  
contributions? .....

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,  
describe in Part II.

	Yes	No
30a		<b>X</b>
31	<b>X</b>	
32a		<b>X</b>
33		

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

Schedule M (Form 990) 2020

**Part II** **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS RECEIVED IN  
SCHEDULE M, PART I, COLUMN (B).

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

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 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

TIDES CENTER

Employer identification number

94-3213100

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SOCIETY'S TOUGHEST PROBLEMS.

FORM 990, PART VI, SECTION A, LINE 2:

AS BOARD MEMBERS OF TIDES NETWORK, MICHAEL FERNANDEZ, CHERYL D. ALSTON,  
EDWARD G. LLOYD, JACOB WELDON, MARC DIAZ, PETER MELLEN, AND SUZANNE NOSSELL  
HAVE AN EMPLOYMENT RELATIONSHIP WITH JENNIFER MARIE LANDIG, JUDITH HILL,  
SUNEELA JAIN, AND TUTI SCOTT, WHO WERE EMPLOYEES OF TIDES NETWORK DURING  
THE TAX YEAR.

FORM 990, PART VI, SECTION A, LINE 6:

TIDES CENTER HAS ONE SOLE MEMBER, TIDES NETWORK, A CALIFORNIA NONPROFIT  
PUBLIC BENEFIT CORPORATION.

FORM 990, PART VI, SECTION A, LINE 7A:

EACH OF THE DIRECTORS OF TIDES CENTER IS APPOINTED BY THE ORGANIZATION'S  
SOLE MEMBER, TIDES NETWORK.

FORM 990, PART VI, SECTION A, LINE 7B:

ACTION BY THE BOARD OF DIRECTORS OF THE TIDES CENTER ON THE FOLLOWING  
MATTERS IS EFFECTIVE ONLY WITH THE CONSENT OF THE BOARD OF DIRECTORS OF  
TIDES NETWORK, THE ORGANIZATION'S SOLE MEMBER: (I) ANY CHANGE IN THE  
FUNDAMENTAL NATURE OR STATED PURPOSES FOR WHICH TIDES CENTER IS ORGANIZED,  
(II) THE ADOPTION OF THE STRATEGIC PLANS FOR TIDES CENTER, (III) THE  
ADOPTION OF THE ANNUAL CAPITAL AND OPERATING BUDGETS FOR TIDES CENTER, (IV)  
MERGER, CONSOLIDATION, OR SIMILAR REORGANIZATION OF THE CORPORATE

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

Schedule O (Form 990 or 990-EZ) 2020

Name of the organization TIDES CENTER	Employer identification number 94-3213100
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STRUCTURE; (V) DISPOSITION OF ALL OR SUBSTANTIALLY ALL OF THE ASSETS OF TIDES CENTER; (VI) SELECTION OF THE AUDITORS OF TIDES CENTER; (VII) REMOVAL OF A DIRECTOR OF TIDES CENTER WITHOUT CAUSE; (VIII) AMENDMENT, REPEAL OR ADOPTION OF THE ARTICLES OF INCORPORATION OR BYLAWS, (IX) SELECTION OF A CHIEF EXECUTIVE OFFICER; (X) THE NUMBER OF AUTHORIZED DIRECTORS AND THE APPOINTMENT OF DIRECTORS; AND (XI) DISSOLUTION OF TIDES CENTER.

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

THE FORM 990 IS PREPARED BY AN INDEPENDENT TAX ACCOUNTANT IN CONJUNCTION WITH THE ORGANIZATION'S FINANCE AND ACCOUNTING DEPARTMENT. THE TREASURER/CFO AND LEGAL COUNSEL REVIEW A DRAFT OF THE FORM 990; ADJUSTMENTS ARE MADE AS NECESSARY. A COMPLETE COPY OF THE FORM 990 IS THEN PROVIDED TO THE MEMBERS OF THE BOARD OF DIRECTORS PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

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

ALL COVERED INDIVIDUALS, INCLUDING OFFICERS AND MEMBERS OF THE BOARD OF DIRECTORS, CENTER ADVISORY BOARDS, AND DESIGNATED STAFF ARE REQUIRED TO SUBMIT CONFLICT OF INTEREST DISCLOSURE STATEMENTS AT THE TIME A PERSON BECOMES A COVERED INDIVIDUAL AND ANNUALLY THEREAFTER. THE POLICY REQUIRES COVERED INDIVIDUALS TO PERIODICALLY UPDATE THE CONFLICT OF INTEREST STATEMENT AS MATERIAL FACTS CHANGE, AS WELL AS MAKE VERBAL AND/OR WRITTEN DISCLOSURES OF POTENTIAL CONFLICTS OF INTEREST AS THEY ARISE. AT ANY TIME THAT A POTENTIAL OR ACTUAL CONFLICT OF INTEREST IS IDENTIFIED, DISCLOSURE MUST BE MADE TO THE BOARD OF DIRECTORS, THE APPROPRIATE COMMITTEE, OR STAFF (DEPENDING ON THE NATURE OF THE POTENTIAL OR ACTUAL CONFLICT). PRIOR TO ACTING ON ANY MATTER WHERE A POTENTIAL OR ACTUAL CONFLICT IS IDENTIFIED WITH RESPECT TO AN OFFICER OR MEMBER OF THE BOARD, THE CONFLICT AND ALL

Name of the organization

TIDES CENTER

Employer identification number

94-3213100

MATERIAL FACTS RELATED TO IT MUST BE FULLY DISCLOSED BY THE COVERED INDIVIDUAL TO THE BOARD PRIOR TO CONSIDERATION OF THE PROPOSED MATTER. IF THE BOARD DETERMINES A CONFLICT OF INTERESTS EXISTS, THE COVERED INDIVIDUAL, IF REQUESTED TO DO SO BY THE CHAIR OF THE BOARD, MAY PROVIDE ADDITIONAL FACTUAL INFORMATION REGARDING THE AFFECTED TRANSACTION, BUT MAY NOT PARTICIPATE IN OR ATTEMPT TO INFLUENCE DELIBERATION AND VOTING. THE COVERED INDIVIDUAL MUST BE EXCUSED FROM THE MEETING PRIOR TO DELIBERATION, AND MAY NOT RETURN UNTIL DELIBERATION AND VOTING ON THE MATTER HAVE BEEN CONCLUDED. THE POLICY PROVIDES FOR SIMILAR PROCEDURES FOR ADVISORY COMMITTEES TO ADDRESS MATTERS THAT ARE DECIDED AT THE ADVISORY COMMITTEE LEVEL. IF QUESTIONS ARISE WITH RESPECT TO THE POLICY OR PROCEDURES FOR DISCLOSING A POTENTIAL OR ACTUAL CONFLICT, THE MATTER MAY BE REFERRED TO HUMAN RESOURCES OR THE LEGAL, COMPLIANCE AND RISK DEPARTMENT FOR REVIEW AND RESOLUTION CONSISTENT WITH THE POLICY.

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

THE CEO, OFFICERS, AND KEY EMPLOYEES OF THE ORGANIZATION ARE ALL COMPENSATED BY TIDES NETWORK, A RELATED ORGANIZATION AND SUCH PERSONS' LEGAL EMPLOYER. THROUGH A COST SHARING ARRANGEMENT, TIDES CENTER PAYS TIDES NETWORK AN ALLOCATED PORTION OF SUCH PERSONS' TOTAL COMPENSATION. THE TIDES NETWORK BOARD OF DIRECTORS IS RESPONSIBLE FOR REVIEWING ANY NEW, MODIFIED OR EXTENDED COMPENSATION PACKAGES OF THE CEO, CFO AND ANY OTHER OFFICERS IT DETERMINES APPROPRIATE, AND APPROVING COMPENSATION ONLY AFTER DETERMINING THAT THE COMPENSATION IS JUST AND REASONABLE. FOR THE CEO, THE TIDES NETWORK BOARD OF DIRECTOR'S HUMAN CAPITAL COMMITTEE REVIEWS PERFORMANCE AND COMPENSATION ANNUALLY, UTILIZING COMPENSATION STUDIES TO DETERMINE APPROPRIATE COMPENSATION. TIDES NETWORK ALSO UTILIZES COMPARABILITY STUDIES IN DETERMINING APPROPRIATE COMPENSATION FOR OTHER

Name of the organization

TIDES CENTER

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**OFFICERS AND KEY EMPLOYEES OF THE ORGANIZATION.**

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AR, CA, FL, GA, HI, IL, KS, KY, MA, MD, MI, MN, MS, NC, NH, NJ, NM, NY, OK, OR, PA, RI, SC, TN  
UT, VA, WI, WV

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND  
FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTING:

PROGRAM SERVICE EXPENSES 27,725,029.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 51,871.

TOTAL EXPENSES 27,776,900.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 27,776,900.

**SCHEDULE R**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization

**TIDES CENTER**

Employer identification number

**94-3213100**

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
TIDES, INC. - 57-1138099	DEVELOP/OPERATE FACILITIES						
P.O. BOX 29198	MGMT AND MULTI-TENANT						
SAN FRANCISCO, CA 94129	NONPROFIT CENTERS	CALIFORNIA	501(C)(3)	10	TIDES NETWORK	X	
TIDES TWO RIVERS FUND - 20-1588459	DEVELOP/OPERATE FACILITIES						
P.O. BOX 29198	MGMT AND MULTI-TENANT						
SAN FRANCISCO, CA 94129	NONPROFIT CENTERS	CALIFORNIA	501(C)(3)	12A, I	TIDES NETWORK	X	
TIDES FOUNDATION - 51-0198509							
P.O. BOX 29903							
SAN FRANCISCO, CA 94129	GRANTMAKING	CALIFORNIA	501(C)(3)	7	TIDES NETWORK	X	
TIDES NETWORK - 20-3395198							
P.O. BOX 29198	CHARITABLE GOVERNANCE AND						
SAN FRANCISCO, CA 94129	OPERATIONS	CALIFORNIA	501(C)(3)	12B, II	N/A		X

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

Schedule R (Form 990) 2020

<b>Part II</b>	<b>Continuation of Identification of Related Tax-Exempt Organizations</b>
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[illegible]

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

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

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

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

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....	<b>1a</b>	X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	<b>1b</b>	X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	<b>1c</b>	X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....	<b>1d</b>	X
<b>e</b> Loans or loan guarantees by related organization(s) .....	<b>1e</b>	X
<b>f</b> Dividends from related organization(s) .....	<b>1f</b>	X
<b>g</b> Sale of assets to related organization(s) .....	<b>1g</b>	X
<b>h</b> Purchase of assets from related organization(s) .....	<b>1h</b>	X
<b>i</b> Exchange of assets with related organization(s) .....	<b>1i</b>	X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....	<b>1j</b>	X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....	<b>1k</b>	X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	<b>1l</b>	X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....	<b>1m</b>	X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	<b>1n</b>	X
<b>o</b> Sharing of paid employees with related organization(s) .....	<b>1o</b>	X
<b>p</b> Reimbursement paid to related organization(s) for expenses .....	<b>1p</b>	X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....	<b>1q</b>	X
<b>r</b> Other transfer of cash or property to related organization(s) .....	<b>1r</b>	X
<b>s</b> Other transfer of cash or property from related organization(s) .....	<b>1s</b>	X
<b>2</b> If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.		

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

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

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

[illegible]

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