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ARMANINO LLP

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Form **990-PF**

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

Department of the Treasury Internal Revenue Service

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

| For (| calen | dar year 2020 or tax year beginning | | , and ending | | | |
|------------------------|----------|--|------------------------------|---------------------|---------|--|--|
| Nar | ne of | foundation | | | | A Employer identification | number |
| CZ | ALIF | ORNIA PHYSICIANS' SERVICE FDN | | | | | |
| DI | BA E | SLUE SHIELD OF CALIFORNIA FDN | | | | 94-2822302 | _ |
| | | nd street (or P.O. box number if mail is not delivered to street a | ddress) | Roon | n/suite | B Telephone number | |
| 31 | L5 M | ONTGOMERY STREET, SUITE 1200 | | | | (415) 229-6080 | |
| - | | own, state or province, country, and ZIP or foreign p | ostal code | | | C If exemption application is p | ending, check here |
| | | TRANCISCO, CA 94104 | | | | | |
| G | heck | all that apply: Initial return | Initial return of a fo | rmer public charity | y | D 1. Foreign organizations | s, check here |
| | | Final return | Amended return | | | Foreign organizations me check here and attach co | eeting the 85% test, |
| ш с | hook | type of organization: X Section 501(c)(3) ex | Name change | | | 1 | |
| | _ | | Other taxable private founda | tion | | E If private foundation sta under section 507(b)(1) | |
| L Fa | | | ng method: Cash | X Accrual | | 1 | |
| | | · I — | ther (specify) | /Accidal | | F If the foundation is in a under section 507(b)(1) | |
| • | \$ | 102,893,620. (Part I, colur | | s.) | | | ((b), oncor nore > |
| Pa | rt I | Analysis of Revenue and Expenses | (a) Revenue and | (b) Net investn | nent | (c) Adjusted net | (d) Disbursements |
| | | (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) | expenses per books | income | | income | for charitable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received | 40,000,124. | | | N/A | |
| | 2 | Check if the foundation is not required to attach Sch. B | | | | | |
| | 3 | Interest on savings and temporary cash investments | | | | | |
| | 4 | Dividends and interest from securities | 1,293,861. | 1,293 | ,861. | | STATEMENT 2 |
| | 5a | Gross rents | | | | | |
| | | Net rental income or (loss) | 0.700.701 | | | | G T T T T T T T T T T T T T T T T T T T |
| <u> </u> | 6a | Net gain or (loss) from sale of assets not on line 10 | 9,782,781. | | | | STATEMENT 1 |
| Revenue | D | Gross sales price for all assets on line 6a | | 40.064 | 667 | | |
| Rev | 7 | Capital gain net income (from Part IV, line 2) | | 40,064 | ,007. | | |
| | 8 | Net short-term capital gain | | | | | |
| | 10a | Income modifications Gross sales less returns and allowances | | | | | |
| | | Less: Cost of goods sold | | | | | |
| | | Gross profit or (loss) | | | | | |
| | 11 | Other income | | | | | |
| | 12 | Total. Add lines 1 through 11 | 51,076,766. | 41,358 | ,528. | | |
| | 13 | Compensation of officers, directors, trustees, etc. | 72,500. | | 0. | | 72,500. |
| | 14 | Other employee salaries and wages | | | | | |
| | | Pension plans, employee benefits | | | | | |
| ses | 16a | Legal fees | | | | | |
| pen | b | Accounting fees STMT 3 | 45,250. | | 0. | | 45,250. |
| Ä | C | Other professional fees STMT 4 | 3,200,926. | 9 | ,475. | | 3,191,451. |
| Administrative Expenso | 17 | Interest STMT 5 | 442,892. | | 0. | | 0. |
| stra | 18 19 | Taxes STMT 5 Depreciation and depletion | 442,032. | | · · | | 0. |
| inis | 20 | Occupancy | | | | | |
| β | 21 | Travel, conferences, and meetings | 30,565. | | 0. | | 30,565. |
| and / | 22 | Printing and publications | , | | | | , |
| | | Other expenses STMT 6 | 586,038. | | 0. | | 954,806. |
| perating | 24 | Total operating and administrative | | | | | |
| pera | | expenses. Add lines 13 through 23 | 4,378,171. | 9 | ,475. | | 4,294,572. |
| ō | | Contributions, gifts, grants paid | 34,975,573. | | | | 41,119,268. |
| | 26 | Total expenses and disbursements. | | | | | |
| | | Add lines 24 and 25 | 39,353,744. | 9 | ,475. | | 45,413,840. |
| | 27 | Subtract line 26 from line 12: | | | | | |
| | l | Excess of revenue over expenses and disbursements | 11,723,022. | 44 242 | 0.53 | | |
| | | Net investment income (if negative, enter -0-) | | 41,349 | ,053. | N/A | |
| | r | AUTHOR OF THEOREM (It negative enter -0-) | | | | I II/ 🗗 | |

023501 12-02-20 LHA For Paperwork Reduction Act Notice, see instructions.

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| | art | Balance Sheets Attached schedules and amounts in the description | Beginning of year | End of | f year | |
|----------------|-------|--|-------------------|----------------|--|--|
| | aιι | column should be for end-of-year amounts only. | (a) Book Value | (b) Book Value | (c) Fair Market Value | |
| | 1 | Cash - non-interest-bearing | 519,338. | 249,391. | 249,391. | |
| | 2 | Savings and temporary cash investments | 72,382,515. | 15,766,602. | 15,766,602. | |
| | | Accounts receivable ▶ | | | | |
| | | Less: allowance for doubtful accounts | | | | |
| | 4 | Pledges receivable ► | | | | |
| | | Less; allowance for doubtful accounts | | | | |
| | 5 | Grants receivable | | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | | |
| | | disqualified persons | | | | |
| | 7 | Other notes and loans receivable | | | | |
| | | Less: allowance for doubtful accounts | | | | |
| Ŋ | 8 | Inventories for sale or use | | | | |
| ssets | 9 | Prepaid expenses and deferred charges | 45,075. | 112,659. | 112,659. | |
| As | | Investments - U.S. and state government obligations | | | | |
| | b | Investments - corporate stock STMT 9 | 17,153,924. | 20,653,230. | 20,653,230. | |
| | | Investments - corporate bonds | | | | |
| | | Investments - land, buildings, and equipment: basis | | | | |
| | | Less: accumulated depreciation | | | | |
| | 12 | Investments - mortgage loans | | | | |
| | 13 | Investments - other STMT 10 | 13,088,013. | 66,060,858. | 66,060,858. | |
| | 14 | Land, buildings, and equipment: basis | | | | |
| | | Less: accumulated depreciation | | | | |
| | 15 | Other assets (describe ACCRUED INVESTMENT INCOME) | 110,097. | 50,880. | 50,880. | |
| | 16 | Total assets (to be completed by all filers - see the | | | | |
| | | instructions. Also, see page 1, item I) | 103,298,962. | 102,893,620. | 102,893,620. | |
| | 17 | Accounts payable and accrued expenses | 805,951. | 504,767. | | |
| | 18 | Grants payable | 19,143,018. | 12,999,323. | | |
| S | 19 | Deferred revenue | | | | |
| abilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | |
| jab | 21 | Mortgages and other notes payable | | | | |
| | 22 | Other liabilities (describe EXCISE TAX PAYABLE) | 178,559. | 47,808. | | |
| | | 7 | 20 127 520 | 12 551 000 | | |
| _ | 23 | Total liabilities (add lines 17 through 22) | 20,127,528. | 13,551,898. | | |
| | | Foundations that follow FASB ASC 958, check here | | | | |
| es | | and complete lines 24, 25, 29, and 30. | 83,171,434. | 89,341,722. | | |
| and | 24 | Net assets without donor restrictions | 03,171,434. | 09,341,722. | | |
| Bal | 25 | Net assets with donor restrictions | | | | |
| or Fund Balanc | | Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. | | | | |
| Ę | 26 | Capital stock, trust principal, or current funds | | | | |
| | 27 | Paid-in or capital surplus, or land, bldg., and equipment fund | | | | |
| set | 28 | Retained earnings, accumulated income, endowment, or other funds | | | | |
| Net Assets | 29 | Total net assets or fund balances | 83,171,434. | 89,341,722. | | |
| Se | | | | | | |
| | 30 | Total liabilities and net assets/fund balances | 103,298,962. | 102,893,620. | | |
| Б | art | Analysis of Changes in Net Assets or Fund Bal | ances | | | |
| | ar t | | | , , | | |
| 1 | | net assets or fund balances at beginning of year - Part II, column (a), line 2 $$ | 9 | | | |
| | | | | | 83,171,434. | |
| | | amount from Part I, line 27a | | | 11,723,022. | |
| | | rincreases not included in line 2 (itemize) | SEE STATEM | | 6,006,796. | |
| | | ines 1, 2, and 3 | 4 | 100,901,252. | | |
| | | | | | | |
| 6 | rotal | net assets or fund balances at end of year (line 4 minus line 5) - Part II, col | umm (b), ime 29 | 6 | 89,341,722. Form 990-PF (2020) | |
| | | | | | 101111 000 • • (2020) | |

| \ \ ' ' ' ' ' ' ' ' ' ' ' ' ' ' | BLUE SHIELD OF CALIFORNI AND LOSSES FOR TAX ON IN | | | | 94-28223 | 02 Page 3 |
|--|--|---|-------------------------------------|-----------------------------------|--|-------------------------|
| (a) List and describe | the kind(s) of property sold (for exa rehouse; or common stock, 200 shs | (b) H | ow acquired Purchase Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) | |
| PUBLICLY TRADED SECUR | ITIES | · | 1 - | Donation | 12/31/20 | 12/31/20 |
| PUBLICLY TRADED SECUR | ITIES | | | | 12/16/20 | 12/16/20 |
|) | | | | | | |
| | | | | | | |
|) | | | <u> </u> | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | | (h) Gain or (loss) ((e) plus (f) minus (| |
| 38,876,240. | | 29,080,4 | 80. | | | 9,795,760. |
| 39,987,145. | | 9,718,2 | 38. | | | 30,268,907. |
|) | | | | | | |
| 1 | | | | | | |
|) | | | | | | |
| Complete only for assets showin | g gain in column (h) and owned by | | | | (I) Gains (Col. (h) gain | |
| (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any | | CI | ol. (k), but not less than Losses (from col. (l | 1-U-) or 1))) |
| l | | | | | | 9,795,760. |
|) | | | | | | 30,268,907. |
|) | | | | | | |
| l | | | | | | |
|) | | | | | | |
| 0 11 1 1 1 | pital loss) { If gain, also ente If (loss), enter -0 | r in Part I, line 7 |) | | | 40 064 667 |
| Capital gain net income or (net ca | pital loss) | I- in Part I, line 7 | | 2 | | 40,064,667. |
| | es) as defined in sections 1222(5) ar | | ٦ | | | |
| If gain, also enter in Part I, line 8, Part I, line 8 | column (c). See instructions. If (los | s), enter -0- ın | | 2 | N/A | |
| Part V Qualification U | nder Section 4940(e) for | Reduced Tax on Net | Inves | stment Inc | | |
| | ON 4940(e) REPEALED C | | | | | |
| Reserved | | · | | | | |
| (a) Reserved | (b) Reserved | | (c) Reserve | ed | Re | (d) served |
| Reserved | | | | | | |
| Reserved | | | | | | |
| Reserved | | | | | | |
| Reserved | | | | | | |
| Reserved | | | | | | |
| Deserved | · | • | | | 2 | |
| 110301700 | | | | | | |
| Reserved | | | | | . 3 | |
| Reserved | | | | | . 4 | |
| Reserved | | | | | . 5 | |
| | | | | | 6 | |
| | | | | | | |

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8 Reserved

| Form | 990-PF (2020) DBA BLUE SHIELD OF CALIFORNIA FDN | | | | | 2822302 | | | Page 4 |
|------|--|-------------|------------------------------------|-----------|-------|----------|----|----------|-------------|
| Pa | t VI Excise Tax Based on Investment Income (Section 4940 | (a), 49 | 40(b), or 4948 | - see | instı | ructions | s) | | |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and el | nter "N/A" | on line 1. |) | | | | | |
| | Date of ruling or determination letter: (attach copy of letter if nec | | | | | | | | |
| | Reserved | | | , | 1 | | | 574, | 752. |
| | All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations, enter | | | | | | | | |
| | of Part I, line 12, col. (b) | | | | | | | | |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; oth | | | , | 2 | | | | 0. |
| | Add lines 1 and 2 | | | | 3 | | | 574, | 752. |
| | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; of | | | | 4 | | | | 0. |
| | Tax based on investment income . Subtract line 4 from line 3. If zero or less, enter -0- | | | | 5 | | | 574, | 752. |
| | Credits/Payments; | | | | | | | <u> </u> | |
| | 2020 estimated tax payments and 2019 overpayment credited to 2020 | 6a | 576 | ,614. | | | | | |
| | Exempt foreign organizations - tax withheld at source | - | | 0. | | | | | |
| | Tax paid with application for extension of time to file (Form 8868) | | | 0. | | | | | |
| | Backup withholding erroneously withheld | | | 0. | | | | | |
| | | | | | 7 | | | 576 | 614. |
| 0 | Total credits and payments. Add lines 6a through 6d | ohod | | | | | | | 684. |
| | | | | | 9 | | | Δ, | |
| | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | | | | | | 178. |
| | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. | | | | 10 | | | | 0. |
| | Enter the amount of line 10 to be: Credited to 2021 estimated tax † VII-A Statements Regarding Activities | | 178. Refund | ea 💌 | 11 | | | | ٠. |
| | | | at at the constant of the constant | | • | | | Yes | No |
| | During the tax year, did the foundation attempt to influence any national, state, or local legis | | | | | | | 163 | X |
| | any political campaign? | | | | | | 1a | | |
| | Did it spend more than \$100 during the year (either directly or indirectly) for political purpos | | | ne detini | tion | | 1b | | Х |
| | If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of | of any ma | terials published or | | | | | | |
| | distributed by the foundation in connection with the activities. | | | | | | | | |
| | Did the foundation file Form 1120-POL for this year? | | | | | | 1c | | Х |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the | | | | | | | | |
| | (1) On the foundation. ► \$0. (2) On foundation managers | | | 0. | | | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expendi | ture tax ir | nposed on foundatio | n | | | | | |
| | managers. ► \$0. | | | | | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IF | RS? | | | | | 2 | | Х |
| | If "Yes," attach a detailed description of the activities. | | | | | | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing in | nstrumen | t, articles of incorpor | ation, or | | | | | |
| | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes $$ | | | | | | 3 | Х | |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year | | | | | | 4a | | Х |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | | | | N | 'A | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | | | L | 5 | | Х |
| | If "Yes," attach the statement required by General Instruction T. | | | | | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit | ther: | | | | | | | |
| | By language in the governing instrument, or | | | | | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory | / directio | ns that conflict with t | he state | law | | | | |
| | remain in the governing instrument? | | | | | | 6 | Х | |
| | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp | | | | | | 7 | Х | |
| | | | | | | | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructio | ns. 🕨 | | | | | | | |
| | CA | _ | | | | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Ai | ttorney G | eneral (or designate) | | | — I | | | |
| | of each state as required by General Instruction G? If "No," attach explanation | - | , - , | | | | 8b | Х | |
| | Is the foundation claiming status as a private operating foundation within the meaning of sec | | | | | | | | |
| | year 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If "Yes," com | | ., . , , | | | | 9 | | х |
| | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu | | | | | | 10 | | х |

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Schedule C, to determine if the foundation had excess business holdings in 2020.) 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

had not been removed from jeopardy before the first day of the tax year beginning in 2020?

| Part VII-B Statements Regarding Activities for Which Fe | orm 4720 May Be R | equired (contin | ued) | | |
|--|---|-----------------------------------|--|------------------|---------------------|
| 5a During the year, did the foundation pay or incur any amount to: | | | | Yes | s No |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | 4945(e))? | Ye | es X No | | |
| (2) Influence the outcome of any specific public election (see section 4955); or | to carry on, directly or indire | | | | |
| any voter registration drive? | | | es X No | | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes? | ? | Ye | es X No | | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | | | | | |
| 4945(d)(4)(A)? See instructions | | | es L No | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | | | | | |
| the prevention of cruelty to children or animals? | | | es X No | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und | | | | | |
| section 53.4945 or in a current notice regarding disaster assistance? See instru | | | | 5b | X |
| Organizations relying on a current notice regarding disaster assistance, check h | | | ▶□ | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the contract of the contr | | | l | | |
| expenditure responsibility for the grant? | STATEMENT 12 | 🚣 Ye | es 💹 No 📗 | | |
| If "Yes," attach the statement required by Regulations section 53.4945-5(d). | | | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to p | | | 🔻 ม. | | |
| a personal benefit contract? | | | | e b | x |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a polif "Yes" to 6b, file Form 8870. | ersonal benefit contract? | | | 6b | +^ |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax sl | haltar transaction? | | No X No | | |
| b If "Yes," did the foundation receive any proceeds or have any net income attributed that since the control of the foundation is a promotive to a promotive tax since the control of the | | | | 7b | |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$ | | | | 70 | |
| excess parachute payment(s) during the year? | | | s X No | | |
| Part VIII Information About Officers, Directors, Truste | es, Foundation Mar | nagers, Highly | | | |
| Paid Employees, and Contractors | · | | | | |
| 1 List all officers, directors, trustees, and foundation managers and th | eir compensation. | | | | |
| (a) Name and address | (b) Title, and average hours per week devoted | (c) Compensation (If not paid, | (d) Contributions to employee benefit plans and deferred | (e) Ex | kpense nt, other |
| (a) Warrie and address | to position | enter -0-) | compensation | allow | ances |
| | | | | | |
| | | | | | |
| SEE STATEMENT 11 | | 72,500. | 0. | • | 223. |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 2 Compensation of five highest-paid employees (other than those incl | uded on line 1). If none, | enter "NONE." | | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week | (a) Comparation | (d) Contributions to employee benefit plans | (e) Ex | kpense nt, other |
| (a) Name and address of each employee paid more than \$50,000 | devoted to position | (c) Compensation | and deferred compensation | l accoun | ances |
| NONE | | | | | |
| | | | | | |
| | | | | | |
| | | | | 1 | |
| | | | | | |
| | | | | 1 | |
| | | | | | |
| | | | | 1 | |
| | | | | | |
| | | <u> </u> | | 1 | |
| Total number of other employees paid over \$50,000 | | | | ₁ 990-P I | 0 |
| | | | Forn | 1 220-121 | (2020) |

DBA BLUE SHIELD OF CALIFORNIA FDN

Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation CENTER FOR COLLABORATIVE PLANNING CONSULTING SERVICES FOR 1401 21ST ST., STE. 360, SACRAMENTO, CA 95811 FACILIATATING AND COORDINATING 310,000. THE REIS GROUP, LLC - 1300 19TH STREET NW CONSULTING SERVICES FOR SUITE 600, WASHINGTON, DC 20036 COMMUNICATION NEEDS 297,000. THE ATLANTIC MONTHLY GROUP LLC - 600 NEW CONSULTING SERVICES TO SUPPORT HAMPSHIRE AVENUE NORTHWEST, WASHINGTON, DC COMMUNICATION TEAM 282,016. STRATEGIC PREVENTION SOLUTIONS CONSULTING SERVICE FOR PO BOX 22406, JUNEAU, AK 99802 EVALUATION, TECHNICAL SUPPORT 265,607. THE BRIDGESPAN GROUP, INC. CONSULTING SERVICE FOR 2 COPLEY PLACE, SUITE 3700B, BOSTON, MA 02116 STRATEGIC REFINEMENT 264,000. Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the **Expenses** number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. SEE STATEMENT 13 1,443,381. SEE STATEMENT 14 0. SEE STATEMENT 15 SEE STATEMENT 16 0. Part IX-B | Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount All other program-related investments. See instructions.

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Total. Add lines 1 through 3

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| P | Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations | ndations, | see instructions.) |
|----|---|--------------|--------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| а | Average monthly fair market value of securities | 1a | 58,687,915. |
| | Average of monthly cash balances | 1b | 20,082,638. |
| | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 78,770,553. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 78,770,553. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 1,181,558. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 77,588,995. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 3,879,450. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here ▶ ☐ and do not complete this part.) | nd certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 3,879,450. |
| 2a | Tax on investment income for 2020 from Part VI, line 5 2a 574,752. | | |
| b | Income tax for 2020. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | 2c | 574,752. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 3,304,698. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 3,304,698. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 3,304,698. |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 45,413,840. |
| | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| | Suitability test (prior IRS approval required) | 3a | |
| | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 | 4 | 45,413,840. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | • |
| _ | income. Enter 1% of Part I, line 27b | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 45,413,840. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of | qualifies fo | or the section |

Form **990-PF** (2020)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2019 | (c) 2019 | (d) 2020 |
|---|---------------|------------------------------------|-------------|---------------------------|
| 1 Distributable amount for 2020 from Part XI, | Corpus | Tears prior to 2019 | 2013 | 2020 |
| line 7 | | | | 3,304,698. |
| 2 Undistributed income, if any, as of the end of 2020: | | | | |
| a Enter amount for 2019 only | | | 0. | |
| b Total for prior years: | | | | |
| | | 0. | | |
| 3 Excess distributions carryover, if any, to 2020: | | | | |
| a From 2015 34,986,522. | | | | |
| b From 2016 34,370,719. | | | | |
| c From 2017 29,526,449. | | | | |
| d From 2018 18,439,413. | | | | |
| e From 2019 28,366,145. | 145,689,248. | | | |
| f Total of lines 3a through e | 145,009,240. | | | |
| 4 Qualifying distributions for 2020 from | | | | |
| Part XII, line 4: ► \$ 45,413,840. | | | 0. | |
| a Applied to 2019, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Flastian required and instructions) | 0. | | | |
| 14 11 11 0000 11 11 11 11 | · · | | | 3,304,698. |
| a Applied to 2020 distributable amount e Remaining amount distributed out of corpus | 42,109,142. | | | 2,222,224 |
| 5 Excess distributions carryover applied to 2020 | | | | |
| (If an amount appears in column (d), the same amount must be shown in column (a).) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 187,798,390. | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which | | | | |
| the section 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2019. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr | | | 0. | |
| f Undistributed income for 2020. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2021 | | | | 0. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2015 | <u> </u> | | | |
| not applied on line 5 or line 7 | 34,986,522. | | | |
| 9 Excess distributions carryover to 2021. | , , | | | |
| Subtract lines 7 and 8 from line 6a | 152,811,868. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2016 34,370,719. | | | | |
| b Excess from 2017 29,526,449. | | | | |
| c Excess from 2018 18,439,413. | | | | |
| d Excess from 2019 28,366,145. | | | | |
| e Excess from 2020 42,109,142. | | | | 226 == |
| | | | | Earm 990-PF (2020) |

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Form **990-PF** (2020)

| | m 990-PF (20 | | HELD OF CALIFORN | | | 94-282 | 2302 Page 10 |
|-----|-----------------------|---|---|----------------------------|----------------------------|--------------------------------|--------------------|
| Pa | art XIV | Private Operating Fo | oundations (see ins | structions and Part VI | I-A, question 9) | N/A | |
| 1 : | a If the found | dation has received a ruling or | determination letter that | it is a private operating | | | |
| | foundation | , and the ruling is effective for | 2020, enter the date of t | he ruling | ▶ ∟ | | |
| ı | b Check box | to indicate whether the found | ation is a private operatin | g foundation described | in section | 4942(j)(3) or 49 | 42(j)(5) |
| 2 | a Enter the le | esser of the adjusted net | Tax year | | Prior 3 years | | |
| | income fro | m Part I or the minimum | (a) 2020 | (b) 2019 | (c) 2018 | (d) 2017 | (e) Total |
| | investment | return from Part X for | | | | | |
| | each year l | isted | | | | | |
| | | e 2a | | | | | |
| | | distributions from Part XII, | | | | | |
| | line 4, for e | each year listed | | | | | |
| | | ncluded in line 2c not | | | | | |
| | used direct | tly for active conduct of | | | | | |
| | | ivities | | | | | |
| | | distributions made directly | | | | | |
| | | onduct of exempt activities. | | | | | |
| | | ne 2d from line 2c | | | | | |
| 3 | Complete 3 | Ba, b, or c for the | | | | | |
| | | test relied upon: | | | | | |
| | | ernative test - enter: of all assets | | | | | |
| | | | | | | | |
| | | of assets qualifying section 4942(j)(3)(B)(i) | | | | | |
| | | nt" alternative test - enter | | | | | |
| | 2/3 of mini | mum investment return | | | | | |
| | | art X, line 6, for each year | | | | | |
| | | lternative test - enter: | | | | | |
| , | | | | | | | |
| | | support other than gross ment income (interest, | | | | | |
| | | nds, rents, payments on | | | | | |
| | securi | ties loans (section | | | | | |
| | , , | (5)), or royalties) | | | | | |
| | (2) Suppo | ort from general public or more exempt | | | | | |
| | organi | zations as provided in | | | | | |
| | sectio | n 4942(j)(3)(B)(iii) | | | | | |
| | . , | st amount of support from | | | | | |
| | an exe | mpt organization | | | | | |
| _ | (4) Gross | investment income | | | | | |
| Pa | | Supplementary Infor | | | if the foundation | n had \$5,000 or mor | e in assets |
| | | at any time during th | ie year-see instri | uctions.) | | | |
| 1 | | on Regarding Foundation | • | | | | |
| | | anagers of the foundation who | | | ributions received by th | ne foundation before the clos | e of any tax |
| | year (but o | nly if they have contributed m | ore man \$5,000). (See so | ection 507(a)(2).) | | | |
| NOI | 1E | | | | | | |
| - 1 | | anagers of the foundation who | | | (or an equally large por | tion of the ownership of a pa | rtnership or |
| | otner entity | /) of which the foundation has | a 10% or greater interes | τ. | | | |
| NOI | VE. | | | | | | |
| 2 | Informati | on Regarding Contribution | | • • • • | _ | | |
| | Check here | | | | | s not accept unsolicited reque | ests for funds. If |
| | the founda | tion makes gifts, grants, etc., | to individuals or organiza | tions under other condit | ions, complete items 2 | a, b, c, and d. | |
| | a The name, | address, and telephone numb | er or email address of th | e person to whom applic | cations should be addre | essed: | |
| | | | | | | | |
| SE | E STATEM | ENT 17 | | | | | |
| | b The form in | n which applications should be | e submitted and informat | ion and materials they s | hould include: | | |
| | | | | | | | |
| - | Any submi | ssion deadlines: | | | | | |
| | | | | | | | |
| | d Any restric | tions or limitations on awards | , such as by geographica | l areas, charitable fields | , kinds of institutions. o | r other factors: | |
| | | | . , , , , , , , , , , , , , , , , , , , | , | | - | |

Form **990-PF** (2020)

Form 990-PF (2020) DBA BLUE SHIELD OF Part XV | Supplementary Information DBA BLUE SHIELD OF CALIFORNIA FDN

| Part XV Supplementary Information | (continued) | | | |
|--|---|---------------------|--|-------------|
| 3 Grants and Contributions Paid During the Yo | ear or Approved for Future | Payment | | |
| Recipient | If recipient is an individual, show any relationship to | Foundation | Purpose of grant or | |
| Name and address (home or business) | any foundation manager or substantial contributor | status of recipient | contribution ** | Amount |
| a Paid during the year | | | | |
| ACADEMY HEALTH | NONE | PC | SUPPORTING STATES | |
| 1666 K STREET, NW SUITE 1100 | | | COVID-19 RESPONSE: THE | |
| WASHINGTON, DC 20006 | | | NEED FOR RAPID | |
| | | | LEARNING AND | |
| | | | EVALUATION | 30,000. |
| | | | | |
| ACCESS CALIFORNIA SERVICES | NONE | PC | GENERAL OPERATING | |
| 631 S. BROOKHURST STREET SUITE 107 | | | SUPPORT | |
| ANAHEIM, CA 92804 | | | | 200,000. |
| ALLIANCE FOR COMMUNITY | NONE | PC | LEVERAGING | |
| TRANSFORMATIONS | | | COLLABORATION TO END | |
| P.O. BOX 2075 | | | DOMESTIC VIOLENCE: | |
| MARIPOSA, CA 95338 | | | SUSTAINABILITY AND | |
| | | | STRATEGIC PLANNING IN | 90,925. |
| ALLIANCE FOR GIRLS | NONE | PC | ADVOCATING FOR | |
| 1203 PRESERVATION PARK WAY, STE. #200 | | | POLICIES AND PRACTICES | |
| OAKLAND, CA 94612 | | | THAT IMPROVE SAFETY | |
| , | | | AND POSITIVE GENDER | |
| | | | NORMS | 325,000. |
| ALLIANCE FOR GIRLS | NONE | PC | ASSESSING THE IMPACT | |
| 1203 PRESERVATION PARK WAY, STE. #200 | | | OF COVID-19 ON | |
| OAKLAND, CA 94612 | | | VIOLENCE AGAINST GIRLS | |
| , | | | AND CREATING A RAPID | |
| | | | RESPONSE NETWORK TO | 153,000. |
| | NUATION SHEET(S) | | ▶ 3a | 41,119,268. |
| b Approved for future payment | | | | |
| NDN COLLECTIVE, INC. | NONE | ₽C | SUPPORTING CALIFORNIA | |
| 317 MAIN STREET #1 | | | INDIGENOUS COMMUNITIES | |
| RAPID CITY, SD 57701 | | | TO ADDRESS THE IMPACTS | |
| | | | OF COVID-19 THROUGH | |
| | | | SYSTEMS CHANGE | 300,000. |
| DOCUMENT OF THE PARTY AND THE PARTY OF THE P | MONE | DC. | CDANIMAVED C FOR CIPIC | |
| ROCKEFELLER PHILANTHROPY ADVISORS, INC. | NONE | PC | GRANTMAKERS FOR GIRLS OF COLOR - LOVE IS | |
| 6 WEST 48TH STREET 10TH FLOOR | | | HEALING COVID-19 FUND | |
| NEW YORK, NY 10036 | | | HEMEING COVID 13 TOND | 200,000. |
| | | | | |
| | | | | |
| TIDES CENTER | NONE | PC | CALIFORNIA HEALTH | |
| P.O. BOX 29907 | | | REPORT | 40.000 |
| SAN FRANCISCO, CA 94129 | IIIAMION GUEEM/G\ | | <u> </u> | 40,000. |
| Total SEE CONTIN | NUATION SHEET(S) | | 3b | 8,031,821. |

94 - 2822302

| Part XVI-A | Analysis of Income-Producing Activities |
|------------|---|
|------------|---|

| Enter gross amounts unless otherwise indicated. | Unrelate | d business income | | ded by section 512, 513, or 514 | (e) |
|---|-----------------|----------------------|-----------------------|---------------------------------|-----------------------------------|
| • | (a) Business | (b) Amount | (C) Exclu- sion | (d) Amount | Related or exempt function income |
| 1 Program service revenue: | code | 7 inount | code | Aillouit | Tunction income |
| a | \vdash | | | | |
| b | \vdash | | + | | |
| <u> </u> | | | + | | |
| d | \vdash | | | | |
| e | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | | | |
| 4 Dividends and interest from securities | | | 14 | 1,293,861. | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | 18 | 9,782,781. | |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | | | | | |
| a | | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| e | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | 0 | • | 11,076,642. | |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 11,076,642. |
| (See worksheet in line 13 instructions to verify calculations.) | | | | | |

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

| Line No. ▼ | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). |
|---------------|---|
| | |
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Form **990-PF** (2020)

| Form 99 | 0-PF (2 | 2020) DBA BLUI | E SHIELD OF CA | LIFORNIA | FDN | | 94- | 2822302 | Pa | ige 13 |
|---------------|----------|--------------------------------|----------------------------|---------------------------|--|--------------------|--------------------------------|----------------------|-----------|---------------|
| Part | | Information Re | | sfers to a | nd Transactions ar | nd Relations | hips With None | charitable | | |
| | | Exempt Organ | izations | | | | | | | |
| 1 Di | d the or | rganization directly or indi | rectly engage in any | of the followin | g with any other organization | on described in se | ection 501(c) | | Yes | No |
| (01 | ther tha | an section 501(c)(3) organ | nizations) or in sectio | n 527, relating | to political organizations? | | | | | |
| a Tra | ansfers | from the reporting founda | ation to a noncharital | ole exempt org | janization of: | | | | | |
| (1) | Cash | | | | | | | 1a(1) | | Х |
| | | | | | | | | | | Х |
| | | nsactions: | | | | | | | | |
| (1) | Sales | s of assets to a noncharita | ble exempt organizat | ion | | | | 1b(1) | | Х |
| | | | | | | | | | | Х |
| | | | | | | | | | | Х |
| | | | | | | | | | | Х |
| | | | | | | | | | | Х |
| | | ormance of services or me | | | | | | 141.60 | | Х |
| c Sh | aring o | of facilities, equipment, ma | iling lists, other asse | ts, or paid em | ployees | | | 1c | | Х |
| d If t | he ans | wer to any of the above is | "Yes," complete the f | ollowing sche | dule. Column (b) should alv | ways show the fai | r market value of the | goods, other ass | ets, | |
| or | service | es given by the reporting fo | oundation. If the four | ndation receive | ed less than fair market valu | e in any transacti | on or sharing arrange | ment, show in | | |
| CO | lumn (| d) the value of the goods, | | | | | | | | |
| (a) Line r | 10. | (b) Amount involved | (c) Name of | noncharitable | exempt organization | (d) Descript | tion of transfers, transaction | ns, and sharing arra | angemer | its |
| | | | | N/A | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| 2a Is | the fou | ndation directly or indirec | tly affiliated with, or i | related to, one | or more tax-exempt organi | zations described | | | _ | _ |
| in | section | 1 501(c) (other than sectio | n 501(c)(3)) or in se | ction 527 ? | | | | Yes | X | □No |
| b lf ' | Yes," c | omplete the following sch | | | | 1 | | | | |
| | | (a) Name of org | ganization | | (b) Type of organization | | (c) Description of r | elationship | | |
| | | N/A | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | 11 | annulling of positions I deal. | that I have average at 0.1 | make manager of the self- | | | hank of marries and all and | | | |
| Sian- | | | | | accompanying schedules and st taxpayer) is based on all information | | | May the IRS or | discuss t | his er |
| Sign Here | | | | | 1 | g== | | shown below | ? See ins | str. |
| 11616 | | noture of officer and two-tree | | | Date | CEO | | _ | | No |
| | Sigi | nature of officer or trustee | | Dropararia a | Date | Title L Data | Check if | DTIN | | |
| | | Print/Type preparer's na | anie | Preparer's si | ynature | Date | Check if | PTIN | | |

Form **990-PF** (2020)

P00650274

94-6214841

Phone no. 925-790-2600

Paid

Preparer

Use Only

KATY BROWN

KATY BROWN

Firm's name ARMANINO LLP

Firm's address ▶ 12657 ALCOSTA BLVD, STE. 500

SAN RAMON, CA 94583-4600

08/06/21

750,000.

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient ALLIANCE FOR GIRLS NONE PC SAFE AND THRIVING 1203 PRESERVATION PARK WAY, STE. #200 GIRLS AND COMMUNITIES OAKLAND, CA 94612 358,000. ALLIANCE FOR JUSTICE NONE PC. INCREASE CALIFORNIA 11 DUPONT CIRCLE NW. SUITE 500 NONPROFITS ADVOCACY WASHINGTON, DC 20036 KNOWLEDGE AND CAPACITY 125,000. ASIAN AMERICAN PACIFIC ISLANDERS IN NONE PC. DIVERSITY AMONG PHILANTHROPY PHILANTHROPIC 300 FRANK H OGAWA PLAZA STE 256 PROFESSIONALS (DAPP) OAKLAND, CA 94612 SURVEY 50,000. ASIAN PACIFIC FUND NONE PC RAPID RESPONSE FUNDING 465 CALIFORNIA STREET, SUITE 809 ADDRESSING THE SAN FRANCISCO, CA 94104 COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND 100,000. FUTURES WITHOUT VIOLENCE NONE PC. ALL IN FOR KIDS 100 MONTGOMERY STREET, THE PRESIDIO INITIATIVE

SAN FRANCISCO, CA 94129-1718

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor ADVANCING PREVENTION CALIFORNIA STATE UNIVERSITY FRESNO FOUNDATION POLICY INNOVATION AND 2763 E. SHAW STE. 101 ADOPTION: THE SAN FRESNO, CA 93710 JOAQUIN VALLEY PUBLIC HEALTH CONSORTIUM 300,000. CENTER FOR YOUNG WOMEN'S DEVELOPMENT NONE PC. BUILDING THE EVIDENCE 832 FOLSOM STREET, SUITE 700 FOR LEADERSHIP SAN FRANCISCO, CA 94107 DEVELOPMENT OF EXPLOITED GIRLS. WOMEN, AND GENDER 150,000. HUMAN IMPACT PARTNERS NONE ÞС PUBLIC HEALTH 304 12TH STREET, SUITE 2B REIMAGINING SAFETY OAKLAND, CA 94607 200,000. JENESSE CENTER, INC. NONE PC. LEADERSHIP COUNCIL FOR P.O. BOX 8476 DOMESTIC VIOLENCE AND LOS ANGELES, CA 90008 HEALTH CARE OF LOS ANGELES 272,000. KOREAN RESOURCE CENTER NONE PC. GENERAL OPERATING 900 CRENSHAW BLVD, UNIT B SUPPORT LOS ANGELES, CA 90019 200,000. NATIONAL ACADEMY OF SCIENCES NONE PC. ROUNDTABLE ON OBESITY THE NATIONAL ACADEMIES, 500 FIFTH SOLUTIONS STREET, NW WASHINGTON, DC 20001 30,000. NORTHERN CALIFORNIA GRANTMAKERS NONE ÞС GENERAL OPERATING 160 SPEAR STREET, SUITE 360 SUPPORT SAN FRANCISCO, CA 94105 100,000. ORGANIZACION EN CALIFORNIA DE LIDERES NONE PC. GENERAL OPERATING CAMPESINAS, INC. SUPPORT 319 LAMBERT ST OXNARD, CA 93036 200,000. WOMEN'S FOUNDATION OF CALIFORNIA NONE РC CREATING A 300 FRANK OGAWA PLAZA, SUITE 290 COLLABORATIVE FUND TO OAKLAND, CA 94612 ADVANCE GENDER JUSTICE IN CALIFORNIA 670,000. WOMEN'S FOUNDATION OF CALIFORNIA NONE PC ADVANCING GENDER 300 FRANK OGAWA PLAZA, SUITE 290 JUSTICE IN CALIFORNIA OAKLAND, CA 94612 329,000.

Total from continuation sheets

| Part XV Supplementary Information | 1 | | | |
|--|---|------------------------|------------------------|----------|
| 3 Grants and Contributions Paid During the Y | ear (Continuation) | | | |
| Recipient | If recipient is an individual, show any relationship to | Foundation | Purpose of grant or | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | status of recipient | contribution | Amount |
| CALIFORNIA CHILD CARE RESOURCE & | NONE | PC | PARENT-LED | |
| REFERRAL NETWORK | | | MULTIGENERATIONAL | |
| 1182 MARKET STREET, SUITE 300 | | | VIOLENCE PREVENTION | |
| SAN FRANCISCO, CA 94102 | | | POLICY AGENDA | 410,000. |
| CALIFORNIA STATE UNIVERSITY FRESNO | NONE | PC | RAPID RESPONSE FUNDING | |
| FOUNDATION | | | TO IMPROVE | |
| 2763 E. SHAW STE. 101 | | | COMMUNICATIONS THAT | |
| FRESNO, CA 93710 | | | ADDRESS THE COVID-19 | |
| | | | PUBLIC HEALTH CRISIS | 80,000. |
| | | | | |
| FUTURES WITHOUT VIOLENCE | NONE | ₽C | GENERAL OPERATING | |
| 100 MONTGOMERY STREET, THE PRESIDIO | | | SUPPORT | |
| SAN FRANCISCO, CA 94129-1718 | | | | 400,000. |
| HORIZONS FOUNDATION | NONE | PC | RAPID RESPONSE FUNDING | |
| 550 MONTGOMERY STREET, SUITE 700 | | | ADDRESSING THE | |
| SAN FRANCISCO, CA 94111 | | | COVID-19 PUBLIC HEALTH | |
| | | | CRISIS IN SUPPORT OF | |
| | | | HEALTHY FAMILIES AND | 100,000. |
| HUMBOLDT AREA FOUNDATION | NONE | PC | RAPID RESPONSE FUNDING | |
| 363 INDIANOLA ROAD | | | ADDRESSING THE | |
| BAYSIDE, CA 95524 | | | COVID-19 PUBLIC HEALTH | |
| | | | CRISIS IN SUPPORT OF | |
| | | | HEALTHY FAMILIES AND | 150,000. |
| | | | | |
| INSTITUTE FOR THE FUTURE | NONE | PC | CALIFORNIA COMMISSION | |
| 201 HAMILTON AVENUE | | | ON THE FUTURE OF WORK | |
| PALO ALTO, CA 94301 | | 1 | + | 300,000. |
| NATIONAL COMMITTEE FOR RESPONSIVE | NONE | PC | GENERAL OPERATING | |
| PHILANTHROPY | NONE | | SUPPORT | |
| 1900 L STREET NW SUITE 825 | | | | |
| WASHINGTON, DC 20036 | | | | 50,000. |
| | | | | |
| NATIONAL DOMESTIC WORKERS ALLIANCE | NONE | PC | ADVANCING UNIVERSAL | |
| 45 BROADWAY STE 320 | | | FAMILY CARE IN | |
| NEW YORK, NY 10006 | | <u> </u> | CALIFORNIA | 500,000. |
| | | | | |
| ORANGE COUNTY ASIAN AND PACIFIC | NONE | ₽C | GENERAL OPERATING | |
| ISLANDER COMMUNITY ALLIANCE, INC. | | | SUPPORT | |
| 12912 BROOKHURST STREET, SUITE 410 | | | | |
| GARDEN GROVE, CA 92840 | | 1 | | 200,000. |
| THE CENTER FOR CULTURAL POWER | NONE | ₽C | RAPID RESPONSE FUNDING | |
| 1330 BROADWAY, SUITE 300 | | | ADDRESSING THE | |
| OAKLAND, CA 94612 | | | COVID-19 PUBLIC HEALTH | |
| | | | CRISIS IN SUPPORT OF | 405 000 |
| | | 1 | HEALTHY FAMILIES AND | 125,000. |
| Total from continuation sheets | | | | |

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient THE HENRY J. KAISER FAMILY FOUNDATION NONE PC KAISER HEALTH NEWS 185 BERRY STREET SUITE 2000 CALIFORNIA BUREAU SAN FRANCISCO, CA 94107 350,000. UC HASTINGS FOUNDATION NONE PC. GENERAL OPERATING 200 MCALLISTER STREET SUPPORT SAN FRANCISCO, CA 94102 200,000. WEAVE, INC. NONE ÞС SHIFTING THE CULTURE 1900 K STREET OF DOMESTIC VIOLENCE SACRAMENTO, CA 95811 RESIDENTIAL SERVICES TO A STRENGTHS MODEL TO IMPROVE PROTECTIVE 150,000. WOMEN'S FOUNDATION OF CALIFORNIA NONE PC RAPID RESPONSE FUNDING 300 FRANK OGAWA PLAZA, SUITE 290 ADDRESSING THE OAKLAND, CA 94612 COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND 1,450,000. CALIFORNIA COALITION AGAINST SEXUAL NONE ÞС GENERAL OPERATING SUPPORT ASSAULT 1215 K STREET #1850 SACRAMENTO, CA 95814-3956 400,000. CALMATTERS NONE PC. CAL MATTERS HEALTH AND 1303 J STREET, SUITE 250 CALIFORNIA DIVIDE SACRAMENTO, CA 95814 COVERAGE 200,000. CENTRAL AMERICAN RESOURCE CENTER NONE PC. GENERAL OPERATING (CARECEN) SUPPORT 2845 W 7TH ST LOS ANGELES, CA 90005-3907 200,000. CENTRO BINACIONAL PARA EL DESARROLLO NONE PC. GENERAL OPERATING INDIGENA OAXAQUEO SUPPORT 744 N ABBY STREET FRESNO, CA 93701 100,000. CHILDRENS INSTITUTE, INC. NONE PC. ASSESSING EARLY 2121 WEST TEMPLE STREET CHILDHOOD AND FAMILY LOS ANGELES, CALIFORNIA 90026, CA PROTECTIVE FACTORS 90026 THROUGH A MODEL OF ENHANCED HEAD 150,000. EAST BAY COMMUNITY FOUNDATION NONE РC RAPID RESPONSE FUNDING 200 FRANK H. OGAWA PLAZA ADDRESSING THE OAKLAND, CA 94612 COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF

Total from continuation sheets

HEALTHY FAMILIES AND

100,000.

| Part XV Supplementary Information | | | | |
|---|---|-------------------------|----------------------------------|-------------|
| 3 Grants and Contributions Paid During the Ye | ear (Continuation) | | | |
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | Contribution | 7 illioditi |
| | | | | |
| EAST BAY COMMUNITY FOUNDATION | NONE | PC | COMMUNITY OF PRACTICE | |
| 200 FRANK H. OGAWA PLAZA | | | FOR COMMUNITY | |
| OAKLAND, CA 94612 | | | FOUNDATIONS | 250,000. |
| | | | | |
| FARMWORKER INSTITUTE OF EDUCATION AND | NONE | PC | GENERAL OPERATING | |
| LEADERSHIP DEVELOPMENT | | | SUPPORT | |
| 122 E. TEHACHAPI BLVD. SUITE C | | | | 200 000 |
| TEHACHAPI, CA 93561 | | | | 200,000. |
| | | | | |
| GOFUNDME.ORG | NONE | PC | THE FRONTLINE | |
| 3756 W AVE 40, STE K, BOX #507 | | | COUNSELING PROJECT | |
| LOS ANGELES, CA 90065 | | | | 30,000. |
| | | | | |
| GRANTMAKERS CONCERNED WITH IMMIGRANTS | NONE | PC | EVALUATING | |
| AND REFUGEES | | | PHILANTHROPIC SUPPORT | |
| PO BOX 2178 | | | FOR A COMPLETE 2020 | |
| PETALUMA, CA 94953 | <u></u> | | CENSUS IN CALIFORNIA | 42,000. |
| IMPACT JUSTICE | NONE | PC | EXPLORING ALTERNATIVES | |
| 2930 LAKESHORE AVENUE, SUITE 300 | | | TO THE CRIMINAL | |
| OAKLAND, CA 94610 | | | JUSTICE SYSTEM BY | |
| | | | ADVANCING RESTORATIVE | 160 500 |
| | | | JUSTICE PRACTICE AND | 162,500. |
| LATINO CENTER FOR PREVENTION AND | NONE | PC | GENERAL OPERATING | |
| ACTION IN HEALTH AND WELFARE | | | SUPPORT | |
| 450 W. 4TH STREET, SUITE 130 | | | | |
| SANTA ANA, CA 92701 | | | | 200,000. |
| LATINO COMMUNITY FOUNDATION | NONE | PC | RAPID RESPONSE FUNDING | |
| 235 MONTGOMERY STREET, SUITE 1160 | | | ADDRESSING THE | |
| SAN FRANCISCO, CA 94104 | | | COVID-19 PUBLIC HEALTH | |
| | | | CRISIS IN SUPPORT OF | |
| | | | HEALTHY FAMILIES AND | 100,000. |
| MUJERES UNIDAS Y ACTIVAS | NONE | PC | RAPID RESPONSE FUNDING | |
| 3543 18TH ST, #23 | | | ADDRESSING THE | |
| SAN FRANCISCO, CA 94110-1684 | | | COVID-19 PUBLIC HEALTH | |
| | | | CRISIS IN SUPPORT OF | |
| | | | HEALTHY FAMILIES AND | 500,000. |
| | | | | |
| PARTNERSHIP FOR AMERICAS CHILDREN | NONE | PC | COUNTING YOUNG | |
| 1101 14TH STREET NW SUITE 600 | | | CHILDREN IN CALIFORNIA | |
| WASHINGTON, DC 20005 | | | IN THE 2020 CENSUS | 150,000. |
| PLANNED PARENTHOOD MAR MONTE, INC. | NONE | PC | IMPROVING | |
| 1691 THE ALAMEDA | | | TWO-GENERATION PROGRAM | |
| SAN JOSE, CA 95126 | | | PRACTICES AND OUTCOMES | |
| | | | THROUGH PARTICIPATORY | |
| | | | ACTION RESEARCH WITH | 137,500. |
| Total from continuation sheets | | | | |

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor RAPID RESPONSE FUNDING SAN DIEGO FOUNDATION 2508 HISTORIC DECATUR ROAD, SUITE 200 ADDRESSING THE SAN DIEGO, CA 92106 COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND 250,000. SCHOLARSHIP AMERICA, INC. NONE PC. SCHOLARSHIP AMERICA ONE SCHOLARSHIP WAY PROGRAM GRANT 2020 SAINT PETER, MN 56082 51,000. SIERRA HEALTH FOUNDATION CENTER FOR NONE ÞС RAPID RESPONSE FUNDING HEALTH PROGRAM MANAGEMENT ADDRESSING THE 1321 GARDEN HWY COVID-19 PUBLIC HEALTH SACRAMENTO, CA 95833-9754 CRISIS IN SUPPORT OF HEALTHY FAMILIES AND 300,000. SOUTHERN CALIFORNIA PUBLIC RADIO MEDIA COVERAGE OF NONE PC. 474 S. RAYMOND AVENUE HOMELESSNESS AND PASADENA, CA 91105 DOMESTIC VIOLENCE IN LOS ANGELES 50,000. TAHIRIH JUSTICE CENTER NONE PC. GENERAL OPERATING 881 SNEATH LANE STE 115 SUPPORT SAN BRUNO, CA 94065 200,000. THE HENRY J. KAISER FAMILY FOUNDATION PC DOCUMENTING THE IMPACT OF PUBLIC CHARGE ON 185 BERRY STREET SUITE 2000 SAN FRANCISCO, CA 94107 ASIAN IMMIGRANT COMMUNITIES 75,000. WORKING PARTNERSHIPS USA NONE ÞС ADVANCING PAID LEAVE 2102 ALMADEN ROAD, SUITE 112 POLICIES IN THE BAY SAN JOSE, CA 95125 AREA 200,000. INSTITUTE FOR THE FUTURE NONE PC RAPID RESPONSE FUNDING 201 HAMILTON AVENUE ADDRESSING THE PALO ALTO, CA 94301 COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND 125,000. IMMIGRANT LEGAL RESOURCE CENTER NONE ÞС ACT NOW 1458 HOWARD STREET SAN FRANCISCO, CA 94103 200,000. NATIONAL IMMIGRATION LAW CENTER NONE PC GENERAL OPERATING 3450 WILSHIRE BLVD., #108 - 62 SUPPORT LOS ANGELES, CA 90010 500,000. Total from continuation sheets

| Part XV Supplementary Information | 1 | | | |
|--|---|----------------------|----------------------------------|----------|
| 3 Grants and Contributions Paid During the Y | ear (Continuation) | | | |
| Recipient ———————————————————————————————————— | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | Contribution | |
| | | | | |
| SOMALI FAMILY SERVICE OF SAN DIEGO | NONE | PC | GENERAL OPERATING | |
| 5348 UNIVERSITY AVENUE | | | SUPPORT | |
| SAN DIEGO, CA 92105 | | | | 200,000. |
| | | | | |
| UNITED WAYS OF CALIFORNIA | NONE | PC | ADVANCING ECONOMIC | |
| 1107 FAIR OAKS AVE NBR 12 | | | SECURITY FOR FAMILIES | |
| SOUTH PASADENA, CA 91030-3311 | | | THROUGH POLICY | |
| , | | | ADVOCACY AND EDUCATION | 175,000. |
| CHILDREN NOW | NONE | PC | EXPANDING HOME | |
| 1404 FRANKLIN STREET, SUITE 700 | | | VISITING AND ENHANCING | |
| OAKLAND, CA 94612 | | | PAID FAMILY LEAVE AND | |
| | | | EARNED INCOME TAX | |
| | | | CREDIT IN CALIFORNIA | 350,000. |
| | | | | |
| HISPANICS IN PHILANTHROPY | NONE | PC | SUPPORT FOR A NETWORK | |
| 55 2ND STREET, SUITE 1500 | | | AND RESOURCE | |
| SAN FRANCISCO, CA 94105 | | | ENGAGEMENT SENIOR | |
| | | | MANAGER | 50,000. |
| SAFE & SOUND | NONE | PC | IMPROVING PROTECTIVE | |
| 1757 WALLER STREET | | | FACTORS FOR AT-RISK | |
| SAN FRANCISCO, CA 94117 | | | FAMILIES THROUGH THE | |
| | | | INTEGRATED CHILDREN | |
| | | | AND FAMILY SERVICES | 150,000. |
| | | | | |
| SOUTHERN CALIFORNIA GRANTMAKERS | NONE | PC | THE CALIFORNIA GENDER | |
| 1000 NORTH ALAMEDA STREET, SUITE 230 | | | JUSTICE FUNDERS | |
| LOS ANGELES, CA 90012 | | | NETWORK | 50,000. |
| SOUTHERN CALIFORNIA GRANTMAKERS | NONE | PC | REDISTRICTING FOR FAIR | |
| 1000 NORTH ALAMEDA STREET, SUITE 230 | | | REPRESENTATION TO | |
| LOS ANGELES, CA 90012 | | | SUPPORT HEALTHY | |
| | | | COMMUNITIES ACROSS | |
| | | | CALIFORNIA | 500,000. |
| | | | | |
| IMMIGRANT LEGAL RESOURCE CENTER | NONE | PC | GENERAL OPERATING | |
| 1458 HOWARD STREET | | | SUPPORT | |
| SAN FRANCISCO, CA 94103 | | | | 200,000. |
| SACRAMENTO REGION COMMUNITY | NONE | PC | RAPID RESPONSE FUNDING | , |
| FOUNDATION | | | ADDRESSING THE | |
| 955 UNIVERSITY AVE SUITE #A | | | COVID-19 PUBLIC HEALTH | |
| SACRAMENTO, CA 95825 | | | CRISIS IN SUPPORT OF | |
| | | | HEALTHY FAMILIES AND | 100,000. |
| CALIFORNIA GULLO GIOGO DECOVOCE - | NOVE | | THOTHING PROVIDED 155 | |
| CALIFORNIA CHILD CARE RESOURCE & | NONE | PC | TESTING PROVIDER-LED | |
| REFERRAL NETWORK | | | SHARED SERVICES MODELS | |
| 1182 MARKET STREET, SUITE 300 | | | IN FAMILY CHILD CARE | 226 000 |
| SAN FRANCISCO, CA 94102 | | 1 | | 336,800. |
| Total from continuation sheets | | | | |

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient CALIFORNIA COMMUNITY FOUNDATION NONE BOLD VISION LA: 221 SOUTH FIGUEROA STREET SUITE 400 ADVANCING POLICIES AND LOS ANGELES, CA 90012 STRATEGIES TO TRANSFORM SYSTEMS THAT IMPACT YOUTH 250,000. CALIFORNIA COMMUNITY FOUNDATION RAPID RESPONSE FUNDING NONE PC. 221 SOUTH FIGUEROA STREET SUITE 400 ADDRESSING THE LOS ANGELES, CA 90012 COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND 500,000. COMMUNITY PARTNERS ÞС CLOSING THE WOMEN'S NONE 1000 N. ALAMEDA STREET; SUITE 240 WEALTH GAP LOS ANGELES, CA 90012-1804 150,000. COMMUNITY PARTNERS NONE EVALUATION AND ÞС 1000 N. ALAMEDA STREET; SUITE 240 ANALYSIS OF AN LOS ANGELES, CA 90012-1804 INNOVATIVE RESTORATIVE JUSTICE PILOT PROGRAM TO ADDRESS DOMESTIC 220,000. LEGAL AID AT WORK NONE PC. GENERAL OPERATING 180 MONTGOMERY STREET, SUITE 600 SUPPORT SAN FRANCISCO, CA 94104 200,000. POLTCYLINK NONE PC. HEALING TOGETHER 1438 WEBSTER ST STE 303 CAMPAIGN OAKLAND, CA 94612-3228 525,000. POLICYLINK NONE ÞС ALLIANCE FOR BOYS AND 1438 WEBSTER ST STE 303 MEN OF COLOR OAKLAND, CA 94612-3228 600,000. PREVENTION INSTITUTE NONE PC PROMOTING STATE POLICY 221 OAK STREET FOR PREVENTION AND OAKLAND, CA 94607 HEALTH EQUITY 300,000. PUBLIC HEALTH INSTITUTE NONE ÞС ADVANCING HEALTHY 555 12TH STREET, 10TH FLOOR HOUSING POLICIES AND OAKLAND, CA 94607-4046 SYSTEMS CHANGE 550,000. PUBLIC HEALTH INSTITUTE NONE SUPPORTING THE PC. 555 12TH STREET, 10TH FLOOR CALIFORNIA COVID-19 OAKLAND, CA 94607-4046 PUBLIC HEALTH CAPACITY BUILDING COLLABORATIVE 1,000,000. Total from continuation sheets

| 3 Grants and Contributions Paid During t | he Year (Continuation) | _ | | |
|--|--|----------------------|----------------------------------|----------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| PUBLIC HEALTH INSTITUTE | NONE | ₽C | LEVERAGING | |
| 555 12TH STREET, 10TH FLOOR | | | COLLABORATION TO END | |
| OAKLAND, CA 94607-4046 | | | DOMESTIC VIOLENCE: | |
| | | | SUSTAINABILITY AND | |
| | | | STRATEGIC PLANNING IN | 75,000. |
| PUBLIC HEALTH INSTITUTE | NONE | PC | RAPID RESPONSE FUNDING | |
| 555 12TH STREET, 10TH FLOOR | | | TO IMPROVE | |
| OAKLAND, CA 94607-4046 | | | COMMUNICATIONS THAT | |
| | | | ADDRESS THE COVID-19 | |
| | | | PUBLIC HEALTH CRISIS | 80,000. |
| PUBLIC HEALTH INSTITUTE | NONE | PC | RAPID RESPONSE FUNDING | |
| 555 12TH STREET, 10TH FLOOR | | | TO IMPROVE | |
| OAKLAND, CA 94607-4046 | | | COMMUNICATIONS THAT | |
| | | | ADDRESS THE COVID-19 | |
| | | | PUBLIC HEALTH CRISIS | 80,000. |
| PUBLIC HEALTH INSTITUTE | NONE | PC | LEVERAGING COMMUNITY | |
| 555 12TH STREET, 10TH FLOOR | | | DEVELOPMENT AND | |
| OAKLAND, CA 94607-4046 | | | HEALTHCARE | |
| | | | PARTNERSHIPS FOR | |
| | | | SUSTAINABLE | 601,118. |
| PUBLIC HEALTH INSTITUTE | NONE | ₽C | ADVANCING PREVENTION | |
| 555 12TH STREET, 10TH FLOOR | | | POLICY INNOVATION AND | |
| OAKLAND, CA 94607-4046 | | | ADOPTION: THE PUBLIC | |
| | | | HEALTH ALLIANCE OF | |
| | | | SOUTHERN CALIFORNIA | 400,000. |
| PUBLIC HEALTH INSTITUTE | NONE | ₽C | ADVANCING PREVENTION | |
| 555 12TH STREET, 10TH FLOOR | | | POLICY INNOVATION AND | |
| OAKLAND, CA 94607-4046 | | | ADOPTION THROUGH | |
| | | | COMMUNICATIONS: | |
| | | | BERKELEY MEDIA STUDIES | 200,000. |
| REGENTS OF THE UNIVERSITY OF | NONE | ₽C | GENERATING NEW | |
| CALIFORNIA AT SAN DIEGO | | | POPULATION DATA ON | |
| 9500 GILMAN, MC0615 | | | DOMESTIC VIOLENCE AND | |
| SAN DIEGO, CA 92093 | | | MULTIPLE FORMS OF | |
| | | | VIOLENCE IN CALIFORNIA | 175,000. |
| SACRAMENTO REGION COMMUNITY | NONE | ₽C | SEEDING | |
| FOUNDATION | | | SOLUTIONS-FOCUSED | |
| 955 UNIVERSITY AVE SUITE #A | | | DOMESTIC VIOLENCE | |
| SACRAMENTO, CA 95825 | | | MEDIA COVERAGE IN THE | |
| | | | SAN JOAQUIN VALLEY | 100,000. |
| THE UCLA FOUNDATION | NONE | PC | RESEARCH TO INFORM | |
| PO BOX 7145 | | | SYSTEMS CHANGE | |
| PASADENA, CA 91109-9903 | | | OPPORTUNITIES IN LOS | |
| | | | ANGELES COUNTYS | |
| | | | DOMESTIC VIOLENCE AND | 150,000. |
| TIDES CENTER | NONE | PC | POLICY-FOCUSED MEDIA | , |
| P.O. BOX 29907 | | | COVERAGE OF RACIAL | |
| SAN FRANCISCO, CA 94129 | | | EQUITY AND DOMESTIC | |
| · | | | VIOLENCE IN CALIFORNIA | |
| | | | HEALTH REPORT | 104,871. |
| Total from continuation sheets | L | | 1 | , |

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient TIDES CENTER NONE PC GENERAL OPERATING P.O. BOX 29907 SUPPORT SAN FRANCISCO, CA 94129 75,000. TIDES CENTER NONE PC. RAPID RESPONSE FUNDING P.O. BOX 29907 TO IMPROVE COMMUNICATIONS THAT SAN FRANCISCO, CA 94129 ADDRESS THE COVID-19 PUBLIC HEALTH CRISIS 80,000. TIDES CENTER NONE ÞС INVESTING IN P.O. BOX 29907 TWO-GENERATION SAN FRANCISCO, CA 94129 PREVENTION STRATEGIES THAT ADDRESS THE ROOT CAUSES OF HEALTH AND 400,000. TIDES CENTER NONE РC CALIFORNIA HEALTH P.O. BOX 29907 REPORT SAN FRANCISCO, CA 94129 60,000. TIDES CENTER NONE ADVANCING PREVENTION ÞС P.O. BOX 29907 POLICY INNOVATION AND SAN FRANCISCO, CA 94129 ADOPTION: THE BAY AREA HEALTH INEQUITIES INITIATIVE 300,000. CALIFORNIA BUDGET & POLICY CENTER NONE PC. GENERAL OPERATING 1107 9TH STREET, SUITE 310 SUPPORT SACRAMENTO, CA 95814 150,000. SOCIAL GOOD FUND NONE PC. EVALUATING A 12651 SAN PABLO AVE, UNIT 5473 CULTURALLY RESPONSIVE PARENTING MODEL FOR RICHMOND, CA 94805 BLACK FAMILIES 66,000. TODEC LEGAL CENTER PERRIS NONE PC GENERAL OPERATING SUPPORT PO BOX 1733 PERRIS, CA 92570 200,000. WILLAMETTE PARTNERSHIP NONE ÞС SHIFT HEALTH 4640 SW MACADAM AVE. SUITE 50 ACCELERATOR PORTLAND, OR 97239 250,000. HUMAN IMPACT PARTNERS NONE PC CONNECTING ECONOMIC 304 12TH STREET, SUITE 2B SECURITY AND HEALTH OAKLAND, CA 94607 THROUGH RESEARCH AND ADVOCACY 250,000.

Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient RAPID RESPONSE HEALTH CALMATTERS NONE 1303 J STREET, SUITE 250 EOUITY MEDIA FUNDING SACRAMENTO, CA 95814 ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF 180,000. NONE HEALTHY BLACK FAMILIES PC. GENERAL OPERATING 3356 ADELINE STREET SUPPORT BERKELEY, CA 94703 75,000. INLAND EMPIRE COMMUNITY FOUNDATION RAPID RESPONSE FUNDING NONE ÞС 3700 SIXTH STREET, SUITE 200 ADDRESSING THE RIVERSIDE, CA 92501 COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND 100,000. MOVEMENT STRATEGY CENTER NONE PC BUILDING CAPACITY FOR 436 14TH STREET, 5TH FLOOR COLLABORATION TO OAKLAND, CA 94612 ADDRESS ROOT CAUSES OF COMMUNITY AND WORKER HEALTH 150,000. NEW VENTURE FUND NONE PC. HOPE AND HEAL FUND 1201 CONNECTICUT AVENUE NW, SUITE 300 WASHINGTON, DC 20036 200,000. VENTURA COUNTY COMMUNITY FOUNDATION RAPID RESPONSE FUNDING NONE PC. 4001 MISSION OAKS BLVD., STE A ADDRESSING THE CAMARILLO, CA 93012 COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND 100,000. VISION Y COMPROMISO NONE PROVIDING PREVENTION 2536 EDWARDS AVENUE EDUCATION AND EL CERRITO, CA 94530-1471 RESOURCES FOR IMMIGRANT FAMILIES TO PREVENT DOMESTIC AND 100,000. BLACK EMOTIONAL AND MENTAL HEALTH NONE PC ADDRESSING ROOT CAUSES COLLECTIVE OF VIOLENCE OF 1400 N. EDGEMONT 303 VIOLENCE AGAINST WOMEN LOS ANGELES, CA 90027 IN AFRICAN AMERICAN COMMUNITIES IN LOS 100,000. BRANDEIS UNIVERSITY NONE ÞС THE 27TH PRINCETON 415 SOUTH STREET, MS 035 CONFERENCE WALTHAM, MA 02453 50,000. FAITH IN THE VALLEY NONE PC GENERAL OPERATING 2027 E HARDING WAY SUPPORT STOCKTON, CA 95205 100,000. Total from continuation sheets

| 3 Grants and Contributions Paid During the | ear (Continuation) | | | |
|--|--|-------------------------|----------------------------------|----------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | oona ibaaton | |
| GRANTMAKERS FOR EFFECTIVE | NONE | PC | GENERAL OPERATING | |
| ORGANIZATIONS | | | SUPPORT | |
| 1310 L STREET NW SUITE 650 | | | | |
| WASHINGTON, DC 20005 | | | | 75,000. |
| The Lord Control of the Lo | | | | , |
| | Lava and a second | | anner orenama | |
| GRANTMAKERS IN HEALTH | NONE | PC | GENERAL OPERATING | |
| 1100 CONNECTICUT AVENUE, NW, SUITE | | | SUPPORT | 75 000 |
| 1200 WASHINGTON, DC 20036 | | | | 75,000. |
| | | | | |
| MUJERES UNIDAS Y ACTIVAS | NONE | PC | CALIFORNIA DOMESTIC | |
| 3543 18TH ST, #23 | | | WORKER COALITION | |
| SAN FRANCISCO, CA 94110-1684 | | | | 350,000. |
| MUJERES UNIDAS Y ACTIVAS | NONE | PC | BUILDING EVIDENCE FOR | |
| 3543 18TH ST, #23 | | | LATINA LEADERSHIP | |
| SAN FRANCISCO, CA 94110-1684 | | | DEVELOPMENT TO BREAK | |
| | | | THE CYCLE OF VIOLENCE | |
| | | | IN SAN FRANCISCO AND | 178,638. |
| SILICON VALLEY COMMUNITY FOUNDATION | NONE | PC | RAPID RESPONSE FUNDING | |
| 2440 WEST EL CAMINO REAL SUITE 300 | | | ADDRESSING THE | |
| MOUNTAIN VIEW, CA 94040-1498 | | | COVID-19 PUBLIC HEALTH | |
| | | | CRISIS IN SUPPORT OF | |
| | | | HEALTHY FAMILIES AND | 250,000. |
| SOCIAL GOOD FUND | NONE | PC | ENDING | |
| 12651 SAN PABLO AVE, UNIT 5473 | | | INTERGENERATIONAL | |
| RICHMOND, CA 94805 | | | CYCLES OF VIOLENCE FOR | |
| | | | BLACK FAMILIES | 122,500. |
| VISION Y COMPROMISO | NONE | PC | ENHANCING | |
| 2536 EDWARDS AVENUE | | | TWO-GENERATION | |
| EL CERRITO, CA 94530-1471 | | | APPROACHES THAT | |
| | | | PREVENT VIOLENCE | |
| | | | THROUGH THE FAMILY, | 150,000. |
| ASIAN PACIFIC POLICY AND PLANNING | NONE | PC | IMPLEMENTATION AND | |
| COUNCIL | | | EVALUATION OF A PILOT | |
| 905 EAST 8TH STREET | | | PROJECT TO PREVENT | |
| LOS ANGELES, CA 90021 | | | MULTIGENERATIONAL | |
| | | | DOMESTIC VIOLENCE IN | 600,000. |
| CALIFORNIA FORWARD | NONE | PC | PROMOTING ECONOMIC | |
| 127 UNIVERSITY AVE | | | MOBILITY AND SECURITY | |
| BERKELEY, CA 94710 | | | THROUGH METRICS AND | |
| · | | | POLICY | 425,000. |
| | | | | |
| CALIFORNIA IMMIGRANT POLICY CENTER | NONE | PC | GENERAL OPERATING | |
| 634 S. SPRING STREET, SUITE 600A | | | SUPPORT | |
| LOS ANGELES, CA 90014 | | <u> </u> | | 250,000. |
| Total from continuation sheets | | | | |

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient CHANGELAB SOLUTIONS NONE PC CREATION OF COVID-19 POLICY PLAYBOOK TO 2201 BROADWAY STE 502 OAKLAND, CA 94612 ADVANCE HEALTH EQUITY 150,000. EL SOL NEIGHBORHOOD EDUCATIONAL NONE ЬC GENERAL OPERATING SUPPORT CENTER 766 N. WATERMAN AVE SAN BERNARDINO, CA 92410 200,000. FREEFROM ÞС FREEFROM LEADERSHIP NONE 12405 VENICE BLVD #422 DEVELOPMENT LOS ANGELES, CA 90066 10,000. FREEFROM NONE PC INTERGENERATIONAL 12405 VENICE BLVD #422 APPROACH TO PREVENT LOS ANGELES, CA 90066 DOMESTIC VIOLENCE BY BUILDING FINANCIAL SECURITY 150,000. GRANTMAKERS CONCERNED WITH IMMIGRANTS RAPID RESPONSE FUNDING NONE PC. AND REFUGEES ADDRESSING THE PO BOX 2178 COVID-19 PUBLIC HEALTH PETALUMA, CA 94953 CRISIS IN SUPPORT OF HEALTHY FAMILIES AND 1,000,000. NATIONAL ACADEMY OF SCIENCES NONE PC. ROUNDTABLE ON OBESITY THE NATIONAL ACADEMIES, 500 FIFTH SOLUTIONS STREET, NW WASHINGTON, DC 20001 50,000. REINVENT STOCKTON FOUNDATION NONE ÞС LOCAL INNOVATIONS IN 110 NORTH SAN JOAQUIN STREET CHILD CARE TO ADVANCE STOCKTON, CA 95202 GENDER EQUITY 200,000. SAN DIEGO GRANTMAKERS NONE PC GENERAL OPERATING 5060 SHOREHAM PLACE SUPPORT SAN DIEGO, CA 92122-5903 75,000. SAN FRANCISCO FOUNDATION NONE RAPID RESPONSE FUNDING PC. ONE EMBARCADERO CENTER, SUITE 1400 ADDRESSING THE SAN FRANCISCO, CA 94110 COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND 100,000. SIERRA HEALTH FOUNDATION CENTER FOR NONE PC THE SAN JOAQUIN VALLEY HEALTH PROGRAM MANAGEMENT HEALTH FUND 1321 GARDEN HWY SACRAMENTO, CA 95833-9754 1,000,000. Total from continuation sheets

| Part XV Supplementary Informatio | n | | | |
|--|--|----------------------|---|----------|
| 3 Grants and Contributions Paid During the | Year (Continuation) | | | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | Contribution | |
| | | | | |
| TIME FOR CHANGE FOUNDATION | NONE | PC | GENERAL OPERATING | |
| PO BOX 25040 | | | SUPPORT | |
| SAN BERNARDINO, CA 92406 | | | Bolloni | 100,000. |
| TIME FOR CHANGE FOUNDATION | NONE | PC | DISRUPTING | |
| PO BOX 25040 | | | MULTIGENERATIONAL | |
| SAN BERNARDINO, CA 92406 | | | VIOLENCE FOR HOMELESS | |
| • | | | AND FORMERLY | |
| | | | INCARCERATED WOMEN AND | 150,000. |
| | | | | |
| CALIFORNIA BLACK WOMEN'S HEALTH | NONE | PC | GENERAL OPERATING | |
| PROJECT | | | SUPPORT | |
| 9800 S. LA CIENEGA BLVD., STE. 905 | | | | |
| INGLEWOOD, CA 90301 | | | | 75,000. |
| CALIFORNIA STATE ASSOCIATION OF | NONE | NC | IMPLEMENTING AND | |
| COUNTIES | | | GATHERING DATA OF | |
| 1100 K STREET, SUITE 101 | | | INTERVENTIONS TO | |
| SACRAMENTO, CA 95814 | | | REDUCE RECIDIVISM IN | |
| | | | DOMESTIC VIOLENCE | 298,000. |
| ODOLUMI DILLI ANMUDODY MEMUODY | NONE | D.C. | DDOMORING BUE | |
| GROWTH PHILANTHROPY NETWORK | NONE | PC | PROMOTING THE | |
| 122 E. 42ND STREET 17TH FLOOR | | | CALIFORNIA ACCOUNTABLE | |
| NEW YORK, NY 10168 | | | COMMUNITIES FOR HEALTH INITIATIVE MODEL | E0 000 |
| | | | INITIATIVE MODEL | 50,000. |
| | | | | |
| HEALTH EDUCATION COUNCIL | NONE | PC | PARTICIPATORY | |
| 3950 INDUSTRIAL BLVD STE 600 | | | BUDGETING PILOT | |
| W SACRAMENTO, CA 95691-6509 | | | | 100,000. |
| | | | | |
| MUSEUM OF CHILDREN'S ART | NONE | PC | REIMAGINE OAKLAND | |
| 1221 BROADWAY, LL-49 | | | 2045: A COMMUNITY | |
| OAKLAND, CA 94612 | | | FUTURES SCHOOL | 150,000. |
| MY SISTER'S HOUSE | NONE | PC | ADVANCING COLLECTIVE | • |
| 3053 FREEPORT BLVD., NO. 120 | | | ACTION FOR CULTURALLY | |
| SACRAMENTO, CA 95818 | | | RESPONSIVE DOMESTIC | |
| | | | VIOLENCE PREVENTION | |
| | | | AND POLICY | 467,500. |
| | | | | |
| CALIFORNIA CHILDREN AND FAMILIES | NONE | PC | ESTABLISHING A HOME | |
| FOUNDATION, INC. | | | VISITING LEARNING AND | |
| 1115 ATLANTIC AVE | | | INNOVATION PRACTICE | |
| ALAMEDA, CA 94501 | | 1 | HUB IN CALIFORNIA | 200,000. |
| CENTER FOR EFFECTIVE PHILANTHROPY, | NONE | ₽C | GENERAL OPERATING | |
| INC. | | [| SUPPORT | |
| 675 MASSACHUSETTS AVE 7TH FLOOR | | | | |
| CAMBRIDGE, MA 02139-3309 | | | | 25,000. |
| Total from continuation sheets | l | 1 | | 25,550. |
| Total Hom continuation sheets | | | | |

| Part XV Supplementary Information | 1 | | | |
|--|---|-------------------------|----------------------------------|----------|
| 3 Grants and Contributions Paid During the Y | ear (Continuation) | | | |
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | Contribution | |
| | | | | |
| DOLORES C. HUERTA FOUNDATION | NONE | PC | GENERAL OPERATING | |
| PO BOX 2087 | | | SUPPORT | |
| BAKERSFIELD, CA 93303 | | | | 200,000. |
| DOWNTOWN WOMEN'S CENTER | NONE | PC | CREATING HOUSING | |
| 442 SOUTH SAN PEDRO STREET | | | STABILITY FOR DOMESTIC | |
| LOS ANGELES, CA 90013 | | | VIOLENCE SURVIVORS IN | |
| | | | LOS ANGELES THROUGH | |
| | | | ADVOCACY AND | 220,000. |
| | | | | |
| FAMILY VALUES AT WORK A MULTI-STATE | NONE | PC | ADVANCING PAID FAMILY | |
| CONSORTIUM INC. | | | LEAVE IN CALIFORNIA | |
| 207 E. BUFFALO STREET, STE 211 | | | | |
| MILWAUKEE, WI 53202 | | | | 325,000. |
| GOBEE GROUP, LLC | NONE | NC | HUMAN-CENTERED DESIGN | |
| 2323 BROADWAY | | | TO GENERATE INNOVATIVE | |
| OAKLAND, CA 94612 | | | SOLUTIONS TO PREVENT | |
| | | | INTERGENERATIONAL | |
| | | | CYCLES OF FAMILY AND | 100,000. |
| GOBEE GROUP, LLC | NONE | NC | HUMAN-CENTERED DESIGN | |
| 2323 BROADWAY | | | TO GENERATE INNOVATIVE | |
| OAKLAND, CA 94612 | | | SOLUTIONS TO PREVENT | |
| | | | INTERGENERATIONAL | |
| | | | CYCLES OF FAMILY AND | 564,000. |
| MY SISTER'S HOUSE | NONE | PC | ADVANCING COLLECTIVE | |
| 3053 FREEPORT BLVD., NO. 120 | | | ACTION FOR CULTURALLY | |
| SACRAMENTO, CA 95818 | | | RESPONSIVE DOMESTIC | |
| | | | VIOLENCE PRACTICES AND | |
| | | | PREVENTION | 106,000. |
| | | | | |
| SAN FRANCISCO STUDY CENTER | NONE | PC | COMMUNITY WELL-BEING | |
| 1663 MISSION ST #310, | | | NEWS AND INFORMATION | |
| SAN FRANCISCO, CA 94103 | | | | 100,000. |
| SBCS CORPORATION | NONE | PC | IMPROVING EARLY | · |
| 430 F STREET | | | CHILDHOOD DEVELOPMENT | |
| CHULA VISTA, CA 91910 | | | THROUGH A THERAPEUTIC | |
| , | | | PRESCHOOL IN CHULA | |
| | | | VISTA FOR CHILDREN | 150,000. |
| | | | | |
| THE FULLER PROJECT FOR INTERNATIONAL | NONE | ₽C | DOMESTIC VIOLENCE | |
| REPORTING | | | JOURNALISM IN | |
| 1875 CONNECTICUT AVE. NW, FLOOR 10 | | | CALIFORNIA | |
| WASHINGTON D.C., DC 20009 | | | | 250,000. |
| BEND THE ARC | NONE | PC | ADVANCING ECONOMIC | |
| 330 7TH AVE. 19TH FLOOR | | | SECURITY AND MOBILITY | |
| NY, NY 10001 | | | FOR DOMESTIC WORKERS | |
| | | | TO IMPROVE HEALTH AND | |
| | | <u> </u> | PREVENT DOMESTIC | 200,000. |
| Total from continuation sheets | | | | |

NONE

NONE

NONE

NONE

NONE

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient CASA FAMILIAR, INC NONE PC GENERAL OPERATING 119 WEST HALL AVENUE SUPPORT SAN YSIDRO, CA 92173 200,000. CENTER FOR COMMUNITY ACTION & NONE ЬC GENERAL OPERATING SUPPORT ENVIRONMENTAL JUSTICE 3840 SUNNYHILL DR JURUPA VALLEY, CA 92509 200,000. CHARITABLE VENTURES OF ORANGE COUNTY NONE ÞС RAPID RESPONSE FUNDING 1505 E 17TH STREET, SUITE 101 ADDRESSING THE SANTA ANA, CA 92705-8520 COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND 250,000. CONTRA COSTA FAMILY JUSTICE CENTER NONE PC RESTORATIVE JUSTICE ALLTANCE INNOVATION AS AN 256 24TH STREET ALTERNATIVE TO END AND RICHMOND, CA 94804 PREVENT FAMILY VIOLENCE 396,600. DE BEAUMONT FOUNDATION NONE ÞF BUILD HEALTH CHALLENGE 7501 WISCONSIN AVE., SUITE 1310E BETHESDA, MD 20814 500,000.

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PC

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PC.

FAMILY VALUES AT WORK A MULTI-STATE

207 E. BUFFALO STREET, STE 211

1910 MAGNOLIA AVE, STE 400

SAN FRANCISCO STUDY CENTER

SAN FRANCISCO STUDY CENTER

CALIFORNIA CONSORTIUM FOR URBAN

1016 LINCOLN BLVD., STE 111 SAN FRANCISCO, CA 94129

Total from continuation sheets

1663 MISSION ST #310

INDIAN HEALTH, INC.

SAN FRANCISCO, CA 94103

11500806 701245 105792

CONSORTIUM INC.

LIFT, INC.

MILWAUKEE, WI 53202

LOS ANGELES, CA 90007

1663 MISSION ST #310,

SAN FRANCISCO, CA 94103

PAID FAMILY LEAVE

AND OUTREACH

FUTURE DOMESTIC

VIOLENCE THROUGH INCREASED FINANCIAL STABILITY FOR

ADDRESSING THE

COVID-19 RAPID

DEVELOPING NEW

RESEARCH ABOUT THE DOMESTIC VIOLENCE

EXPERIENCE WITHIN URBAN AMERICAN INDIANS

INITIATIVE

TRAINING, ORGANIZING,

REDUCING CURRENT AND

RAPID RESPONSE FUNDING

COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND

RESPONSE ETHNIC MEDIA

150,000.

150,000.

120,000.

50,000.

400,000.

| 3 Grants and Contributions Paid During the Y | (O !! !! \ | | | |
|--|---|------------------------|---|-----------------|
| | ear (Continuation) | | | |
| Recipient | If recipient is an individual, show any relationship to | Foundation | Purpose of grant or | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | status of recipient | contribution | Amount |
| CALIFORNIA FOOD POLICY ADVOCATES, | NONE | ₽C | GENERAL OPERATING | |
| INC. | | | SUPPORT | |
| 1970 BROADWAY, SUITE 760 | | | | |
| OAKLAND, CA 94612 | | | | 150,000. |
| GENERAL GOLDGENERY HEADANES AGGGELETAN | L.O.T. | | | |
| CENTRO COMMUNITY HISPANIC ASSOCIATION | NONE | PC | GENERAL OPERATING SUPPORT | |
| INC (CENTRO CHA INC.) 1633 LONG BEACH BLVD | | | SUPFORT | |
| LONG BEACH, CA 90813 | | | | 200,000. |
| BONG BEACH, CA 90013 | | | | 200,000. |
| | | | | |
| CHARITABLE VENTURES OF ORANGE COUNTY | NONE | PC | GENERAL OPERATING | |
| 1505 E 17TH STREET, SUITE 101 | | | SUPPORT | |
| SANTA ANA, CA 92705-8520 | | | | 50,000. |
| | | | | |
| CHILDREN'S COUNCIL OF SAN FRANCISCO | NONE | PC | FAMILY CHILD CARE | |
| 445 CHURCH STREET | | | BUSINESS INCUBATOR | |
| SAN FRANCISCO, CA 94114 | | | PROGRAM | 180,000. |
| , | | | | , , , , , , , , |
| COMMUNITY COALITION FOR SUBSTANCE | NONE | PC | GENERAL OPERATING | |
| ABUSE PREVENTION AND TREATMENT | | | SUPPORT | |
| 8101 S VERMONT AVE | | | | |
| LOS ANGELES, CA 90044 | | | | 100,000. |
| EAST LOS ANGELES WOMEN'S CENTER | NONE | PC | IMPROVING | |
| 1431 S ATLANTIC BLVD | | | INTERGENERATIONAL, | |
| LOS ANGELES, CA 90022-5011 | | | CULTURALLY RESPONSIVE | |
| | | | LATINX FAMILY-BASED | |
| | <u></u> | | INTERVENTION TO | 150,000. |
| EQUAL RIGHTS ADVOCATES | NONE | PC | ADVANCING ECONOMIC | |
| 1170 MARKET STREET, SUITE 700 | | | SECURITY FOR WOMEN AND FAMILIES THROUGH | |
| SAN FRANCISCO, CA 94102 | | | POLICY ADVOCACY, | |
| | | | COMMUNITY BUILDING, | 400,000. |
| FII-NATIONAL | NONE | PC | TESTING A | 100,000. |
| PO BOX 71363 | | | STRENGTHS-BASED MODEL | |
| OAKLAND, CA 94612 | | | TO BUILD FINANCIAL AND | |
| , | | | SOCIAL CAPITAL FOR | |
| | | | FAMILIES TO IMPROVE | 190,500. |
| | | | | |
| POMONA ECONOMIC OPPORTUNITY CENTER, | NONE | PC | GENERAL OPERATING | |
| INC | | | SUPPORT | |
| 1682 W MISSION BLVD | | | | |
| POMONA, CA 91766 | | | | 100,000. |
| PROJECT HOPE - THE PEOPLE-TO-PEOPLE | NONE | PC | GENERAL OPERATING | |
| HEALTH FOUNDATION, INC. | | | SUPPORT | |
| 255 CARTER HALL LANE | | | | |
| MILLWOOD, VA 22646 | | | | 200,000. |
| Total from continuation sheets | 1 | 1 | ' | , |

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor PROJECT HOPE - THE PEOPLE-TO-PEOPLE NONE HEALTH AFFAIRS- CHILD PC. HEALTH FOUNDATION, INC. HEALTH ISSUE 255 CARTER HALL LANE MILLWOOD, VA 22646 50,000. THE CAMBODIAN FAMILY NONE PC. GENERAL OPERATING 1626 E. 4TH STREET SUPPORT SANTA ANA, CA 92701 200,000. THE POSITIVE RESULTS CORPORATION ÞС GENERAL OPERATING NONE 1128 W. GARDENA BLVD. SUPPORT GARDENA, CA 90247 75,000. THE REGENTS OF THE UNIVERSITY OF NONE PC DOCUMENTING THE INTERSECTIONALITY OF CALIFORNIA, BERKELEY C/O SPONSORED PROJECTS OFFICE, 1608 EDUCATOR WELL-BEING TO FOURTH ST, STE 220, MAIL CODE 5940 CHILD WELL-BEING BERKELEY, CA 94710-1749 415,653. THE REGENTS OF THE UNIVERSITY OF NONE TRANSLATING RESEARCH PC. CALIFORNIA, BERKELEY TO INFORM POLICY AND C/O SPONSORED PROJECTS OFFICE, 1608 SYSTEMS CHANGE FOURTH ST, STE 220, MAIL CODE 5940 BERKELEY, CA 94710-1749 249,885. THE REGENTS OF THE UNIVERSITY OF NONE EXPLORING THE IMPACT PC. CALIFORNIA, BERKELEY OF TECHNOLOGICAL C/O SPONSORED PROJECTS OFFICE, 1608 CHANGE ON HEALTH, FOURTH ST, STE 220, MAIL CODE 5940 DOMESTIC VIOLENCE, AND BERKELEY, CA 94710-1749 EQUITY 150,000. THIRD SECTOR NEW ENGLAND, INC. NONE ÞС ADVERSE CHILDHOOD 89 SOUTH STREET SUITE 700 EXPERIENCES COMMUNITY BOSTON, MA 02111 OF PRACTICE 500,000. Total from continuation sheets

| Part XV Supplementary Information | | | | |
|---|--|----------------------|---|------------|
| 3 Grants and Contributions Approved for Futu | re Payment (Continuation) | | | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | Contribution | |
| NEW AMERICA FOUNDATION 1899 L STREET, NW SUITE 400 WASHINGTON, DC 20036 | NONE | PC | PROMOTING POLICY SOLUTIONS THAT ADDRESS HEALTH AND ECONOMIC | |
| , | | | SECURITY | 250,000. |
| | | | | |
| PUBLIC HEALTH ADVOCATES | NONE | PC | GENERAL OPERATING | |
| P.O. BOX 2309 | | | SUPPORT | |
| DAVIS, CA 95617 | | | | 200,000. |
| ORGANIZACION EN CALIFORNIA DE LIDERES | NONE | ₽C | GENERAL OPERATING | |
| CAMPESINAS, INC. | | | SUPPORT | |
| 319 LAMBERT ST | | | | |
| OXNARD, CA 93036 | | | | 100,000. |
| CENTRO BINACIONAL PARA EL DESARROLLO | NONE | PC | GENERAL OPERATING | |
| INDIGENA OAXAQUEO | NONE | | SUPPORT | |
| 744 N ABBY STREET | | | | |
| FRESNO, CA 93701 | | | | 100,000. |
| COMMON COUNSEL FOUNDATION | NONE | PC | SUPPORTING CALIFORNIA | |
| 1624 FRANKLIN STREET #1022 | | | INDIGENOUS COMMUNITIES | |
| OAKLAND, CA 94612 | | | TO ADDRESS THE IMPACTS | |
| | | | OF THE COVID-19 PUBLIC HEALTH CRISIS | 150,000. |
| | | | | 130,000. |
| BLUE CROSS BLUE SHIELD OF | NONE | PF | CALIFORNIA | |
| MASSACHUSETTS FOUNDATION | | | PARTICIPATION IN THE | |
| 101 HUNTINGTON AVENUE, SUITE 1300 | | | HEALTH COVERAGE | |
| BOSTON, MA 02199-7611 | | | FELLOWSHIP | 40,000. |
| CALIFORNIA BLACK MEDIA | NONE | ₽C | SOLUTIONS-ORIENTED | |
| 1809 S STREET SUITE 101-226 | | | DOMESTIC VIOLENCE | |
| SACRAMENTO, CA 95811 | | | COVERAGE IN CALIFORNIA | |
| | | | BLACK MEDIA | 110,000. |
| GONGDEGATIONS ODGINISED FOR PRODUCTION | NONE | D.G. | GENERAL OPERATING | |
| CONGREGATIONS ORGANIZED FOR PROPHETIC ENGAGEMENT | NONE | PC | GENERAL OPERATING SUPPORT | |
| 1505 W HIGHLAND | | | Borrowi | |
| SAN BERNARDINO, CA 92411 | | | | 100,000. |
| | | | | |
| CALIFORNIA RURAL LEGAL ASSISTANCE | NONE | PC | GENERAL OPERATING | |
| FOUNDATION, INC. | | | SUPPORT | |
| 2210 K STREET STE 201 SACRAMENTO, CA 95816-4954 | | | | 150,000. |
| | | | | 130,000. |
| | | | | |
| CHINESE FOR AFFIRMATIVE ACTION | NONE | ₽C | COUNTERING ANTI-ASIAN | |
| 17 WALTER U LUM PLACE | | | NARRATIVES DURING THE | |
| SAN FRANCISCO, CA 94108 | | | COVID-19 PANDEMIC | 100,000. |
| Total from continuation sheets | | | | 7,491,821. |

Part XV **Supplementary Information** Grants and Contributions Approved for Future Payment (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient COMMUNITY PARTNERS NONE PC COMMUNITY RESTORATIVE 1000 N. ALAMEDA STREET; SUITE 240 JUSTICE SOLUTIONS LOS ANGELES, CA 90012-1804 20,000. SAN FRANCISCO STUDY CENTER NONE PC. TNFRASTRUCTURE 1663 MISSION ST #310. DEVELOPMENT FOR ETHNIC MEDIA SERVICES SAN FRANCISCO, CA 94103 425,000. CALIFORNIA COMMUNITY COLLEGES NONE РC INNOVATIONS IN FAMILY CALWORKS ASSOCIATION ECONOMIC MOBILITY 4700 COLLEGE OAK DRIVE SACRAMENTO, CA 95841 207,821. THE REGENTS OF THE UNIVERSITY OF NONE PC BLUEPRINT FOR CALIFORNIA, BERKELEY BELONGING REGIONAL C/O SPONSORED PROJECTS OFFICE, 1608 NARRATIVES FOURTH ST, STE 220, MAIL CODE 5940 BERKELEY, CA 94710-1749 500,000. COUNTY OF LOS ANGELES - DEPARTMENT OF NONE GOV COMMUNITY EDUCATION & CONSUMER & BUSINESS AFFAIRS OUTREACH TO IMMIGRANT 500 W TEMPLE ST, ROOM B-96 ESSENTIAL WORKERS IN LOS ANGELES, CA 90012 LOS ANGELES COUNTY 159,000. DEFINE AMERICAN NONE PC. IMPROVING IMMIGRANT 822 E BROADWAY NARRATIVES IN THE LOUISVILLE, KY 40204 MEDTA 90,000. UNIVERSITY OF SOUTHERN CALIFORNIA NONE PC. CALIFORNIA HEALTH ANNENBERG SCHOOL FOR COMMUNICATION JOURNALISM FELLOWSHIPS AND JOURNALISM, 3502 WATT WAY LOS ANGELES, CA 90007 375,000. FUTURES WITHOUT VIOLENCE NONE PC ALL IN FOR KIDS 100 MONTGOMERY STREET, THE PRESIDIO INITIATIVE SAN FRANCISCO, CA 94129-1718 750,000. ROADTRIP NATION, LTD. NONE ÞС FUTURE OF PUBLIC 1626 PLACENTIA AVE HEALTH WORKFORCE COSTA MESA, CA 92627 DOCUMENTARY 150,000. REGENTS OF THE UNIVERSITY OF NONE GENERATING NEW PC. CALIFORNIA AT SAN DIEGO POPULATION DATA ON 9500 GILMAN, MC0615 DOMESTIC VIOLENCE AND SAN DIEGO, CA 92093 MULTIPLE FORMS OF VIOLENCE IN CALIFORNIA 175,000.

Total from continuation sheets

Part XV **Supplementary Information** Grants and Contributions Approved for Future Payment (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient PUBLIC HEALTH INSTITUTE NONE PC ADVANCING HEALTHY 555 12TH STREET, 10TH FLOOR HOUSING POLICIES AND OAKLAND, CA 94607-4046 SYSTEMS CHANGE 550,000. PUBLIC HEALTH INSTITUTE NONE PC. ADVANCING HEALTHY 555 12TH STREET, 10TH FLOOR HOUSING POLICIES AND OAKLAND, CA 94607-4046 SYSTEMS CHANGE 550,000. POLICYLINK NONE ÞС HEALING TOGETHER 1438 WEBSTER ST STE 303 CAMPAIGN OAKLAND, CA 94612-3228 525,000. ALLIANCE FOR GIRLS NONE ADVOCATING FOR ÞС POLICIES AND PRACTICES 1203 PRESERVATION PARK WAY, STE. #200 OAKLAND, CA 94612 THAT IMPROVE SAFETY AND POSITIVE GENDER NORMS 325,000. NATIONAL DOMESTIC WORKERS ALLIANCE NONE PC. ADVANCING UNIVERSAL 45 BROADWAY STE 320 FAMILY CARE IN NEW YORK, NY 10006 CALIFORNIA 500,000. SOCIAL GOOD FUND NONE PC ENDING 12651 SAN PABLO AVE, UNIT 5473 INTERGENERATIONAL RICHMOND, CA 94805 CYCLES OF VIOLENCE FOR BLACK FAMILIES 122,500. MY SISTER'S HOUSE ADVANCING COLLECTIVE NONE РC 3053 FREEPORT BLVD., NO. 120 ACTION FOR CULTURALLY SACRAMENTO, CA 95818 RESPONSIVE DOMESTIC VIOLENCE PREVENTION AND POLICY 467,500. NONE CALIFORNIA CHILDREN AND FAMILIES PC. ESTABLISHING A HOME FOUNDATION, INC. VISITING LEARNING AND 1115 ATLANTIC AVE INNOVATION PRACTICE ALAMEDA, CA 94501 HUB IN CALIFORNIA 200,000. SAN FRANCISCO STUDY CENTER NONE ÞС COMMUNITY WELL-BEING 1663 MISSION ST #310. NEWS AND INFORMATION SAN FRANCISCO, CA 94103 100,000. Total from continuation sheets

Part XV Supplementary Information 3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution NAME OF RECIPIENT - ALLIANCE FOR COMMUNITY TRANSFORMATIONS LEVERAGING COLLABORATION TO END DOMESTIC VIOLENCE: SUSTAINABILITY AND STRATEGIC PLANNING IN THE CALIFORNIA HMONG ADVOCATES NETWORK AND BUILDING OUR FUTURE COLLABORATIVE NAME OF RECIPIENT - ALLIANCE FOR GIRLS ASSESSING THE IMPACT OF COVID-19 ON VIOLENCE AGAINST GIRLS AND CREATING A RAPID RESPONSE NETWORK TO SUPPORT THEIR SAFETY AND RESILIENCE NAME OF RECIPIENT - ASIAN PACIFIC FUND RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA NAME OF RECIPIENT - BAY AREA COUNCIL FOUNDATION ADVANCING ECONOMIC SECURITY FOR WORKERS THROUGH RESEARCH ON THE IMPACT OF CALIFORNIA'S PAID FAMILY LEAVE POLICY NAME OF RECIPIENT - CENTER FOR YOUNG WOMEN'S DEVELOPMENT BUILDING THE EVIDENCE FOR LEADERSHIP DEVELOPMENT OF EXPLOITED GIRLS, WOMEN, AND GENDER NONCONFORMING PEOPLE OF COLOR TO BREAK THE CYCLE OF INTIMATE PARTNER VIOLENCE IN SAN FRANCISCO NAME OF RECIPIENT - CALIFORNIA STATE UNIVERSITY FRESNO FOUNDATION RAPID RESPONSE FUNDING TO IMPROVE COMMUNICATIONS THAT ADDRESS THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA. NAME OF RECIPIENT - HORIZONS FOUNDATION

Part XV Supplementary Information 3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA NAME OF RECIPIENT - HUMBOLDT AREA FOUNDATION RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA NAME OF RECIPIENT - THE CENTER FOR CULTURAL POWER RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA NAME OF RECIPIENT - WEAVE, INC. SHIFTING THE CULTURE OF DOMESTIC VIOLENCE RESIDENTIAL SERVICES TO A STRENGTHS MODEL TO IMPROVE PROTECTIVE FACTORS FOR SURVIVORS AND THEIR CHILDREN IN SACRAMENTO COUNTY NAME OF RECIPIENT - WOMEN'S FOUNDATION OF CALIFORNIA RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA NAME OF RECIPIENT - CHILDRENS INSTITUTE, INC. ASSESSING EARLY CHILDHOOD AND FAMILY PROTECTIVE FACTORS THROUGH A MODEL OF ENHANCED HEAD START-TWO GENERATION SERVICES TO PREVENT DOMESTIC VIOLENCE IN SOUTH LOS ANGELES NAME OF RECIPIENT - EAST BAY COMMUNITY FOUNDATION RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA

Part XV Supplementary Information 3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution NAME OF RECIPIENT - IMPACT JUSTICE EXPLORING ALTERNATIVES TO THE CRIMINAL JUSTICE SYSTEM BY ADVANCING RESTORATIVE JUSTICE PRACTICE AND TRAINING TO END DOMESTIC VIOLENCE NAME OF RECIPIENT - LATINO COMMUNITY FOUNDATION RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA NAME OF RECIPIENT - MUJERES UNIDAS Y ACTIVAS RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA NAME OF RECIPIENT - PLANNED PARENTHOOD MAR MONTE, INC. IMPROVING TWO-GENERATION PROGRAM PRACTICES AND OUTCOMES THROUGH PARTICIPATORY ACTION RESEARCH WITH PARTICIPANTS OF PLANNED PARENTHOOD MAR MONTE TEEN PARENT SUPPORT PROGRAM IN SANTA CLARA COUNTY NAME OF RECIPIENT - SAN DIEGO FOUNDATION RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA NAME OF RECIPIENT - SIERRA HEALTH FOUNDATION CENTER FOR HEALTH PROGRAM MANAGEMENT RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA NAME OF RECIPIENT - INSTITUTE FOR THE FUTURE

Part XV Supplementary Information 3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA NAME OF RECIPIENT - SAFE & SOUND IMPROVING PROTECTIVE FACTORS FOR AT-RISK FAMILIES THROUGH THE INTEGRATED CHILDREN AND FAMILY SERVICES MODEL IN SAN FRANCISCO NAME OF RECIPIENT - SACRAMENTO REGION COMMUNITY FOUNDATION RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA NAME OF RECIPIENT - CALIFORNIA COMMUNITY FOUNDATION RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA NAME OF RECIPIENT - COMMUNITY PARTNERS EVALUATION AND ANALYSIS OF AN INNOVATIVE RESTORATIVE JUSTICE PILOT PROGRAM TO ADDRESS DOMESTIC VIOLENCE IN CONTRA COSTA COUNTY NAME OF RECIPIENT - PUBLIC HEALTH INSTITUTE LEVERAGING COLLABORATION TO END DOMESTIC VIOLENCE: SUSTAINABILITY AND STRATEGIC PLANNING IN THE NORTHERN CALIFORNIA ADVERSE CHILDHOOD EXPERIENCES (ACES) COLLABORATIVE NAME OF RECIPIENT - PUBLIC HEALTH INSTITUTE RAPID RESPONSE FUNDING TO IMPROVE COMMUNICATIONS THAT ADDRESS THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA.

Part XV Supplementary Information 3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution NAME OF RECIPIENT - PUBLIC HEALTH INSTITUTE RAPID RESPONSE FUNDING TO IMPROVE COMMUNICATIONS THAT ADDRESS THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA. NAME OF RECIPIENT - PUBLIC HEALTH INSTITUTE LEVERAGING COMMUNITY DEVELOPMENT AND HEALTHCARE PARTNERSHIPS FOR SUSTAINABLE INVESTMENTS IN PREVENTION NAME OF RECIPIENT - PUBLIC HEALTH INSTITUTE ADVANCING PREVENTION POLICY INNOVATION AND ADOPTION THROUGH COMMUNICATIONS: BERKELEY MEDIA STUDIES GROUP NAME OF RECIPIENT - THE UCLA FOUNDATION RESEARCH TO INFORM SYSTEMS CHANGE OPPORTUNITIES IN LOS ANGELES COUNTYS DOMESTIC VIOLENCE AND FOSTER CARE SYSTEMS NAME OF RECIPIENT - TIDES CENTER RAPID RESPONSE FUNDING TO IMPROVE COMMUNICATIONS THAT ADDRESS THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA. NAME OF RECIPIENT - TIDES CENTER INVESTING IN TWO-GENERATION PREVENTION STRATEGIES THAT ADDRESS THE ROOT CAUSES OF HEALTH AND DOMESTIC VIOLENCE NAME OF RECIPIENT - CALMATTERS

| Dowl VV/ Complementary Information | |
|---|--|
| Part XV Supplementary Information | |
| 3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution | |
| RAPID RESPONSE HEALTH EQUITY MEDIA FUNDING ADDRESSING THE COVID-19 | |
| PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN | |
| CALIFORNIA | |
| | |
| NAME OF RECIPIENT - INLAND EMPIRE COMMUNITY FOUNDATION | |
| RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN | |
| SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA | |
| | |
| NAME OF RECIPIENT - VENTURA COUNTY COMMUNITY FOUNDATION | |
| RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN | |
| SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA | |
| | |
| NAME OF RECIPIENT - VISION Y COMPROMISO | |
| PROVIDING PREVENTION EDUCATION AND RESOURCES FOR IMMIGRANT FAMILIES TO | |
| PREVENT DOMESTIC AND FAMILY VIOLENCE DURING THE COVID-19 PANDEMIC | |
| | |
| NAME OF RECIPIENT - BLACK EMOTIONAL AND MENTAL HEALTH COLLECTIVE | |
| ADDRESSING ROOT CAUSES OF VIOLENCE OF VIOLENCE AGAINST WOMEN IN AFRICAN | |
| AMERICAN COMMUNITIES IN LOS ANGELES AND INLAND EMPIRE | |
| | |
| NAME OF RECIPIENT - MUJERES UNIDAS Y ACTIVAS | |
| BUILDING EVIDENCE FOR LATINA LEADERSHIP DEVELOPMENT TO BREAK THE CYCLE | |
| OF VIOLENCE IN SAN FRANCISCO AND ALAMEDA COUNTIES | |
| | |
| NAME OF RECIPIENT - SILICON VALLEY COMMUNITY FOUNDATION | |
| RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN | |
| SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA | |

Part XV Supplementary Information 3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution NAME OF RECIPIENT - VISION Y COMPROMISO ENHANCING TWO-GENERATION APPROACHES THAT PREVENT VIOLENCE THROUGH THE FAMILY, FRIENDS, NEIGHBORS, AND CAREGIVERS PROGRAM NAME OF RECIPIENT - ASIAN PACIFIC POLICY AND PLANNING COUNCIL IMPLEMENTATION AND EVALUATION OF A PILOT PROJECT TO PREVENT MULTIGENERATIONAL DOMESTIC VIOLENCE IN FOUR ASIAN PACIFIC ISLANDER COMMUNITIES IN LOS ANGELES COUNTY NAME OF RECIPIENT - GRANTMAKERS CONCERNED WITH IMMIGRANTS AND REFUGEES RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA NAME OF RECIPIENT - SAN FRANCISCO FOUNDATION RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA NAME OF RECIPIENT - TIME FOR CHANGE FOUNDATION DISRUPTING MULTIGENERATIONAL VIOLENCE FOR HOMELESS AND FORMERLY INCARCERATED WOMEN AND THEIR CHILDREN THROUGH THE POSITIVE FAMILY FUTURES AND REUNIFICATION PROGRAM IN SAN BERNARDINO COUNTY NAME OF RECIPIENT - DOWNTOWN WOMEN'S CENTER CREATING HOUSING STABILITY FOR DOMESTIC VIOLENCE SURVIVORS IN LOS ANGELES THROUGH ADVOCACY AND CROSS-SECTOR COLLABORATION NAME OF RECIPIENT - GOBEE GROUP, LLC HUMAN-CENTERED DESIGN TO GENERATE INNOVATIVE SOLUTIONS TO PREVENT

Part XV Supplementary Information 3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution INTERGENERATIONAL CYCLES OF FAMILY AND DOMESTIC VIOLENCE NAME OF RECIPIENT - GOBEE GROUP, LLC HUMAN-CENTERED DESIGN TO GENERATE INNOVATIVE SOLUTIONS TO PREVENT INTERGENERATIONAL CYCLES OF FAMILY AND DOMESTIC VIOLENCE NAME OF RECIPIENT - SBCS CORPORATION IMPROVING EARLY CHILDHOOD DEVELOPMENT THROUGH A THERAPEUTIC PRESCHOOL IN CHULA VISTA FOR CHILDREN EXPOSED TO FAMILY VIOLENCE IN CHULA VISTA. NAME OF RECIPIENT - BEND THE ARC ADVANCING ECONOMIC SECURITY AND MOBILITY FOR DOMESTIC WORKERS TO IMPROVE HEALTH AND PREVENT DOMESTIC VIOLENCE NAME OF RECIPIENT - CHARITABLE VENTURES OF ORANGE COUNTY RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA NAME OF RECIPIENT - LIFT, INC. REDUCING CURRENT AND FUTURE DOMESTIC VIOLENCE THROUGH INCREASED FINANCIAL STABILITY FOR PICO-UNION NEIGHBORHOOD FAMILIES OF LOS ANGELES NAME OF RECIPIENT - SAN FRANCISCO STUDY CENTER RAPID RESPONSE FUNDING ADDRESSING THE COVID-19 PUBLIC HEALTH CRISIS IN SUPPORT OF HEALTHY FAMILIES AND COMMUNITIES IN CALIFORNIA NAME OF RECIPIENT - CALIFORNIA CONSORTIUM FOR URBAN INDIAN HEALTH, INC.

| Part XV | Supplementary Information |
|-------------|---|
| 3a Grants a | and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution |
| DEVELOPING | NEW RESEARCH ABOUT THE DOMESTIC VIOLENCE EXPERIENCE WITHIN |
| URBAN AMER | ICAN INDIANS AND ALASKA NATIVES IN CALIFORNIA. |
| | |
| NAME OF RE | CIPIENT - EAST LOS ANGELES WOMEN'S CENTER |
| IMPROVING | INTERGENERATIONAL, CULTURALLY RESPONSIVE LATINX FAMILY-BASED |
| INTERVENTI | ON TO PREVENT DOMESTIC VIOLENCE IN EAST LOS ANGELES |
| | |
| NAME OF RE | CIPIENT - EQUAL RIGHTS ADVOCATES |
| ADVANCING | ECONOMIC SECURITY FOR WOMEN AND FAMILIES THROUGH POLICY |
| ADVOCACY, | COMMUNITY BUILDING, AND GENDER NORMS NARRATIVE SHIFTING |
| | |
| NAME OF RE | CIPIENT - FII-NATIONAL |
| TESTING A | STRENGTHS-BASED MODEL TO BUILD FINANCIAL AND SOCIAL CAPITAL |
| FOR FAMILI | ES TO IMPROVE HEALTH AND PREVENT DOMESTIC VIOLENCE IN |
| SACRAMENTO | |
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Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

CALIFORNIA PHYSICIANS' SERVICE FDN

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

OMB No. 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

2020

| DBA | 94-2822302 | | | | | | |
|---|--|---|--|--|--|--|--|
| Organization type (check o | ne): | | | | | | |
| Filers of: | Section: | | | | | | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | | | | | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | | | | | | |
| | 527 political organization | | | | | | |
| Form 990-PF | X 501(c)(3) exempt private foundation | | | | | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | | | |
| | 501(c)(3) taxable private foundation | | | | | | |
| | | | | | | | |
| • • | s covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul | e. See instructions. | | | | | |
| General Rule | | | | | | | |
| | n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's | · · · | | | | | |
| Special Rules | | | | | | | |
| sections 509(a)(1) a any one contributo | n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support that 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount line 1. Complete Parts I and II. | or 16b, and that received from | | | | | |
| 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. | | | | | | | |
| year, contributions is checked, enter h purpose. Don't con | a described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled make the total contributions that were received during the year for an exclusively religious applete any of the parts unless the General Rule applies to this organization because it is e, etc., contributions totaling \$5,000 or more during the year | ore than \$1,000. If this box s, charitable, etc., received <i>nonexclusively</i> | | | | | |
| but it must answer "No" on | at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fo ne filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). | • | | | | | |

Name of organization
CALIFORNIA PHYSICIANS' SERVICE FDN

DBA BLUE SHIELD OF CALIFORNIA FDN

94-2822302

| Parti | Contributors (see instructions). Use duplicate copies of Part I if | additional space is needed. | |
|------------|--|-----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | BLUE SHIELD OF CALIFORNIA 601 12TH STREET OAKLAND, CA 94607 | \$ \$ \$ | Person Payroll Noncash X (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for |

Name of organization
CALIFORNIA PHYSICIANS' SERVICE FDN
DBA BLUE SHIELD OF CALIFORNIA FDN

Employer identification number

94-2822302

| Part II | Noncash Property (see instructions). Use duplicate copies of Pa | art 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 |
| i aiti | STOCK DONATION | | |
| 1 | | | |
| | | \$\$ | 12/16/20 |
| (a) | | (c) | |
| No. | (b) | FMV (or estimate) | (d) |
| from | Description of noncash property given | (See instructions.) | Date received |
| Part I | | | |
| | | \$ | |
| (a) | | | |
| No. | (b) | (c) | (d) |
| from | Description of noncash property given | FMV (or estimate) | Date received |
| Part I | | (See instructions.) | |
| | | | |
| | | | |
| | | <u> </u> | |
| | | \$ | |
| (a) | | | |
| No. | (b) | (c) FMV (or estimate) | (d) |
| from | Description of noncash property given | (See instructions.) | Date received |
| Part I | | (====================================== | |
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| | | \$ | |
| | | | |
| (a) | | (c) | |
| No. | (b) | FMV (or estimate) | (d) |
| from Part I | Description of noncash property given | (See instructions.) | Date received |
| raiti | | | |
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| | | | |
| | | \$ | |
| (a) | | | |
| No. | (b) | (c) | (d) |
| from | Description of noncash property given | FMV (or estimate) | Date received |
| Part I | | (See instructions.) | |
| raiti | | i | |
| raiti | | <u> </u> | |
| | | | |

| | IA PHYSICIANS' SERVICE FDN | | |
|--------------------|---|--|---|
| BLUE | SHIELD OF CALIFORNIA FDN Exclusively religious, charitable, etc., contributi | ons to organizations described in se | 94-2822302 ection 501(c)(7), (8), or (10) that total more than \$1,000 for the y |
| | from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, | through (e) and the following line ent | try. For organizations |
| | Use duplicate copies of Part III if additional | space is needed. | less for the year. (Eitter this fillo, once.) |
| No. om art I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | | |
| | | (e) Transfer of gift | t |
| | Transferee's name, address, ar | nd ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| Na | | | |
| No. om ort I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | | |
| | | (e) Transfer of gift | t |
| - | Transferee's name, address, ar | nd ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| No. | - | | |
| No. om ort I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | | |
| | | (e) Transfer of gift | it . |
| - | Transferee's name, address, ar | nd ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| No. | | | |
| No. om art I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | | |
| | | (e) Transfer of gift | it |
| | | | |
| | Transferee's name, address, a | nd ZIP + 4 | Relationship of transferor to transferee |

Form **2220**

Underpayment of Estimated Tax by Corporations

► Attach to the corporation's tax return. FORM

FORM 990-PF

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

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

e CALIFORNIA PHYSICIANS' SERVICE FDN
DBA BLUE SHIELD OF CALIFORNIA FDN

Employer identification number

94-2822302

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

| F | Part I Required Annual Payment | | | | | | | |
|----|--|--------|----------------------------|------------------|-----------|-------------------|------|----------|
| | | | | | | | | |
| 1 | Total tax (see instructions) | | | | | | 1 | 574,752. |
| • | a Davis and helding assessment to (Cahadula DII /Faura 1100) light | - 00\ | included on line 4 | ا ا | . 1 | | | |
| | a Personal holding company tax (Schedule PH (Form 1120), lin b Look-back interest included on line 1 under section 460(b)(2) | | | 28 | | | | |
| L | contracts or section 167(g) for depreciation under the income | | | 21 | | | | |
| | contracts of section 107(g) for depreciation under the income | 5 1016 | asi illetilou | | ' | | | |
| | c Credit for federal tax paid on fuels (see instructions) | | | 20 | . | | | |
| | d Total. Add lines 2a through 2c | | | | | | 2d | |
| | Subtract line 2d from line 1. If the result is less than \$500, do | | | | | | | |
| | does not owe the penalty | | • | • | | | 3 | 574,752. |
| 4 | Enter the tax shown on the corporation's 2019 income tax ret | | | | | | | |
| | or the tax year was for less than 12 months, skip this line and | l ente | the amount from line 3 o | on line 5 | | | 4 | 625,031. |
| | | | | | | | | |
| 5 | Required annual payment. Enter the smaller of line 3 or line | | | ' ' | | | | |
| | enter the amount from line 3 | | | | | | 5 | 574,752. |
| - | Part II Reasons for Filing - Check the boxes belo | ow tha | at apply. If any boxes are | checked, the co | rporation | must file Form 22 | 20 | |
| _ | even if it does not owe a penalty. See instructions. | | | | | | | |
| 6 | The corporation is using the adjusted seasonal install | | | | | | | |
| 7 | The corporation is using the annualized income instal | | | | | | | |
| 8 | X The corporation is a "large corporation" figuring its fire Part III Figuring the Underpayment | st req | uired installment based o | n the prior year | s tax. | | | |
| • | Triguring the Onderpayment | | (0) | (h) | | (a) | | (4) |
| 9 | Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), | \Box | (a) | (b) | | (c) | | (d) |
| | 6th, 9th, and 12th months of the corporation's tax year. | | | | | | | |
| | Filers with installments due on or after April 1, 2020, and before July 15, 2020, see instructions | 9 | 07/15/20 | 07/15/2 |) | 09/15/20 | | 12/15/20 |
| 10 | | Ť | | | | | | <u> </u> |
| | above is checked, enter the amounts from Sch A, line 38. If | | | | | | | |
| | the box on line 8 (but not 6 or 7) is checked, see instructions | | | | | | | |
| | for the amounts to enter. If none of these boxes are checked, | | | | | | | |
| | enter 25% (0.25) of line 5 above in each column | 10 | 143,688. | 14 | 3,688. | 143, | 688. | 143,688. |
| 11 | Estimated tax paid or credited for each period. For | | | | | | | |
| | column (a) only, enter the amount from line 11 on line 15. | | | | | | | |
| | See instructions | 11 | 184,704. | | | 92, | 352. | 284,558. |
| | Complete lines 12 through 18 of one column | | | | | | | |
| | before going to the next column. | | | | | | | |
| | Enter amount, if any, from line 18 of the preceding column | 12 | | | 1,016. | | | |
| | Add lines 11 and 12 | 13 | | 4 | 1,016. | - | 352. | 284,558. |
| | Add amounts on lines 16 and 17 of the preceding column | 14 | 104 504 | | | 102, | | 154,008. |
| | Subtract line 14 from line 13. If zero or less, enter -0- | 15 | 184,704. | 4 | 1,016. | | 0. | 130,550. |
| 16 | If the amount on line 15 is zero, subtract line 13 from line | | | | ^ | 10 | 220 | |
| | 14. Otherwise, enter -0- | 16 | | | 0. | 10, | 320. | |
| 1/ | Underpayment. If line 15 is less than or equal to line 10, | | | | | | | |
| | subtract line 15 from line 10. Then go to line 12 of the next | ,, | | 1.0 | 2,672. | 143, | 688 | 13,138. |
| 10 | column. Otherwise, go to line 18 Overpayment. If line 10 is less than line 15, subtract line 10 | 17 | | 10 | 2,012. | 143, | | 13,136. |
| 10 | from line 15. Then go to line 12 of the next column | 18 | 41,016. | | | | | |
| | HOTH HITO TO. THICH YO TO HITO TZ OF LIFE HEAL COMMITTE | 1 10 | , | | | 1 | | |

LHA For Paperwork Reduction Act Notice, see separate instructions.

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Form 2220 (2020)

Part IV Figuring the Penalty

| | | | (a) | (b) | (c) | | (d) |
|----|--|--------|---------------------------|-------------------------|-----|----|--------|
| 19 | Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions | 19 | | | | | |
| 20 | Number of days from due date of installment on line 9 to the | | | | | | |
| | date shown on line 19 | 20 | | | | ╀ | |
| 21 | Number of days on line 20 after 4/15/2020 and before 7/1/2020 | 21 | | | | | |
| 22 | Underpayment on line 17 x Number of days on line 21 x 5% (0.05) | 22 | \$ | \$ | \$ | \$ | } |
| 23 | Number of days on line 20 after 6/30/2020 and before 10/1/2020 | 23 | | | | | |
| 24 | Underpayment on line 17 x Number of days on line 23 x 3% (0.03) | 24 | \$ | \$ | \$ | \$ | } |
| 25 | Number of days on line 20 after 9/30/2020 and before 1/1/2021 | 25 | | | | L | |
| 26 | Underpayment on line 17 x Number of days on line 25 x 3% (0.03) | 26 | \$ | \$ | \$ | \$ |) |
| 27 | Number of days on line 20 after 12/31/2020 and before 4/1/2021 | 27 | SEE A | TTACHED WORKSHEE | Т | | |
| 28 | Underpayment on line 17 x Number of days on line 27 x 3% (0.03) | 28 | \$ | \$ | \$ | \$ | } |
| 29 | Number of days on line 20 after 3/31/2021 and before 7/1/2021 | 29 | | | | | |
| 30 | Underpayment on line 17 x Number of days on line 29 x *% 365 | 30 | \$ | \$ | \$ | \$ | 5 |
| 31 | Number of days on line 20 after 6/30/2021 and before 10/1/2021 | 31 | | | | | |
| 32 | Underpayment on line 17 x Number of days on line 31 x *% 365 | 32 | \$ | \$ | \$ | \$ | } |
| 33 | Number of days on line 20 after 9/30/2021 and before 1/1/2022 | 33 | | | | | |
| 34 | Underpayment on line 17 x Number of days on line 33 x *% | 34 | \$ | \$ | \$ | \$ | } |
| 35 | Number of days on line 20 after 12/31/2021 and before 3/16/2022 | 35 | | | | | |
| 36 | Underpayment on line 17 x Number of days on line 35 x *% 365 | 36 | \$ | \$ | \$ | \$ | } |
| 37 | Add lines 22, 24, 26, 28, 30, 32, 34, and 36 | 37 | \$ | \$ | \$ | \$ | } |
| 38 | Penalty. Add columns (a) through (d) of line 37. Enter the to line for other income tax returns | tal he | ere and on Form 1120, lin | e 34; or the comparable | 38 | \$ | 1,684. |

Form 2220 (2020)

^{*} Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at **www.irs.gov**. You can also call 1-800-829-4933 to get interest rate information.

FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

| lame(s) CALIFORNIA PHYS | ICIANS' SERVICE FDN | | | Identifying Numb | er |
|----------------------------|---------------------|--------------------------------|-----------------------------------|------------------------------|----------------|
| DBA BLUE SHIELD | OF CALIFORNIA FDN | | | 94-282230 | 12 |
| (A) *Date | (B) Amount | (C) Adjusted Balance Due | (D) Number Days Balance Due | (E) Daily Penalty Rate | (F) Penalty |
| | | -0- | | | • |
| 07/15/20 | 143,688. | 143,688. | | | |
| 07/15/20 | 143,688. | 287,376. | | | |
| 07/15/20 | -183,416. | 103,960. | | | |
| 07/15/20 | -1,288. | 102,672. | 62 | .000081967 | 52 |
| 09/15/20 | 143,688. | 246,360. | | | |
| 09/15/20 | -92,352. | 154,008. | 91 | .000081967 | 1,14 |
| 12/15/20 | 143,688. | 297,696. | | | |
| 12/15/20 | -284,558. | 13,138. | 2 | .000081967 | |
| 12/17/20 | -11,000. | 2,138. | 14 | .000081967 | |
| 12/31/20 | 0. | 2,138. | 49 | .000082192 | |
| 02/18/21 | -4,000. | -1,862. | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| enalty Due (Sum of Colu | umn F). | | | | 1,68 |

^{*} Date of estimated tax payment, withholding credit date or installment due date.

012511 04-01-20

| FORM 990-1 | | GATN | OR | (LOSS) | FROM | SALE | OF | ASSE | TS | | <u></u> | TEMENT 1 |
|-------------|----------------------|----------------|------|-------------|----------------------|---------------|------|---------------|------|----------------------|------------|-------------------------------|
| | | | | | | | | | | | | |
| DESCRIPTION | (A) ON OF PROPER' | ΓY | | | | | | MANN ACQUI | | DA ACQU | TE IRED | DATE SOLI |
| PUBLICLY ' | TRADED SECUR | ITIES | | | | | _ | | | 12/3 | 1/20 | 12/31/20 |
| | (B) | C. | (C | | | (D) | ο | | (E) | | | (F) |
| Ş | GROSS SALES PRICE | | | OR BASIS | EXI | PENSE SALE | OF | | EPRE | c. | GAIN | OR LOSS |
| | 38,876,240 | | - | 29,080,480 | · . | | - | 0. | | 0. | | 9,795,760. |
| DESCRIPTION | (A) ON OF PROPER' | ΓY | | | | | | MANN ACQUI | | DA ACQU | TE IRED | DATE SOLI |
| PUBLICLY ' | TRADED SECUR | ITIES | | | | | | | | 12/1 | 6/20 | 12/16/20 |
| | (B) | C) | () | | T3 32 1 | (D) | O 17 | • | (E) | | | (F) |
| Ş | GROSS SALES PRICE | | | OR BASIS | EXI | PENSE SALE | OF | | EPRE | C. | GAIN | OR LOSS |
| | 39,987,145 | 5. | | 40,000,124 | | | | 0. | | 0. | | -12,979. |
| CAPITAL GA | AINS DIVIDEN | DS FRO | M P | ART IV | | | | | | | | 0 . |
| TOTAL TO I | FORM 990-PF, | PART | I, | LINE 62 | A | | | | | : | | 9,782,781. |
| FORM 990-1 | PF 1 | DIVIDE | NDS | S AND II | NTERES | ST FR | OM | SECUR | ITIE | S | STA | TEMENT 2 |
| SOURCE | | GROSS AMOUN | T | GA: | ITAL INS DENDS | | | NUE OOKS | | (B) INVE T INC | | (C) ADJUSTED NET INCOME |
| NORTHERN T | TRUST | 1,293, | 861. | | 0 | | 1,: | 293,861. | | 1,293 | ,861. | |
| TO PART I | , LINE 4 | 1,293, | 861. | · | 0 | · | 1,: | 293,861. | | 1,293 | ,861. | |
| | === | | _ | | | | | | === | | | |

| FORM 990-PF | ACCOUNTI | | STATEMENT 3 | | |
|--|------------------------------|-----------------------------------|-------------------------------|-------------------------------|--|
| | (A) EXPENSES | (B) NET INVEST- | | (D) CHARITABLE | |
| DESCRIPTION | PER BOOKS | MENT INCOME | NET INCOME | PURPOSES | |
| ACCOUNTING FEES | 45,250. | 0. | | 45,250. | |
| TO FORM 990-PF, PG 1, LN 16B | 45,250. | 0. | | 45,250. | |
| FORM 990-PF (| OTHER PROFES | SIONAL FEES | S | TATEMENT 4 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | (D) CHARITABLE PURPOSES | |
| PROGRAM CONSULTING & EVALUATION INVESTMENT MANAGEMENT FEES | 3,191,451. 9,475. | | | 3,191,451. 0. | |
| TO FORM 990-PF, PG 1, LN 16C | 3,200,926. | 9,475. | | 3,191,451. | |
| | | | | | |
| FORM 990-PF | TAX | ES | S | TATEMENT 5 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| EXCISE TAX EXPENSES | 442,892. | 0. | | 0. | |
| TO FORM 990-PF, PG 1, LN 18 | 442,892. | 0. | | 0. | |
| = | | | | | |

| FORM 990-PF | OTHER E | XPENSES | S' | STATEMENT 6 | | |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|--|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | | |
| BANK FEES | 916. | 0. | | 916. | | |
| BOARD MEETING EXPENSES | 5,127. | 0. | | 5,127. | | |
| EVENTS - HOSTED | 4,000. | 0. | | 4,000. | | |
| HONORARIA | 4,000. | 0. | | 4,000. | | |
| INTERNAL/TEAM MEETINGS | 5,386. | 0. | | 5,386. | | |
| IT / TELECOMMUNICATIONS | 127,045. | 0. | | 127,045. | | |
| LICENSE & FEES | 2,321. | 0. | | 2,321. | | |
| MARKETING | 217,843. | 0. | | 217,843. | | |
| MEMBERSHIPS | 162,235. | 0. | | 162,235. | | |
| MISCELLANEOUS | 10. | 0. | | 10. | | |
| OFFICE SUPPLIES | 11,559. | 0. | | 11,559. | | |
| STAFF TRAINING & DEVELOPMENT | 39,008. | 0. | | 39,008. | | |
| STATE FILING FEE | 235. | 0. | | 235. | | |
| SUBSCRIPTIONS | 6,353. | 0. | | 6,353. | | |
| ACCRUAL TO CASH ADJUSTMENT | 0. | 0. | | 368,768. | | |
| TO FORM 990-PF, PG 1, LN 23 | 586,038. | 0. | | 954,806. | | |

| FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES | STATEMENT 7 |
|--|---------------------------------------|
| DESCRIPTION | AMOUNT |
| IN-KIND GIFTS OF PERSONNEL, ADMINISTRATIVE SERVICES, AND FACILITIES | 6,006,796. |
| TOTAL TO FORM 990-PF, PART III, LINE 3 | 6,006,796. |
| | |
| FORM 990-PF OTHER DECREASES IN NET ASSETS OR FUND BALANCES | STATEMENT 8 |
| FORM 990-PF OTHER DECREASES IN NET ASSETS OR FUND BALANCES DESCRIPTION | STATEMENT 8 AMOUNT |
| | · · · · · · · · · · · · · · · · · · · |
| DESCRIPTION UNREALIZED LOSS ON INVESTMENTS | AMOUNT |

| FORM 990-PF | CORPORATE STOCK | | STATEMENT 9 |
|--------------------------------|-------------------------------------|-------------------------|---------------------------------|
| DESCRIPTION | | BOOK VALUE | FAIR MARKET VALUE |
| U.S. COMMON STOCK | | 20,653,230. | 20,653,230. |
| TOTAL TO FORM 990-PF, PART II, | LINE 10B | 20,653,230. | 20,653,230. |
| | | | |
| FORM 990-PF | OTHER INVESTMENTS | | STATEMENT 10 |
| FORM 990-PF DESCRIPTION | OTHER INVESTMENTS VALUATION METHOD | BOOK VALUE | STATEMENT 10 FAIR MARKET VALUE |
| | VALUATION | BOOK VALUE 33,052,880. | FAIR MARKET |
| DESCRIPTION | VALUATION METHOD | | FAIR MARKET VALUE |

| FORM 990-PF PART VIII - LIST TRUSTEES AND | | | STAT | EMENT 11 |
|---|--------------------------|-------------------|---------------------------------|----------|
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | TUDDICT |
| EVELYN DILSAVER C/O BLUE SHIELD OF CA FOUNDATION, 315 MONTGOMERY STREET, SUITE 1200 SAN FRANCISCO, CA 94104 | BOARD CHAIR | | 0. | 0. |
| SHARON KIMBERLY BELSHE C/O BLUE SHIELD OF CA FOUNDATION, 315 MONTGOMERY STREET, SUITE 1200 SAN FRANCISCO, CA 94104 | | | | |
| KATHERINE FLORES, M.D. C/O BLUE SHIELD OF CA FOUNDATION, 315 MONTGOMERY STREET, SUITE 1200 SAN FRANCISCO, CA 94104 | | | 0. | 198. |
| MICHAEL A. RODRIGUEZ, M.D., M.P.H. C/O BLUE SHIELD OF CA FOUNDATION, 315 MONTGOMERY STREET, SUITE 1200 SAN FRANCISCO, CA 94104 | | | | 0. |
| GARY COHEN C/O BLUE SHIELD OF CA FOUNDATION, 315 MONTGOMERY STREET, SUITE 1200 SAN FRANCISCO, CA 94104 | TRUSTEE | 0. | 0. | 0. |
| MICHAEL MATHIAS C/O BLUE SHIELD OF CA FOUNDATION, 315 MONTGOMERY STREET, SUITE 1200 SAN FRANCISCO, CA 94104 | TRUSTEE | 0. | 0. | 0. |
| ADRIANE LAMAR SNIDER C/O BLUE SHIELD OF CA FOUNDATION, 315 MONTGOMERY STREET, SUITE 1200 SAN FRANCISCO, CA 94104 | TRUSTEE | 4,500. | 0. | 0. |
| RAYMOND J. BAXTER C/O BLUE SHIELD OF CA FOUNDATION, 315 MONTGOMERY STREET, SUITE 1200 SAN FRANCISCO, CA 94104 | | &CEO(THRU 4/20 | O); TRUSTI | |

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

72,500.

223.

FORM 990-PF EXPENDITURE RESPONSIBILITY STATEMENT PART VII-B, LINE 5C

STATEMENT 12

GRANTEE'S NAME

GOBEE GROUP, LLC

GRANTEE'S ADDRESS

2323 BROADWAY OAKLAND, CA 94612

GRANT AMOUNT

DATE OF GRANT AMOUNT EXPENDED

664,000.

10/28/20

PURPOSE OF GRANT

TO INCUBATE FOUR HUMAN-CENTERED DESIGN PROJECTS THAT ARE DESIGNED TO PREVENT INTERGENERATIONAL CYCLES OF FAMILY AND DOMESTIC VIOLENCE AT THE COMMUNITY LEVEL.

DATES OF REPORTS BY GRANTEE

INTERIM REPORT: 8/1/2020. FINAL REPORT: 5/1/2021.

ANY DIVERSION BY GRANTEE

NO DIVERSION OF GRANT FUNDS WAS FOUND.

RESULTS OF VERIFICATION

BLUE SHIELD OF CALIFORNIA FOUNDATION REVIEWED THE GRANT REPORTS RECEIVED BUT DID NOT UNDERTAKE ANY VERIFICATION OF THE GRANTEE'S REPORTS AS THERE HAS NOT BEEN ANY REASON TO DOUBT THEIR ACCURACY OR RELIABILITY.

GRANTEE'S NAME

DE BEAUMONT FOUNDATION

GRANTEE'S ADDRESS

7501 WISCONSIN AVE, SUITE 1310E BETHESDA, MD 20814

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

500,000. 06/15/20

PURPOSE OF GRANT

TO LAUNCH AND SUPPORT THE THIRD COHORT OF THE BUILD HEALTH CHALLENGE CONSISTING OF MULTI-SECTOR COLLABORATIONS FOCUSED ON UPSTREAM HEALTH APPROACHES, IN ORDER TO STRENGTHEN THE PIPELINE OF COLLABORATIONS PREPARED TO CHANGE THE SYSTEMS THAT DRIVE POOR HEALTH AND DOMESTIC VIOLENCE IN CALIFORNIA.

DATES OF REPORTS BY GRANTEE

INTERIM REPORT: 2/1/20, 2/1/21, 2/1/22; FINAL REPORT: 9/1/22.

ANY DIVERSION BY GRANTEE

NO DIVERSION OF GRANT FUNDS WAS FOUND.

RESULTS OF VERIFICATION

BLUE SHIELD OF CALIFORNIA FOUNDATION REVIEWED THE GRANT REPORTS RECEIVED BUT DID NOT UNDERTAKE ANY VERIFICATION OF THE GRANTEE'S REPORTS AS THERE HAS NOT BEEN ANY REASON TO DOUBT THEIR ACCURACY OR RELIABILITY.

GRANTEE'S NAME

CALIFORNIA STATE ASSOCIATION OF COUNTIES

GRANTEE'S ADDRESS

1100 K STREET, SUITE 101 SACRAMENTO, CA 95814

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

298,000. 04/16/20

PURPOSE OF GRANT

TO PROVIDE SUPPORT FOR THE CONTINUED IMPLEMENTATION, RESEARCH, TECHNICAL ASSISTANCE, AND CONVENING OF A SIX-COUNTY PILOT PROJECT TO TEST INNOVATIVE STRATEGIES FOR PREVENTING RECIDIVISM IN CASES OF DOMESTIC VIOLENCE.

DATES OF REPORTS BY GRANTEE

NONE IN 2020. INTERIM REPORT: 5/1/21, 7/1/21AND 5/1/22; FINAL REPORT:12/1/22

ANY DIVERSION BY GRANTEE

NO DIVERSION OF GRANT FUNDS WAS FOUND.

RESULTS OF VERIFICATION

BLUE SHIELD OF CALIFORNIA FOUNDATION REVIEWED THE GRANT REPORTS RECEIVED BUT DID NOT UNDERTAKE ANY VERIFICATION OF THE GRANTEE'S REPORTS AS THERE HAS NOT BEEN ANY REASON TO DOUBT THEIR ACCURACY OR RELIABILITY.

STATEMENT 14

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 13

ACTIVITY ONE

IN 2020, BLUE SHIELD OF CALIFORNIA FOUNDATION (BSCF) ENGAGED IN VARIOUS SIGNIFICANT CHARITABLE ACTIVITIES, INCLUDING IMPLEMENTATION OF A DESIGN LAB TO IDENTIFY INNOVATIVE OPPORTUNITIES FOR PREVENTION DOMESTIC VIOLENCE, CONVENING GRANTEES TO ADVANCE THE FIELD'S THINKING ON DOMESTIC VIOLENCE PREVENTION, EVALUATION SUPPORT FOR DOMESTIC VIOLENCE PREVENTION PROJECTS, AND RESEARCH TO UNDERSTAND PUBLIC ATTITUDES RELATES TO GENDER-BASED VIOLENCE. IN ADDITION, THE FOUNDATION SUPPORTED CAPACITY BUILDING TO INCREASE THE EFFECTIVENESS OF COMMUNITY-BASED COLLABORATIVE EFFORTS FOCUSED ON DOMESTIC VIOLENCE, HOUSING, AND HEALTH.

SPECIFIC DIRECT CHARITABLE ACTIVITIES INCLUDE THE FOLLOWING:

TO FORM 990-PF, PART IX-A, LINE 1 1,443,381.

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

ACTIVITY TWO

FORM 990-PF

CONTINUED FROM STATEMENT 13

BSCF CONTINUED TO SUPPORT A DESIGN LAB THAT CONVENED COMMUNITY MEMBERS AND SYSTEM LEADERS TO INFORM PREVENTION OPPORTUNITIES IN THE AREA OF DOMESTIC VIOLENCE AND GENDER EQUITY. PARTICIPANTS RECEIVED CAPACITY BUILDING SUPPORT IN DESIGN THINKING AND WERE GUIDED THROUGH A MULTI-STEP PROCESS TO DESIGN, PROTOTYPE, AND PILOT IDEAS THAT WERE GENERATED IN THE LAB. PROJECTS WERE "INCUBATED" AND REFINED BASED ON COMMUNITY INPUTS AND FEEDBACK.

BSCF CONVENED GRANTEES WORKING ON DOMESTIC VIOLENCE PREVENTION. THIS SET OF GRANTEES ARE WORKING ON DIVERSE APPROACHES TO ENGAGE DIFFERENT SECTORS TO WORK TOGETHER ON NEW PROGRAMS AND STRATEGIES TO PREVENT DOMESTIC VIOLENCE IN CALIFORNIA COMMUNITIES. CONVENING OFFERED.

| | | EXPENSES |
|----------------------------|--------|----------|
| TO FORM 990-PF, PART IX-A, | LINE 2 | 0. |

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 15

ACTIVITY THREE

CONTINUED FROM STATEMENT 14

BSCF SUPPORTED RESEARCH TO BETTER UNDERSTAND PUBLIC ATTITUDES RELATED TO GENDER AND VIOLENCE, DOMESTIC VIOLENCE, AND THE RELATIONSHIP BETWEEN THE THREE. THE RESEARCH FINDINGS HAVE BEEN USED TO INFORM HOW TO FRAME MESSAGES THAT CAN INCREASE AWARENESS AND PREVENTION OF DOMESTIC VIOLENCE.

BSCF SUPPORTED EVALUATION TECHNICAL ASSISTANCE FOR DOMESTIC VIOLENCE PREVENTION GRANTEES, BOTH TO BUILD THEIR EVALUATION CAPACITY, AND TO BUILD MEASUREMENT FRAMEWORKS THAT COULD INFORM PROGRESS THROUGHOUT THE PROJECT.

BSCF SUPPORTED, IN PARTNERSHIP WITH THE GENENTECH FOUNDATION, A NEW PROJECT CALLED "ALL IN FOR KIDS" WHICH WILL SUPPORT INNOVATIVE STRATEGIES THAT REIMAGINE HOW CHILD-AND FAMILY-SERVING SYSTEMS CAN MORE EFFECTIVELY INTERRUPT AND PREVENT CHILDHOOD TRAUMA WITH COMMUNITY-DRIVEN STRATEGIES THAT ARE ROOTED IN RACIAL EQUITY, HEALING, AND PREVENTION.

| | | | | | | EXPENSES | |
|-------|-------------|------------|-----------|------------|------------|-------------|----|
| TO FO | ORM 990-PF, | PART IX-A, | LINE 3 | | | | 0. |
| | | | | | | | |
| FORM | 990-PF | SUMMARY | OF DIRECT | CHARITABLE | ACTIVITIES | STATEMENT 1 | .6 |
| | | | | | | | |

ACTIVITY FOUR

CONTINUED FROM STATEMENT 15

BSCF SUPPORTED MULTI-SECTOR COLLABORATION PROJECTS TO WORK COLLECTIVELY ON A STATEWIDE POLICY AGENDA TO IMPROVE HOUSING CONDITIONS, INCREASE LANDLORD ACCOUNTABILITY FOR HEALTHY HOUSING, AND REDUCE HEALTH DISPARITIES IN CALIFORNIA. SUPPORT INCLUDED PROVISION OF TECHNICAL ASSISTANCE, CONVENING, AND FACILITATION TO ENABLE GRANTEES TO ENGAGE THE COMMUNITY PARTNERS.

| | 1 | EXPENSES |
|----------------------------|--------|----------|
| TO FORM 990-PF, PART IX-A, | LINE 4 | 0. |

FORM 990-PF

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

STATEMENT 17

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

BLUE SHIELD OF CALIFORNIA FOUNDATION 315 MONTGOMERY STREET, SUITE 1200 SAN FRANCISCO, CA 94104

TELEPHONE NUMBER

NAME OF GRANT PROGRAM

415-229-6080

BSCF GRANTS

EMAIL ADDRESS

BSCF@BLUESHIELDCAFOUNDATION.ORG

FORM AND CONTENT OF APPLICATIONS

GO TO OUR WEBSITE: HTTPS://BLUESHIELDCAFOUNDATION.ORG/GRANTS

ANY SUBMISSION DEADLINES

SEE WEBSITE FOR CURRENT DEADLINES

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE BLUE SHIELD OF CALIFORNIA FOUNDATION IS COMMITTED TO MAKING HEALTHCARE ACCESSIBLE, EFFECTIVE, AND AFFORDABLE FOR ALL CALIFORNIANS, PARTICULARLY UNDERSERVED PEOPLE, AND TO ENDING DOMESTIC VIOLENCE. IN 2020, THE FOUNDATION DISTRIBUTED RESOURCES ACROSS SEVEN PRIORITY AREAS, WHICH INVOLVED GRANT MAKING AND OTHER PROGRAMMATIC ACTIVITIES (E.G., RESEARCH, COMMUNICATIONS, COMMUNITY ENGAGEMENT AND PUBLIC AFFAIRS) THAT ADVANCE THE OUTCOMES SOUGHT BY THE FOUNDATION'S LONG TERM STRATEGY. PLEASE SEE OUR WEBSITE FOR MORE DETAILS ON PROGRAMMATIC PRIORITIES.

GENERAL EXPLANATION

STATEMENT 18

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

FORM 990-PF, PART III - OTHER INCREASES AND DECREASES IN NET ASSETS

EXPLANATION:

ASSETS OR FUND BALANCES:

CALIFORNIA PHYSICIAN'S SERVICE (DBA BLUE SHIELD OF CALIFORNIA, INC.), A SUBSTANTIAL CONTRIBUTOR, PAID THE FOUNDATION'S STAFFING COST AND MUCH OF ITS ADMINISTRATIVE COSTS. CALIFORNIA PHYSICIANS' SERVICE (DBA BLUE SHIELD OF CALIFORNIA, INC.) RECEIVED NO REIMBURSEMENT OR COMPENSATION FOR THESE COSTS, WHICH WERE RECORDED AS AN IN-KIND GIFT BY THE FOUNDATION. THE ESTIMATED VALUE OF THE ADMINISTRATIVE COSTS AND PERSONNEL PROVIDED TO THE FOUNDATION WAS APPROXIMATELY: \$6,006,796.