

Form **8879-TE**

IRS e-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2021, or fiscal year beginning JUL 1, 2021, and ending JUN 30, 2022

2021

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879TE for the latest information.**

Name of filer

Women's Foundation of California

EIN or SSN

94-2752421

Name and title of officer or person subject to tax Surina Khan
CEO

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not complete more than one line in Part I.**

1a Form 990 check here	<input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	<u>1b</u> <u>10,463,697.</u>
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	<u>2b</u> _____
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	<u>3b</u> _____
4a Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	<u>4b</u> _____
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	<u>5b</u> _____
6a Form 990-T check here	<input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	<u>6b</u> _____
7a Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	<u>7b</u> _____
8a Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	<u>8b</u> _____
9a Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	<u>9b</u> _____
10a Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	<u>10b</u> _____

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize Dillwood Burkel & Millar, LLP to enter my PIN 67117
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ▶

Date ▶

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

68745532060

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶

Date ▶ 10/26/22

ERO Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Privacy act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2021)

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2021

Open to Public Inspection

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/Form990 for instructions and the latest information.

A For the 2021 calendar year, or tax year beginning **JUL 1, 2021** and ending **JUN 30, 2022**

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Women's Foundation of California Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1301 Clay Street 71719 City or town, state or province, country, and ZIP or foreign postal code Oakland, CA 94612 F Name and address of principal officer: Surina Khan same as C above	D Employer identification number 94-2752421 E Telephone number (510) 740-2500 G Gross receipts \$ 10,810,130. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ womensfoundca.org		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
L Year of formation: 1979		M State of legal domicile: CA

Part I Summary

1	Briefly describe the organization's mission or most significant activities: The Women's Foundation of California invests in, trains, and connects community leaders to		
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	20
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	19
5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	36
6	Total number of volunteers (estimate if necessary)	6	50
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
8	Contributions and grants (Part VIII, line 1h)	12,041,268.	10,407,455.
9	Program service revenue (Part VIII, line 2g)	1,569.	36,019.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	87,912.	14,285.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	77,193.	5,938.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,207,942.	10,463,697.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,404,000.	5,413,193.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,900,717.	3,701,602.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	15,500.	15,500.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 804,691.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,094,582.	1,027,288.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,414,799.	10,157,583.
19	Revenue less expenses. Subtract line 18 from line 12	3,793,143.	306,114.
20	Total assets (Part X, line 16)	20,605,607.	20,392,428.
21	Total liabilities (Part X, line 26)	366,490.	560,041.
22	Net assets or fund balances. Subtract line 21 from line 20	20,239,117.	19,832,387.

Part II Signature Block

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

Sign Here	Signature of officer Surina Khan, CEO Type or print name and title	Date _____			
Paid Preparer Use Only	Print/Type preparer's name Christina Z Hollingsworth	Preparer's signature Christina Z Hollings	Date 10/26/22	Check if self-employed <input type="checkbox"/>	PTIN P02090706
	Firm's name ▶ Dillwood Burkel & Millar, LLP	Firm's EIN ▶ 68-0456752			
	Firm's address ▶ 175 Concourse Boulevard, Suite A Santa Rosa, CA 95403		Phone no. (707) 577-8806		

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: The Women's Foundation of California invests in, trains, and connects community leaders to advance gender, racial, and economic justice.

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 5,718,589. including grants of \$ 5,052,693.) (Revenue \$) Philanthropic Initiatives: the Foundation provides grants to community-led organizations. Grants are made to exemplary nonprofit organizations that are removing barriers and creating opportunities for advancing the health, safety and economic security of all Californians, particularly those from communities of color and low-income communities. The Foundation's grantmaking represents a powerful investment in the programs and people who advance gender, racial and economic justice. The Foundation launched the Relief and Resiliency Fund in 2020 to provide rapid support to community-based organizations during the pandemic and California wild fires.

4b (Code:) (Expenses \$ 2,056,406. including grants of \$ 360,500.) (Revenue \$ 38,937.) Policy Advocacy: The Dr. Beatriz Maria Solis Policy Institute (SPI) amplifies the voices of California women through a year-long training program in state and county public policymaking. Fellows of diverse backgrounds and experiences work in teams and are paired with a mentor to implement important legislative projects. To date, SPI has trained more than 600 advocates and local leaders and helped pass 46 new statewide laws and local policies improving Californians' health, safety and economic well-being. The SPI alum network forms a statewide community of strong, savvy, passionate leaders who are helping to form policies, laws and budgets that support our political, social, and economic lives.

4c (Code:) (Expenses \$ 1,060,394. including grants of \$) (Revenue \$ 3,020.) Strategic communications: The foundation serves as a trusted ally and strategic connector across the state, helping to build coalitions and create a comprehensive feminist policy agenda. California women rising is a recurring online gathering of bipoc, youth and grassroots women leaders engaged in social justice work. The sessions focus on financial education, storytelling and youth leadership development. California women rising is designed to create space and time to celebrate together, learn together and practice self-care.

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 8,835,389.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Description, Yes, No. Rows 22-38. Includes questions about grants, compensation, tax-exempt bonds, excess benefit transactions, and controlled entities.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question ID, Description, Yes, No. Rows 1a, 1b, 1c. Includes questions about Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No checkboxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and various organizational requirements.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	20	
b	Enter the number of voting members included on line 1a, above, who are independent	19	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **CA**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **Christine Reyes - 510-740-2503**
1301 Clay Street, #71719, Oakland, CA 94612

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Surina Khan Director & Chief Executive	32.00	X		X			271,194.	0.	13,438.	
(2) Beatriz Vieira Chief Strategist of Programs	32.00			X			187,264.	0.	23,204.	
(3) Christine Reyes Chief Financial Officer	32.00			X			172,814.	0.	27,465.	
(4) Stephanie Green Chief Strategist of Development	32.00			X			155,782.	0.	30,397.	
(5) Kamika Dunlap Chief Strategist of Commun	32.00			X			162,732.	0.	8,282.	
(6) Diane Manuel Director	1.00	X					0.	0.	0.	
(7) Quency Phillips Board Secretary	2.00	X		X			0.	0.	0.	
(8) Karen Jordan Board Treasurer	2.00	X		X			0.	0.	0.	
(9) Dion Aroner Director	1.00	X					0.	0.	0.	
(10) Elmy Bermejo Director	1.00	X					0.	0.	0.	
(11) Tess Bridgeman Director	1.00	X					0.	0.	0.	
(12) Kim Carter Director	1.00	X					0.	0.	0.	
(13) Jennifer Chou Director	1.00	X					0.	0.	0.	
(14) Fabiola DeCaratachea Director	1.00	X					0.	0.	0.	
(15) Elizabeth Escamilla Board Vice-Chair	2.00	X		X			0.	0.	0.	
(16) Sandra R. Flores Director	1.00	X					0.	0.	0.	
(17) Marlene Garcia Board Chair	2.00	X		X			0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) Will Guerra Director	1.00	X						0.	0.	0.
(19) Eunisses Hernandez Director	1.00	X						0.	0.	0.
(20) Supervisor Holly J. Mitchell Director	1.00	X						0.	0.	0.
(21) Lora O'Connor Director	1.00	X						0.	0.	0.
(22) Susan Pritzker Director	1.00	X						0.	0.	0.
(23) C. M. Samala Director	1.00	X						0.	0.	0.
(24) Aria Sa'id Director	1.00	X						0.	0.	0.
1b Subtotal								949,786.	0.	102,786.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								949,786.	0.	102,786.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **5**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	10,407,455.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 417,316.				
	h Total. Add lines 1a-1f		10,407,455.				
Program Service Revenue	2 a Program Income	Business Code					
		561499	36,019.	36,019.			
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
g Total. Add lines 2a-2f		36,019.					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		86,455.			86,455.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	274,263.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	346,433.				
	c Gain or (loss)	7c	-72,170.				
	d Net gain or (loss)		-72,170.			-72,170.	
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a Miscellaneous Income	Business Code					
		561499	5,938.	5,938.			
	b _____						
	c _____						
	d All other revenue						
e Total. Add lines 11a-11d		5,938.					
12 Total revenue. See instructions		10,463,697.	41,957.	0.	14,285.		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	5,413,193.	5,413,193.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,161,659.	612,903.	246,763.	301,993.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,032,317.	1,654,049.	59,434.	318,834.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	72,543.	61,739.	393.	10,411.
9 Other employee benefits	216,184.	178,999.	6,673.	30,512.
10 Payroll taxes	218,899.	157,616.	19,690.	41,593.
11 Fees for services (nonemployees):				
a Management				
b Legal	9,613.		9,613.	
c Accounting	44,448.		44,448.	
d Lobbying	729.	729.		
e Professional fundraising services. See Part IV, line 17	15,500.			15,500.
f Investment management fees	76,746.		76,746.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	458,708.	451,808.	6,250.	650.
12 Advertising and promotion	12,646.	12,226.	420.	
13 Office expenses	13,401.	8,946.	2,236.	2,219.
14 Information technology				
15 Royalties				
16 Occupancy	22,558.	16,355.	1,994.	4,209.
17 Travel	14,605.	9,708.	1,890.	3,007.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	5,599.	5,205.	150.	244.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	16,083.	11,580.	1,447.	3,056.
23 Insurance	6,866.	4,943.	618.	1,305.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a Equipment & Software	127,024.	94,113.	7,823.	25,088.
b Program Supplies	83,196.	83,196.		
c Dues & Subscriptions	41,628.	13,124.	8,292.	20,212.
d Telephone	25,945.	18,683.	2,334.	4,928.
e All other expenses	67,493.	26,274.	20,289.	20,930.
25 Total functional expenses. Add lines 1 through 24e	10,157,583.	8,835,389.	517,503.	804,691.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	314,332.	1	582,613.
	2 Savings and temporary cash investments	8,614,911.	2	8,359,518.
	3 Pledges and grants receivable, net	4,611,572.	3	7,190,794.
	4 Accounts receivable, net	3,483,206.	4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	67,052.	9	91,986.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 72,255.		
	b Less: accumulated depreciation	10b 67,118.	21,220.	10c 5,137.
	11 Investments - publicly traded securities	3,399,807.	11	4,106,140.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	93,507.	15	56,240.
16 Total assets. Add lines 1 through 15 (must equal line 33)	20,605,607.	16	20,392,428.	
Liabilities	17 Accounts payable and accrued expenses	366,490.	17	560,041.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	366,490.	26	560,041.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	6,015,123.	27	8,053,678.
	28 Net assets with donor restrictions	14,223,994.	28	11,778,709.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	20,239,117.	32	19,832,387.
	33 Total liabilities and net assets/fund balances	20,605,607.	33	20,392,428.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,463,697.
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,157,583.
3	Revenue less expenses. Subtract line 2 from line 1	3	306,114.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	20,239,117.
5	Net unrealized gains (losses) on investments	5	-712,844.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	19,832,387.

Part XII Financial Statements and Reporting

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

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

Form 990 (2021)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization: Women's Foundation of California
Employer identification number: 94-2752421

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 [] A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 [] A school described in section 170(b)(1)(A)(ii).
3 [] A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 [] A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
5 [] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
6 [] A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 [] A community trust described in section 170(b)(1)(A)(vi).
9 [] An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture.
10 [] An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions...
11 [] An organization organized and operated exclusively to test for public safety.
12 [] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations...
a [] Type I. A supporting organization operated, supervised, or controlled by its supported organization(s)...
b [] Type II. A supporting organization supervised or controlled in connection with its supported organization(s)...
c [] Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s)...
d [] Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated...
e [] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

Table with 6 main columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support.

Total

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4174380.	12878835.	13448852.	12041268.	10407455.	52950790.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	4174380.	12878835.	13448852.	12041268.	10407455.	52950790.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						16008139.
6 Public support. Subtract line 5 from line 4.						36942651.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	4174380.	12878835.	13448852.	12041268.	10407455.	52950790.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	211,218.	209,961.	129,268.	45,960.	86,455.	682,862.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						53633652.
12 Gross receipts from related activities, etc. (see instructions)					12	279,725.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	68.88	%
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	66.89	%
16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	▶ <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	▶ <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	▶ <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	▶ <input type="checkbox"/>		

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

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

Section A. Public Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support. (Add lines 9, 10c, 11, and 12.)

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

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2020 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2020 Schedule A, Part III, line 17 18%.

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls... b A family member... c A 35% controlled entity...

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity... Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s)...

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year... Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected... Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice...

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test... Row 2: Activities Test. Answer lines 2a and 2b below. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below.

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

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

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

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

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

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2021		
a	From 2016		
b	From 2017		
c	From 2018		
d	From 2019		
e	From 2020		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2021 distributable amount		
i	Carryover from 2016 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2021 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2021 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2022. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2017		
b	Excess from 2018		
c	Excess from 2019		
d	Excess from 2020		
e	Excess from 2021		

Part VI

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

PUBLIC COPY

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

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

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

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

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

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

Name of organization Women's Foundation of California	Employer identification number 94-2752421
---	---

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ▶ \$ _____
- 3 Volunteer hours for political campaign activities _____

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)	12,810.													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	2,779.													
c	Total lobbying expenditures (add lines 1a and 1b)	15,589.													
d	Other exempt purpose expenditures	8,819,800.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	8,835,389.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.	591,769.	
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	147,942.													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount	384,596.	844,815.	518,695.	591,769.	2,339,875.
b Lobbying ceiling amount (150% of line 2a, column(e))					3,509,813.
c Total lobbying expenditures	481,185.	222,493.	11,650.	15,589.	730,917.
d Grassroots nontaxable amount	96,149.	211,204.	129,674.	147,942.	584,969.
e Grassroots ceiling amount (150% of line 2d, column (e))					877,454.
f Grassroots lobbying expenditures	86,333.	4,450.	9,200.	12,810.	112,793.

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

Table with 3 columns: (a) Yes, (a) No, (b) Amount. Rows include questions about lobbying activities like volunteers, paid staff, media, mailings, etc.

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

Table with 3 columns: Question, Yes, No. Rows include questions about dues, lobbying expenditures, and carryover.

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

Table with 3 columns: Question, Yes, No. Rows include questions about dues, section 162(e) expenditures, and carryover.

Part IV Supplemental Information

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

Blank lines for providing supplemental information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization **Women's Foundation of California** Employer identification number **94-2752421**

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

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

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

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

(ii) Assets included in Form 990, Part X

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

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

b Assets included in Form 990, Part X

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	4,684,051.	1,139,365.	1,151,933.	1,166,746.	1,176,038.
b Contributions	429,572.	3,133,391.			
c Net investment earnings, gains, and losses	-547,141.	411,295.	73,232.	70,987.	76,508.
d Grants or scholarships					
e Other expenditures for facilities and programs			85,800.	85,800.	85,800.
f Administrative expenses					
g End of year balance	4,566,482.	4,684,051.	1,139,365.	1,151,933.	1,166,746.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment 100 %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| (i) Unrelated organizations | | X |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		44,100.	41,160.	2,940.
d Equipment		28,155.	25,958.	2,197.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 5,137.

Part VII Investments - Other Securities.

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

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include Financial derivatives, Closely held equity interests, and Other (A-H).

Part VIII Investments - Program Related.

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

Table with 3 columns: (a) Description of investment, (b) Book value, (c) Method of valuation. Rows numbered 1 through 9.

Part IX Other Assets.

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

Table with 2 columns: (a) Description, (b) Book value. Rows numbered 1 through 9.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

Table with 2 columns: (a) Description of liability, (b) Book value. Row 1 includes Federal income taxes. Rows numbered 1 through 9.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... [X]

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

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

1	Total revenue, gains, and other support per audited financial statements		1	9,674,107.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-712,844.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	-76,746.	
e	Add lines 2a through 2d	2e		-789,590.
3	Subtract line 2e from line 1		3	10,463,697.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	10,463,697.

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

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

1	Total expenses and losses per audited financial statements		1	10,080,837.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		0.
3	Subtract line 2e from line 1		3	10,080,837.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	76,746.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		76,746.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	10,157,583.

Part XIII Supplemental Information.

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

Part V, line 4:

The purpose is to provide support in meeting the operating and program needs of the Foundation.

Part X, Line 2:

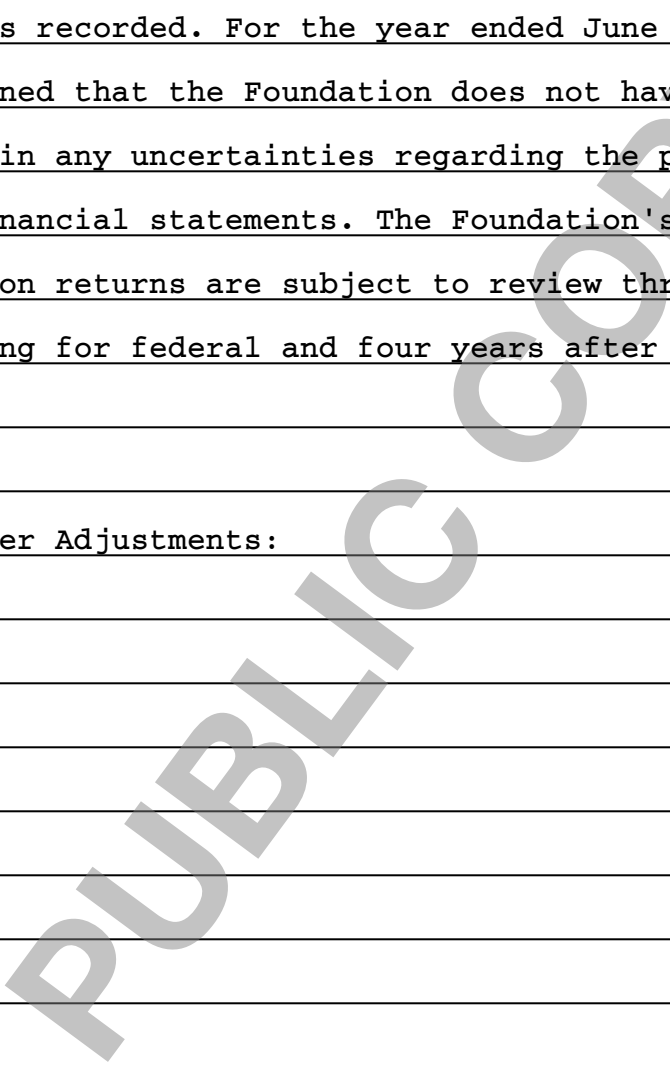
As of June 30, 2022 the Foundation has reviewed its tax positions and has concluded no reserve for uncertain tax positions is required. In the opinion of management, there is no unrelated business income subject to income taxes. The Foundation uses a comprehensive model for recognizing, measuring, presenting and disclosing in the financial statements tax positions taken or expected to be taken on a tax return. A tax position is recognized as a benefit only if it is "more likely than not" that the tax

Part XIII Supplemental Information *(continued)*

position would be sustained in a tax examination, with a tax examination being presumed to occur. The amount recognized is the largest amount of tax benefit that is greater than 50% likely of being realized on examination. For tax positions not meeting the "more likely than not" test, no tax benefit is recorded. For the year ended June 30, 2022 management has determined that the Foundation does not have any tax positions that result in any uncertainties regarding the possible impact on the Foundation's financial statements. The Foundation's exempt organization information returns are subject to review through three years after the date of filing for federal and four years after the date of filing for state.

Part XI, Line 2d - Other Adjustments:

Investment expenses



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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts			
	2	Less: Contributions			
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses			
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				

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

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

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

Part I, Line 2b, Column (v):

Paid professional fundraiser to mentor staff and develop program in legacy giving.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization **Women's Foundation of California** Employer identification number **94-2752421**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
California Partnership to End Domestic Violence - 1107 9TH STREET - SACRAMENTO, CA 95814	77-0347420	501(c)(3)	45,500.	0.			Alumn Networks: HOME Cohort
Community Overcoming Relationship Abuse - 2211 Palm Avenue - San Mateo, CA 94403	94-2481188	501(c)(3)	67,000.	0.			Alumn Networks: HOME Cohort
Empower Tehama 1805 Walnut Street Red Bluff, CA 96080	68-0330191	501(c)(3)	67,000.	0.			Alumn Networks: HOME Cohort
Family Violence Law Center 470 27th Street Oakland, CA 94612	94-2527939	501(c)(3)	67,000.	0.			Alumn Networks: HOME Cohort
Rainbow Services 453 W 7TH STREET SAN PEDRO, CA 90731	95-3855705	501(c)(3)	67,000.	0.			Alumn Networks: HOME Cohort
California Latinas for Reproductive Justice - PO Box 861766 - Los Angeles, CA 90086	26-2213868	501(c)(3)	48,000.	0.			Alums4Alums Fund

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **224.**

3 Enter total number of other organizations listed in the line 1 table **6.**

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

Schedule I (Form 990) 2021

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Social Good Fund: TEACH PO Box 5473 Richmond, CA 94805	46-1323531	501(c)(3)	48,000.	0.			Alums4Alums Fund
A New Way Of Life Reentry Project PO Box 875288 Los Angeles, CA 90087	95-4782503	501(c)(3)	30,000.	0.			Community Power Fund
ACCESS Women's Health Justice: ACCESS REPRODUCTIVE JUSTICE - PO Box 3609 - Oakland, CA 94609	51-0163201	501(c)(3)	75,000.	0.			Community Power Fund
ACT for Women and Girls PO Box 536 Visalia, CA 93279	26-0287450	501(c)(3)	30,000.	0.			Community Power Fund
Asian Health Services: California Healthy Nail Salon Collaborative - 101 8th Street, Suite 100 - Oakland, CA 94607	94-2235908	501(c)(3)	30,000.	0.			Community Power Fund
Asian Pacific Environmental Network - 426 17th St. - Oakland, CA 94612	94-3261846	501(c)(3)	30,000.	0.			Community Power Fund
Black Women for Wellness 4340 11th Avenue Los Angeles, CA 90008	95-4624707	501(c)(3)	45,000.	0.			Community Power Fund
Black Women for Wellness Action Project - PO Box 292516 - Los Angeles, CA 90029	82-2822118	501(c)(3)	15,000.	0.			Community Power Fund
California Abortion Alliance 12651 San Pablo Ave Richmond, CA 94805	46-1323531	501(c)(3)	15,000.	0.			Community Power Fund

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
California Black Women's Health Project - 9800 S. La Cienega Blvd., Suite 905 - Los Angeles, CA 90301	95-4702923	501(c)(3)	30,000.	0.			Community Power Fund
California Child Care Resource and Referral Network - 1182 Market Street - San Francisco, CA 94102	94-2718807	501(c)(3)	30,000.	0.			Community Power Fund
California Collaborative for Immigrant Justice - 1999 Harrison Street - Oakland, CA 94612	85-2856613	501(c)(3)	30,000.	0.			Community Power Fund
Center for Gender and Refugee Studies - 200 McAllister - San Francisco, CA 94102	47-2970078	501(c)(3)	30,000.	0.			Community Power Fund
Center on Race, Poverty & The Environment - 1012 Jefferson St - Delano, CA 93215	05-0557231	501(c)(3)	30,000.	0.			Community Power Fund
Communities for a Better Environment - 6325 Pacific Boulevard, Suite 300 - Huntington Park, CA 90255	94-2998086	501(c)(3)	30,000.	0.			Community Power Fund
Community Initiatives: El/La Para Translatinas - 2940 16th Street, Rm 319 - San Francisco, CA 94103	94-3255070	501(c)(3)	30,000.	0.			Community Power Fund
Community Water Center 900 W. Oak Ave. Visalia, CA 93291	80-0267674	501(c)(3)	30,000.	0.			Community Power Fund
Courage California Institute 7119 West Sunset Boulevard Los Angeles, CA 90046	27-0343297	501(c)(3)	30,000.	0.			Community Power Fund

Schedule I (Form 990)

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

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Environmental Health Coalition 2727 Hoover Ave. National City, CA 91950	95-3798792	501(c)(3)	30,000.	0.			Community Power Fund
Equal Rights Advocates 611 MISSION ST SAN FRANCISCO, CA 94105	23-7217027	501(c)(3)	30,000.	0.			Community Power Fund
Equality Alliance of San Diego County - PO Box 12266 - San Diego, CA 92112	26-1712580	501(c)(3)	15,000.	0.			Community Power Fund
Essie Justice Group 1700 Broadway, Suite 200 Oakland, CA 94612	80-0956021	501(c)(3)	30,000.	0.			Community Power Fund
Forward Together 300 Frank Ogawa Plaza Oakland, CA 94612	94-3311784	501(c)(3)	30,000.	0.			Community Power Fund
Friendship House Association of American Indians - 56 Julian Avenue - San Francisco, CA 94103	23-7097915	501(c)(3)	25,000.	0.			Community Power Fund
Independent Arts & Media: El Tmpano - PO Box 420442 - San Francisco, CA 94142	94-3355076	501(c)(3)	10,000.	0.			Community Power Fund
Khmer Girls in Action 1085 Redondo Ave Long Beach, CA 90804	27-3087079	501(c)(3)	30,000.	0.			Community Power Fund
La Cocina 2948 Folsom St. San Francisco, CA 94110	59-3838549	501(c)(3)	30,000.	0.			Community Power Fund

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Lyon-Martin Community Health Services - 1735 Mission St. - San Francisco, CA 94103	86-3008459	501(c)(3)	20,000.	0.			Community Power Fund
Mixteco Indigena Community Organizing Project - PO BOX 20543 - Oxnard, CA 93034	30-0045901	501(c)(3)	42,000.	0.			Community Power Fund
Mujeres Unidas y Activas 3543 18th St # 2 San Francisco, CA 94110	20-2986926	501(c)(3)	42,000.	0.			Community Power Fund
Northern California Grantmakers 160 Spear Street San Francisco, CA 94105	94-2761355	501(c)(3)	10,000.	0.			Community Power Fund
Omprakash Foundation: Feed Black Futures - 2311 N 45th St - Seattle, WA 98103	20-8655418	501(c)(3)	30,000.	0.			Community Power Fund
Partnership for the Advancement of New Americans - 4089 Fairmount Ave., - San Diego, CA 92105	47-5299457	501(c)(3)	30,000.	0.			Community Power Fund
Philanthropic Ventures Foundation: Yuri Kochiyama Solidarity Fund - 1222 Preservation Park Way - Oakland, CA 94612	94-3136771	501(c)(3)	20,000.	0.			Community Power Fund
Regents of the UC Berkeley: Center on Reproductive Rights & Justice - UC Berkeley 110 Sproul Hall #5800 Berkeley, CA 94720 - Berkeley, CA	94-6002123	501(c)(3)	30,000.	0.			Community Power Fund
Social Environmental Entrepreneurs: Brown Issues - 23564 Calabasas Road - Calabasas, CA 91302	95-4116679	501(c)(3)	30,000.	0.			Community Power Fund

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Sogorea Te Land Trust 2501 Harrison St. Oakland, CA 94612	82-4415931	501(c)(3)	30,000.	0.			Community Power Fund
St. James Infirmary: The Transgender District - 1067 Market St, Suite 2001 - San Francisco, CA 94103	94-3330568	501(c)(3)	30,000.	0.			Community Power Fund
Starting Over, Inc. 6355 Riverside Ave. Riverside, CA 92506	90-0455003	501(c)(3)	33,000.	0.			Community Power Fund
The National Health Law Program, Inc - 3701 Wilshire Blvd. - Los Angeles, CA, CA 90010	95-3080947	501(c)(3)	15,000.	0.			Community Power Fund
Tides Center: California Coalition for Reproductive Freedom - 1012 Torney Avenue - San Francisco, CA 94129	94-3213100	501(c)(3)	50,000.	0.			Community Power Fund
Tides Center: People Organizing to Demand Environmental & Economic Rights - 1015 Torney Avenue - San Francisco, CA 94129	94-3213100	501(c)(3)	30,000.	0.			Community Power Fund
Tides Foundation: Inland Empowerment Fund - 1017 Torney Avenue - San Francisco, CA 94129	51-0198509	501(c)(3)	15,000.	0.			Community Power Fund
Tides Foundation: La Defensa 1019 Torney Avenue San Francisco, CA 94129	51-0198509	501(c)(3)	35,000.	0.			Community Power Fund
Time For Change Foundation 2164 N. Mountain View Ave. San Bernardino, CA 92405	52-2405277	501(c)(3)	30,000.	0.			Community Power Fund

Schedule I (Form 990)

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

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Transgender, Gender Variant, Intersex Justice Project - 370 Turk St., #370 - San Francisco, CA 94102	85-3693121	501(c)(3)	30,000.	0.			Community Power Fund
Urban Tilth 323 Brookside Dr Richmond, CA 94801	20-4124161	501(c)(3)	30,000.	0.			Community Power Fund
Women's Health Specialists 1901 Victor Avenue Redding, CA 96002	94-2259357	501(c)(3)	45,000.	0.			Community Power Fund
Young Women's Freedom Center 832 Folsom Street, Suite 700 San Francisco, CA 94107	94-3227681	501(c)(3)	30,000.	0.			Community Power Fund
California Community Foundation: Harness - 221 S FIGUEROA ST STE 400 - LOS ANGELES, CA 90012	95-3510055	501(c)(3)	200,000.	0.			Culture Change Fund
Center for Cultural Power 360 GRAND AVE #146 OAKLAND, CA 94610	45-3154473	501(c)(3)	201,193.	0.			Culture Change Fund
Feminist Women's Health Center 1924 Cliff Valley Way Atlanta, GA 30329	58-1273243	501(c)(3)	50,000.	0.			Culture Change Fund
Forward Impact: Represent Justice 777 South Alameda Street Los Angeles, CA 90021	83-1501685	501(c)(3)	15,000.	0.			Culture Change Fund
Freedom Inc.: Black Feminist Future - 141 Mangum Street SW, Unit 302A-B - Atlanta, GA 30313	43-2023570	501(c)(3)	100,000.	0.			Culture Change Fund

Schedule I (Form 990)

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

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Harness Inc. 4640 Admiralty Way 5th Floor Marina del Rey, CA 90292	30-0994824	501(c)(3)	55,000.	0.			Culture Change Fund
Hopewell Fund 1828 L Street NW Suite 300A Washington, DC 20016	47-3681860	501(c)(3)	50,000.	0.			Culture Change Fund
International Documentary Association - 7623 Outlook Avenue - Oakland, CA 94605	46-5751853	501(c)(3)	10,000.	0.			Culture Change Fund
Marcus Foster Educational Institute: Artist As First Responder - 2000 Franklin St - Oakland, CA 94612	23-7357906	501(c)(3)	50,000.	0.			Culture Change Fund
Michigan Voices 2727 2nd Avenue Suite 109 Detroit, MI 48221	83-0612165	501(c)(3)	100,000.	0.			Culture Change Fund
Mothering Justice 607 Shelby Street Detroit, MI 48226	45-3740989	501(c)(3)	75,000.	0.			Culture Change Fund
National Asian Pacific American Women's Forum - PO Box 13255 - Chicago, IL 60613	36-4799986	501(c)(3)	75,000.	0.			Culture Change Fund
Neo Philanthropy: We Testify 45 West 36th Street 6th Floor New York, NY 10018	13-3191113	501(c)(3)	140,000.	0.			Culture Change Fund
New Venture Fund: IllumiNative 1828 L Street NW Suite 300A Washington, DC 20036	20-5806345	501(c)(3)	205,000.	0.			Culture Change Fund

Schedule I (Form 990)

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

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New Venture Fund: The League 1828 L Street NW Suite 300A Washington, DC 20036	20-5806345	501(c)(3)	200,000.	0.			Culture Change Fund
SisterSong Inc.: Women of Color Reproductive Justice Collective - PO Box 94408 - Atlanta, GA 30377	51-0544927	501(c)(3)	150,000.	0.			Culture Change Fund
SPARK Reproductive Justice Now! 1065 RALPH DAVID ABERNATHY BLVD SW Atlanta, GA 30310	58-1872316	501(c)(3)	50,000.	0.			Culture Change Fund
Tides Foundation: Working Families Fund at Tides Foundation - 1012 Torney Avenue - San Francisco, CA 94129	51-0198509	501(c)(3)	10,000.	0.			Culture Change Fund
Unite for Reproductive & Gender Equity - 1012 14th St NW Suite 305 - Washington, DC 20005	52-1772575	501(c)(3)	75,000.	0.			Culture Change Fund
Women Engaged 1530 Dekalb Avenue Atlanta, GA 30307	47-3911650	501(c)(3)	100,000.	0.			Culture Change Fund
Young Scholars For Academic Empowerment: TruEvolution - 4175 Brockton Ave - Riverside, CA 92501	26-2350778	501(c)(3)	20,000.	0.			Culture Change Fund
Black Emotional and Mental Health Collect - 1400 N EDMONT 303 - LOS ANGELES, CA 90027	81-3138233	501(c)(3)	50,000.	0.			Me Too Movement
FreeFrom 12405 VENICE BLVD SUITE 422 LOS ANGELES, CA 90066	47-5033123	501(c)(3)	50,000.	0.			Me Too Movement

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
1736 Family Crisis Center 2116 Arlington Avenue, Suite 200 Los Angeles, CA 90018	95-3989251	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Alliance Against Family Violence and Sexual Assault - 1921 19th Street - Bakersfield, CA 93301	95-3604240	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Alliance for Community Transformations - PO Box 2075 - Mariposa, CA 95338	77-0272319	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Alpha House PO BOX 712 Taft, CA 93268	77-0366593	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Antelope Valley Domestic Violence Council - P.O. Box 2980 - Lancaster,, CA 93539	95-3582588	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Asian Americans for Community Involvement of Santa Clara County - 2400 Moorpark Ave - San Jose, CA 95128	94-2292491	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Asian Women's Shelter 3543 18th Street #19 San Francisco, CA 94110	94-3030212	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Catalyst Domestic Violence Services - P.O. Box 4184 - Chico, CA 95927	94-2587378	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Catholic Charities of Los Angeles: Good Shepherd Shelter - 2561 W. Venice Blvd - Los Angeles, CA 90019	95-1690973	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention

Schedule I (Form 990)

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

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Center For A Non Violent Community 542 W Stockton Street Sonora , CA 95370	77-0447369	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Center for Community Solutions 4508 Mission Bay Drive San Diego, CA 92109	95-6379598	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Center for Domestic Peace 734 A Street San Rafael, CA 94901	94-2415856	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Center for the Pacific-Asian Family, Inc. - 3424 Wilshire Blvd., Suite 1000 - Los Angeles, CA 90010	95-3532351	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Central California Family Crisis Center - P O Box 2033 - Porterville, CA 93258	94-2632969	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Centro La Familia Advocacy Services, Inc - 302 Fresno Street - Fresno, CA 93706	77-0310310	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Child & Family Center 21545 Centre Pointe Parkway Santa Clarita, CA 91350	95-3941342	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Coalition for Family Harmony 1030 North Ventura Road Oxnard, CA 93030	95-3433822	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Community Action Partnership of Madera County - 1225 Gill Avenue - Madera, CA 93637	94-1612823	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention

Schedule I (Form 990)

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Community Beyond Violence PO Box 484 Grass Valley, CA 95945	94-2688893	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Community Homeless Solutions 3087 Wittenmyer Court Marina, CA 93933	94-2525231	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Community Resource Center 650 2nd Street Encinitas, CA 92024	95-3497926	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Community Solutions for Children Families and Individuals - 9015 Murray Ave., #100 - Gilroy, CA 95020	23-7351215	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Community United Against Violence 427 S Van Ness Ave. San Francisco, CA 94103	94-2758154	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Cornerstone Community Development Corporation: Building Futures with Women and C - 1840 Fairway Drive - San Leandro, CA 94577	94-3100741	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Crisis Intervention Services: Sierra Community House - P.O. Box 1232 - Kings Beach, CA 96143	94-2985554	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
DeafHope 470 27th Street Oakland, CA 94612	20-0015196	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Desert Sanctuary Inc. 703 E. Main Street Barstow, CA 92311	95-3837425	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention

Schedule I (Form 990)

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Domestic Violence Solutions for Santa Barbara County - 411 E. Canon Perdido #12 - Santa Barbara, CA 93101	95-1234314	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Donaldina Cameron House 920 Sacramento Street San Francisco, CA 94108	94-1618605	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
DOVES of Big Bear Valley 41943 Big Bear Blvd., PO Box 3646 Big Bear Lake, CA 92315	33-0109115	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
East Los Angeles Women's Center 1431 S Atlantic Blvd Los Angeles, CA 90022	51-0204577	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Emmaus House 829 San Benito St. # 300 Hollister, CA 95023, CA 95023	77-0407292	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Empower Yolo, Inc. 175 Walnut Street Woodland, CA 95695	94-3027535	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Family Assistance Program 15075 7th Street Victorville, CA 92395	33-0107971	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Family Services of Tulare County PO Box 429 Visalia, CA 93279	94-2897970	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Haven Hills, Inc. PO Box 260 Canoga Park, CA 91305	95-3196247	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HealthRIGHT360 1563 Mission Street San Francisco, CA 94103	94-6129071	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Homeless Prenatal Program 2500 18th Street San Francisco, CA 94110	94-3146280	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
House of Ruth Inc 599 N Main St Pomona, CA 91768	95-3276033	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Human Response Network P.O. Box 2370 Weaverville, CA 96093	68-0032716	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Humboldt Domestic Violence Services - P.O. Box 969 - Eureka, CA 95502	94-2429700	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Indian Health Council, Inc. 50100 Golsh Rd Valley Center, CA 92082	95-2506788	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Interface Children & Family Services - 4001 Mission Oaks Blvd Ste I - Camarillo, CA 93012	95-2944459	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Interval House 6615 East Pacific Coast Highway, Su Long Beach, CA 90803	95-3389113	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Jenesse Center, Inc. 3761 Stocker St., Suite 100 Los Angeles, CA 90008	95-3652529	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Jewish Family Service of Los Angeles - 330 N. Fairfax - Los Angeles, CA 90036	95-1691013	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Kene Me-Wu Family Healing Center, Inc. - P.O. Box 4605 - Sonora, CA 95370	77-0518294	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Kings Community Action Organization - 1130 N 11TH AVE - Hanford, CA 93230	94-1604455	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Korean American Family Services, Inc. - 3727 W. 6th Street - Los Angeles, CA 90020	95-3899329	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Korean Community Center of the East Bay - 97 Callan Avenue - San Leandro, CA 94577	94-2503925	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
La Casa de las Madres 1269 Howard Street San Francisco, CA 94103	94-2330864	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Lake Family Resource Center 5350 Main Street Lakeport, CA 95451	68-0353914	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Lassen Family Services, Inc. 1306 Riverside Drive Susanville, CA 96130	94-2691072	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Laura's House 33 Journey Suite 150 Aliso Viejo, CA 92656	33-0621826	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LICENSE TO FREEDOM 131 AVOCADO AVE EL CAJON, CA 92020	20-1057775	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Live Violence Free 2941 Lake Tahoe Blvd South Lake Tahoe, CA 96150	94-2598256	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
LTSC Community Development Corporation - 231 E. 3rd St. Ste. G106 - Los Angeles, CA 90013	95-4444102	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Maitri P.O. Box 697 Santa Clara, CA 95052	94-3132087	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Marjaree Mason Center, Inc. 1600 M Street Fresno, CA 93721	94-1156639	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Monarch Services: Servicios Monarca - 233 East Lake Avenue - Watsonville, CA 95076	94-2462783	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Morongo Basin Unity Home Inc. 7237 Joshua Lane Yucca Valley, CA 92286	33-0126790	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
My Sister's House 3053 Freeport #120 Sacramento, CA 95818	68-0464114	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Narika P O Box 1708 Fremont, CA 94538	94-3162871	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEWS 1141 Pear Tree Lane Napa, CA 94558	94-2745889	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Next Door Solutions to Domestic Violence - 234 E. Gish Road, Suite 200 - San Jose, CA 95112	94-2420708	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Niswa Association Inc 25830 S western ave harbor city, CA 90710	33-0447226	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Operation Care 817 Court Street St 12 Jackson, CA 95642	94-2797327	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Option House, Inc. 813 North D Street, Ste. A San Bernardino, CA 92401	95-3760212	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Peace Over Violence 1541 Wilshire Blvd. Los Angeles, CA 90017	51-0179305	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Plumas Rural Services 711 E. Main Street Quincy, CA 95971	94-2722880	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Project Sanctuary, Inc PO Box 450 Ukiah, CA 95482	94-2477782	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
RISE San Luis Obispo County PO Box 630 Paso Robles, CA 93447	95-3415650	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Riverside County Coalition for Alternatives to Domestic - P.O. Box 910 - Riverside, CA 92502	95-3212844	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Ruby's Place 20880 Baker Rd Castro Valley, CA 94546	94-2212241	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Rural Human Services 286 M Street Crescent City, CA 95531	94-2735346	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Safe Alternatives for Everyone 28910 Pujol Street Temecula, CA 92590	91-1962947	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Safe Alternatives to Violent Environments - 1900 Mowry Ave., #201 - Fremont, CA 94538	94-2520559	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
SafeQuest Solano 1261 Travis Blvd Fairfield, CA 94533	94-2853669	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Saint John's Program for Real Change - 2443 Fair Oaks Boulevard, Suite 369 - Sacramento, CA 95825	68-0132934	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Shasta Women's Refuge, Inc. P.O. Box 991060 Redding, CA 96099	94-2663045	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Shepherd's Door Domestic Violence Resource Center - P.O. Box 40441 - Pasadena, CA 91104	91-2077919	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Sikh Family Center 751 Laurel St. #410 San Carlos, CA 94070	46-2237621	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Siskiyou Domestic Violence & Crisis Center - P.O. Box 688 - Yreka, CA 96097	68-0025514	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
South Asian Helpline And Referral Agency - 17100 Pioneer Blvd. - Artesia, CA 90701	26-0736033	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
South Bay Community Services 430 F Street Chula Vista, CA 91910	95-2693142	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Southern California Alcohol and Drug Programs - 11500 Paramount Blvd - Downey, CA 90241	23-7228780	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Stand Up Placer, Inc. PO Box 5462 Auburn, CA 95604	94-2578871	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
STAND! For Families Free of Violence - 1410 Danzig Plaza - Concord, CA 94520	94-2476576	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Strong Hearted Native Women's Coalition, Inc. - PO Box 2488 - Valley Center, CA 92082	56-2613191	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Su Casa - Ending Domestic Violence 3750 E. Anaheim Street, ste 100 Long Beach, CA 90804	95-3495175	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Center for Violence-Free Relationships - 344 Placerville Drive - Placerville, CA 95667	94-2628939	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
The People Concern 2116 Arlington Ave. Los Angeles, CA 90018	95-6143865	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
The Resource Connection of Amador & Calaveras Counties - P.O. Box 919 - San Andreas, CA 95249	94-2705790	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
The San Francisco Particular Council Of The Society Of St. Vincent de Paul - 1175 Howard Street - San Francisco, CA 94104	94-1571017	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Training, Employment & Community Help, Inc. - 112 E 2nd Street - Alturas, CA 96101	94-2578204	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Tri-Valley Haven 3663 Pacific Avenue Livermore, CA 94550	94-2462357	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Victor Valley Domestic Violence Inc. - P.O. Box 2825 - Victorville, CA 92392	93-1067826	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Walnut Avenue Family & Women's Center - 303 Walnut Avenue - Santa Cruz, CA 95010	94-1186197	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Westside Domestic Violence Shelter 311 S. Villa Ave Willows, CA 95988	26-4736411	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Wild Iris Family Counseling & Crisis Center - 150 N Main st - Bishop, CA 93514	77-0039382	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
WomanHaven 510 Main Street Suite 106 El Centro, CA 92243	95-3220740	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Women Organized to Make Abuse Nonexistent, Inc. - 26 Boardman Pl - San Francisco, CA 94103	94-2607750	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Women's & Children's Crisis Shelter - 13203 HADLEY ST, SUITE 103 - WHITTIER, CA 90601	95-3315186	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Women's Center-High Desert, Inc. 134 S China Lake Blvd. Ridgecrest, CA 93555	95-3340786	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Women's Center-Youth & Family Services - 620 N. San Joaquin Street - Stockton, CA 95202	94-2341360	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Women's Resource Center 1963 Apple Street Oceanside, CA 92054	95-2932237	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Women's Shelter Program Inc of San Luis Obispo County:Lumina Alliance - 51 Zaca Lane, Suite 150 - SAN LUIS OBISPO, CA 93401	95-3370729	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Women's Transitional Living Center, Inc. - PO BOX 916 - Fullerton, CA 92836	51-0201813	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WomenShelter of Long Beach PO Box 17098 Long Beach, CA 90807	95-1644058	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Young Women's Christian Association of Silicon Valley - 375 South Third Street - San Jose, CA 95112	94-1186196	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Young Women's Christian Association of Sonoma County - PO Box 3506 - Santa Rosa, CA 95402	94-2347428	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
YWCA Glendale and Pasadena 735 Lexington Dr Glendale, CA 91206	95-1644057	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
YWCA Monterey County 11 Quail Run Circle, Ste. 203 Salinas, CA 93907	94-1732598	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
YWCA of San Diego 1012 C Street San Diego, CA 92101	95-1661119	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
YWCA of San Gabriel Valley 943 N. Grand Avenue Covina, CA 91724	95-1641967	501(c)(3)	12,000.	0.			Relief and Resilience Fund: Domestic Violence Prevention
Haven Women's Center of Stanislaus 618 13th Street Modesto, CA 95354	94-2499361	501(c)(3)	67,000.	0.			Alumn Networks: HOME Cohort
Human Options, Inc. 5540 TRABUCO ROAD SUITE 100 Irvine, CA 62620	95-3667817	501(c)(3)	67,000.	0.			Alumn Networks: HOME Cohort

Schedule I (Form 990)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

Part I, Line 2:

The Women's Foundation of California monitors grants to organizations to ensure proper use of funds by verifying grantees' eligibility to receive the funds, requiring written requests and budgets from prospective grantees, documenting the selection criteria used to award the grants, and requiring regular reports on the use of grant funds and evaluation of the programs.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

2021

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

Name of the organization: **Women's Foundation of California**
Employer identification number: **94-2752421**

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2021

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) Surina Khan Director & Chief Executive	(i)	271,194.	0.	0.	12,166.	1,272.	284,632.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) Beatriz Vieira Chief Strategist of Programs	(i)	187,264.	0.	0.	8,510.	14,694.	210,468.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) Christine Reyes Chief Financial Officer	(i)	172,814.	0.	0.	8,060.	19,405.	200,279.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) Stephanie Green Chief Strategist of Development	(i)	155,782.	0.	0.	7,166.	23,231.	186,179.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) Kamika Dunlap Chief Strategist of Commun	(i)	162,732.	0.	0.	7,382.	900.	171,014.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization **Women's Foundation of California** Employer identification number **94-2752421**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	2	417,316.	Market value
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

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

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

Women's Foundation of California

Employer identification number

94-2752421

Form 990, Part I, Line 1, Description of Organization Mission:

advance gender, racial, and economic justice.

Form 990, Part VI, Section B, line 11b:

The Finance Committee reviews and approves the 990 following review and approval by the Chief Executive Officer, and the Chief Financial Officer.

The complete Form 990 is then forwarded to the full board of directors for review prior to filing with the IRS.

Form 990, Part VI, Section B, Line 12c:

Each interested person shall disclose to the Board, or to the Executive Committee or the Governance Committee or other Board Committee empowered to approve a specific transaction or type of transaction ("Committee"), all material facts regarding his, her, or its interest (including relevant affiliations) in the transaction. The interested person shall make that disclosure promptly upon learning of the proposed transaction. Insiders shall make disclosures on behalf of interested persons related to them regardless of whether the related interested person does so. The Board or Committee shall determine if a conflict of interest exists. The insider(s) and any other interested person(s) involved with the transaction shall not be present during the Board or Committee's discussion or determination of whether a conflict of interest exists. Once a conflict of interest has been found, the Board or Committee shall follow the procedures to decide what measures are needed to protect the Foundation's interests in light of the nature and seriousness of the conflict, to decide whether to enter into the transaction and, if so, to ensure that the terms of the transaction are

Name of the organization Women's Foundation of California	Employer identification number 94-2752421
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appropriate in the case of an insider who is a director, the director shall not vote on any transaction in which the director has an interest, and the remaining Board or Committee members shall decide the matter.

Form 990, Part VI, Section B, Line 15:

The Board of Directors annually sets the salary for the CEO based on annual wage and benefit surveys, regional compensation market data and annual performance reviews.

The CEO sets the salary for the CFO and Chief Strategists who are members of the Foundation's leadership team annually based on level of experience, performance, and comparison to similar organizations in a similar market. This process was last undertaken in June 2020.

Form 990, Part VI, Section C, Line 19:

Governing documents (e.g. Bylaws) and Conflict of Interest Policy are available upon request. Audited financial statements and tax Form 990 are published on our website (www.womensfoundca.org). Hard copies are available upon request.