Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

2022

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning 01-01-2022 , and ending 12-31-2022

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
Public Health Institute

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
555 12th Street 600

City or town, state or province, country, and ZIP or foreign postal code
Oakland, CA 946074046

D Employer identification number
94-1646278

E Telephone number
(510) 285-5500

G Gross receipts $ 256,663,773

F Name and address of principal officer:
Dr Mary A Pittman
555 12th Street 600
Oakland, C A 946074046

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions.

H(c) Group exemption number ▶

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

J Website: ▶ www.PHI.org

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1964

M State of legal domicile: CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
PUBLIC HEALTH INSTITUTE GENERATES AND PROMOTES RESEARCH, LEADERSHIP AND PARTNERSHIPS TO BUILD CAPACITY FOR STRONG PUBLIC HEALTH POLICY, PROGRAMS, SYSTEMS AND PRACTICES.

2 Check this box ▶ ☐ 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**	12
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	10
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	**5**	1,353
6	Total number of volunteers (estimate if necessary)	**6**	8
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	**7b**	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	154,496,751	150,367,058
9	Program service revenue (Part VIII, line 2g)	89,046,134	104,687,866
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	84,081	-76,666
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	243,626,966	254,978,258
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	87,548,563	77,480,531
14	Benefits paid to or for members (Part IX, column (A), line 4)		0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	126,162,567	116,482,184
16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶2,022		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	39,434,798	58,836,155
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	253,145,928	252,798,870
19	Revenue less expenses. Subtract line 18 from line 12	-9,518,962	2,179,388

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	88,444,791	147,605,072
21	Total liabilities (Part X, line 26)	38,638,413	96,139,293
22	Net assets or fund balances. Subtract line 21 from line 20	49,806,378	51,465,779

Part II Signature Block

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

Sign Here

Signature of officer — Date: 2023-11-09

Derrick Browning Interim Chief Financial Officer
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
				P01578407

Firm's name ▶ CROWE LLP — Firm's EIN ▶ 35-0921680

Firm's address ▶ 575 Market Street Suite 3300
San Francisco, CA 941055829 — Phone no. (415) 576-1100

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:

PUBLIC HEALTH INSTITUTE GENERATES AND PROMOTES RESEARCH, LEADERSHIP AND PARTNERSHIPS TO BUILD CAPACITY FOR STRONG PUBLIC HEALTH POLICY, PROGRAMS, SYSTEMS AND PRACTICES.

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

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 66,113,489 including grants of $ 36,209,011) (Revenue $ 66,113,489)

CHILDREN'S ONCOLOGY GROUP COORDINATING CENTER, MONROVIA, CA, AT THE PUBLIC HEALTH INSTITUTE, SERVES AS THE CHILDREN'S ONCOLOGY GROUP COORDINATING CENTER (COGCC) IN MONROVIA, CALIFORNIA. COGCC IS THE PRIMARY PROGRAM HEADQUARTERS FOR THE OPERATIONS OF THE CHILDREN'S ONCOLOGY GROUP (COG), PROVIDING ADMINISTRATIVE AS WELL AS STATISTICAL AND DATA MANAGEMENT SUPPORT. THE CHILDREN'S ONCOLOGY GROUP, A CLINICAL TRIALS GROUP SUPPORTED BY THE NATIONAL CANCER INSTITUTE, IS THE WORLD'S LARGEST ORGANIZATION DEVOTED EXCLUSIVELY TO CHILDHOOD AND ADOLESCENT CANCER RESEARCH. COG BRINGS TOGETHER MORE THAN 10,000 EXPERTS IN CHILDHOOD CANCER AT MORE THAN 200 INSTITUTIONS. THEY SUPPORT CLINICAL RESEARCH TRIALS THAT STUDY AND DETERMINE THE UNDERLYING BIOLOGY OF CHILDHOOD CANCERS, EMERGING TREATMENTS, SUPPORTIVE CARE, AND SURVIVORSHIP, AND CARE FOR 80-90% OF THE 13,500 CHILDREN AND ADOLESCENTS DIAGNOSED WITH CANCER EACH YEAR. COG IS STRUCTURED TO MAXIMIZE EFFICIENCY, PROMOTE COLLABORATION, AND RETAIN THE FLEXIBILITY TO FOCUS RESOURCES ON THE MOST PROMISING SCIENTIFIC ADVANCES. EXTENSIVE COLLABORATION AND INTEGRATION ARE FOUND THROUGHOUT COG'S ORGANIZATION. FOR EXAMPLE, THE STRATEGIC DECISION TO ESTABLISH THE FREESTANDING COG COORDINATING CENTER COMPOSED OF COG'S OPERATIONS AND KEY COMPONENTS OF COG'S STATISTICS & DATA CENTER, HELPS ENSURE THE LONG-TERM STABILITY OF THE COG RESEARCH ENTERPRISE AND ALLOWS FOR UNINTERRUPTED RESEARCH OPERATIONS THROUGH LEADERSHIP TRANSITIONS. AT ANY GIVEN TIME, THE COG IS SUPPORTING APPROXIMATELY 50 STUDIES IN DEVELOPMENT, 80 STUDIES ACTIVELY ENROLLING NEW SUBJECTS, AND 100 STUDIES CLOSED TO ENROLLMENT FOR WHICH DATA COLLECTION IS COMPLETED AND DATA ANALYSIS IS IN PROCESS. ANNUALLY, THE COG COORDINATING CENTER FACILITATES APPROXIMATELY 3,200 ENROLLMENTS ONTO COG THERAPEUTIC STUDIES AND MORE THAN 9,000 ENROLLMENTS ONTO NON-THERAPEUTIC STUDIES, WHICH INCLUDE BIOLOGY, SUPPORTIVE CARE, EPIDEMIOLOGY, QUALITY OF LIFE, BEHAVIORAL SCIENCE, AND LATE-EFFECT STUDIES. THE COORDINATING CENTER ALSO SUPPORTS THE ONGOING FOLLOW-UP DATA COLLECTION FOR THE MORE THAN 32,000 CHILDREN ANNUALLY WHO CONTINUE TO BE EVALUATED AT COG MEMBER INSTITUTIONS FOR STUDIES ON WHICH THEY HAVE COMPLETED THERAPY. IN 2022, THE FOOD AND DRUG ADMINISTRATION (FDA) SOUGHT DATA AND FINDINGS FOR BRENTUXIMAB VEDOTIN(BV, A DRUG THAT COULD BE USED WITH CHEMOTHERAPY FOR PATIENTS WITH CLASSICAL HODGKIN LYMPHOMA). THE FDA UTILIZED DATA FROM THE CHILDREN'S ONCOLOGY GROUP RANDOMIZED TRIAL OF 600 PATIENTS WITH HIGH-RISK HODGKIN LYMPHOMA. RESEARCH FINDINGS INDICATED THAT BV WAS AN EFFECTIVE MEDICATION FOR TREATING CHILDREN WITH CANCER AND INFORMED THE FDA'S APPROVAL OF THE DRUG-EXPANDING ACCESS TO THIS EFFECTIVE MEDICATION FOR PEDIATRIC CANCER PATIENTS. 80% OF CHILDREN WITH CANCER NOW SURVIVE 5 YEARS OR MORE AS A RESULT OF EFFORTS OF THE CHILDREN'S ONCOLOGY GROUP AND ITS PREDECESSORS.

4b (Code:) (Expenses $ 29,410,262 including grants of $ 1,677,742) (Revenue $ 18,682,728)

SUSTAINING TECHNICAL AND ANALYTIC RESOURCES (STAR) IS A PROGRAM OF THE PUBLIC HEALTH INSTITUTE IMPLEMENTED IN PARTNERSHIP WITH THE UNIVERSITY OF CALIFORNIA, SAN FRANCISCO (UCSF) AND THE ASPEN MANAGEMENT PARTNERSHIP FOR HEALTH (AMP HEALTH), AND SUPPORTED BY THE UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT (USAID). STAR OFFERS PAID FELLOWSHIPS AND INTERNSHIPS FOR DYNAMIC, MULTIDISCIPLINARY, MISSION-DRIVEN LEADERS AT ALL CAREER LEVELS. STAR PROVIDES PARTICIPANTS WITH IMMERSIVE EXPERIENCES AT GLOBAL HEALTH ORGANIZATIONS AND INSTITUTIONS TO BUILD CAPACITY AND CONTRIBUTE TECHNICAL EXPERTISE TO ADDRESS HIGH-IMPACT NEEDS. STAR FELLOWS AND INTERNS PARTICIPATE IN CUSTOMIZED AND CURATED LEARNING ACTIVITIES TO ENHANCE KNOWLEDGE AND SKILLS GROWTH, EXPAND PROFESSIONAL NETWORKS, AND SUPPORT CAREER DEVELOPMENT. STAR PARTICIPANTS ARE PLACED AT USAID HEADQUARTERS OFFICES AND FIELD MISSIONS, UNITED NATIONS PROGRAMS, AND AT LOCAL MINISTRIES OF HEALTH. CUMULATIVELY, STAR HAS PLACED 143 FELLOWS AND 132 INTERNS, 72 OF WHICH ARE LOCAL COUNTRY NATIONALS AND 19 OF WHICH ARE THIRD COUNTRY NATIONALS, IN 34 COUNTRIES PLUS THE US. ADDITIONALLY, STAR IMPLEMENTS SPECIAL PARTNERSHIPS AND INITIATIVES TO SUPPORT USAID'S GOALS AND OBJECTIVES. ONE OF THESE IS PROMOTING AND ENHANCING DIVERSITY, EQUITY, INCLUSION, AND ACCESSIBILITY (DEIA) WITHIN THE GLOBAL HEALTH BUREAU OF USAID. A SECOND IS PROVIDING COVID-RELATED, GLOBAL TECHNICAL ASSISTANCE TO USAID PARTNERS THAT ARE IMPLEMENTING PATIENT MANAGEMENT SERVICES, SUCH AS OXYGEN THERAPY FOR PATIENTS WITH SEVERE COVID AND TESTING AND TREATMENT FOR PATIENTS WITH EARLY COVID INFECTIONS TO PREVENT SEVERE CASES. STAR IS ALSO REVIEWING THE IMPLEMENTATION OF THESE SERVICES BY USAID PARTNERS TO UNDERSTAND AND DISSEMINATE THE LEARNED LESSONS FOR IMPROVED SERVICE DELIVERY. FINALLY, STAR IS WORKING TO BUILD LEADERSHIP AND MANAGEMENT CAPACITY AMONG MALARIA AND TB TEAMS AT MINISTRIES OF HEALTH IN MULTIPLE COUNTRIES, BY EMBEDDING MANAGEMENT PARTNER CONSULTANTS WITHIN THE TEAMS TO HELP IMPROVE THEIR EFFICIENCY AND EFFECTIVENESS FOR GREATER RESULTS.

4c (Code:) (Expenses $ 19,891,649 including grants of $ 12,566,539) (Revenue $ 19,891,649)

THE PUBLIC HEALTH INSTITUTE SERVES AS THE FISCAL SPONSOR AND PARTNER FOR THE CENTER FOR WELLNESS AND NUTRITION (PHI CWN), WHICH IS HEADQUARTERED IN SACRAMENTO, CALIFORNIA. PHI CWN IS A NATIONAL LEADER IN DEVELOPING CAMPAIGNS, PROGRAMS, AND PARTNERSHIPS TO PROMOTE WELLNESS AND EQUITABLE HEALTH PRACTICES IN THE MOST VULNERABLE COMMUNITIES WORLDWIDE. PHI CWN HAS ESTABLISHED RELATIONSHIPS WITH LOCAL, STATE, NATIONAL, AND INTERNATIONAL ORGANIZATIONS, AND THROUGH EDUCATION, TRAINING, TECHNICAL ASSISTANCE, ADVOCACY, AND EVALUATION, WORKS TO MAKE HEALTH ACCESSIBLE FOR ALL. PHI CWN IS A REBRAND OF A PROGRAM THAT HAS BEEN INSTRUMENTAL FOR MORE THAN A DECADE IN ADVANCING SNAP-ED ACROSS CALIFORNIA AND USDA FNS SOUTHEASTERN REGION AND HAS LED PROJECTS TO IMPROVE PUBLIC HEALTH IN GLOBAL LOCATIONS SUCH AS PUERTO RICO, PALAU, CHEROKEE NATION, AFRICA, LATIN AMERICA, AND ASIA. PHI CWN'S WORK IS SPREAD ACROSS 40 STATES, AND IT PARTNERS WITH 377 COMMUNITY-BASED ORGANIZATIONS WORLDWIDE TO INCREASE FOOD AND NUTRITION SECURITY AND REDUCE DIET-RELATED ILLNESSES AND CHRONIC DISEASES. PHI CWN PRIORITIZES CULTURALLY ROOTED PRACTICES. FOR EXAMPLE, IT CONVENES THE CALFRESH HEALTHY LIVING (CFHL) TRIBAL AMBASSADOR COMMITTEE THAT INCLUDES MEMBERS REPRESENTING DIVERSE TRIBAL PARTNERS FROM COMMUNITIES THROUGHOUT CALIFORNIA WHO PROVIDE FEEDBACK, GUIDANCE, AND SUGGESTIONS ON NUTRITION EDUCATION MATERIALS, HEALTHY TRADITIONAL RECIPES, AND PARTNERSHIPS DEVELOPMENT TO BETTER SERVE CALIFORNIA AMERICAN INDIAN ALASKAN NATIVE COMMUNITIES. THIS COMMITTEE HAS DEVELOPED A RANGE OF NEW CULTURALLY APPROPRIATE CFHL RESOURCES THAT PROMOTE HEALTHY LIVING AND TRADITIONAL FOODS. IN 2022, PHI CWN ORGANIZED A DATA EQUITY WEBINAR SERIES, "DECOLONIZING DATA PRACTICES THROUGH INDIGENOUS EVALUATION APPROACHES," FEATURING DR. ROSE JAMES, DIRECTOR OF RESEARCH AND EVALUATION AT THE URBAN INDIAN HEALTH INSTITUTE, ATTENDED BY 810 PUBLIC HEALTH PROFESSIONALS. PHI CWN ALSO COLLABORATED WITH ABBOTT FUND'S FUTURE WELL COMMUNITIES PARTNERS TO IMPLEMENT AND EVALUATE THE HEALTHY FOOD RX PROGRAM, PROVIDING FOOD BOXES TO 760 LOW-INCOME PEOPLE DIAGNOSED WITH DIABETES IN STOCKTON, CA. IN THE SAME YEAR. PHI CWN HOSTED 32 TRAINING EVENTS WITH 1,415 ATTENDEES AND LAUNCHED THE GLOBAL NUTRITION AND PARTNERSHIPS PROGRAM TO IMPROVE HEALTH GLOBALLY. THROUGH THIS PROGRAM, PHI CWN COLLABORATES ACROSS SECTORS IN RESEARCH, EDUCATION, AND PROGRAM IMPLEMENTATION TO COMBAT MALNUTRITION BY INCREASING ACCESS TO BETTER HEALTHCARE AS WELL AS NUTRITIOUS, AFFORDABLE, AND CLIMATE-SMART FOODS PHI CWN PARTNERED WITH 27 RETAILERS AND FARMERS MARKETS, RESULTING IN THE INDIRECT SUPPORT OF 37,512 INDIVIDUALS CONNECTED TO ACCESSIBLE, AFFORDABLE FRUITS AND VEGETABLES. THE TEAM ALSO CONTRIBUTED TO THE FIELD THROUGH 16 CONFERENCE PRESENTATIONS AND THE PUBLICATION OF FIVE PEER-REVIEWED JOURNAL ARTICLES. ROOTS OF CHANGE (ROC), ALSO A PROGRAM OF PHI, PARTNERED WITH PHI CWN IN 2022 TO JOINTLY WORK ON ENSURING A HEALTHY AND ACCESSIBLE FOOD SUPPLY CHAIN. THEY ARE PART OF A COALITION THAT WILL RECEIVE $35 MILLION OVER FIVE YEARS TO DEVELOP A SYSTEM FOR TRANSPARENT CONFIRMATION OF REGENERATIVE PRACTICES BY BEEF AND BISON PRODUCERS WORLDWIDE. ROC ALSO ADVOCATED SUCCESSFULLY WITH ITS FOOD AND FARM RESILIENCE COALITION PARTNERS FOR OVER $700 MILLION IN THE 2022-23 CALIFORNIA BUDGET, INCLUDING $15 MILLION EACH FOR THE CALIFORNIA NUTRITION INCENTIVE PROGRAM, THE HEALTHY REFRIGERATION GRANT PROGRAM, AND WEATHERIZATION OF FARMWORKER HOMES.

(Code:) (Expenses $ 109,007,323 including grants of $ 27,027,239) (Revenue $)

FOR 50 YEARS, PHI HAS IMPLEMENTED RESEARCH AND PROGRAMS TO IMPROVE THE HEALTH AND WELL-BEING OF PEOPLE ACROSS CALIFORNIA, THE U.S., AND THE WORLD. PHI IS A HUB FOR PUBLIC HEALTH INNOVATION, PROVIDING SUPPORTIVE INFRASTRUCTURE, RESOURCES, AND INTELLECTUAL COMMUNITY WITH SOME OF THE BEST MINDS IN PUBLIC HEALTH. WITH OVER 100 RESEARCHERS AND PROJECT DIRECTORS - AND OVER 1000 STAFF WORLDWIDE - PHI LEADS NEW RESEARCH, TESTS NOVEL INTERVENTIONS, AND IMPLEMENTS AND BUILDS CAPACITY FOR ON-THE-GROUND PROGRAMS TO ADDRESS NEW AND EMERGING PUBLIC HEALTH PROBLEMS. FOR EXAMPLE, PHI PROGRAMS COMPRISE ONE OF THE LARGEST OBESITY NETWORKS IN THE COUNTRY, ADDRESSING AN EPIDEMIC THAT HAS REACHED COMMUNITIES IN THE U.S. AND AROUND THE WORLD, RAISING THE RISK FOR CHRONIC DISEASES LIKE CANCER, HEART DISEASE, AND DIABETES. GLOBALLY, PHI IS DISMANTLING THE BARRIERS TO HEALTH AND OPPORTUNITY EXPERIENCED BY WOMEN AND GIRLS IN THE U.S. AND CREATING GENDER EQUITY PARTNERSHIPS. PHI IS DEVELOPING WORKFORCE PIPELINE PROGRAMS TO TRAIN AND GRADUATE HEALTH CARE PROFESSIONALS REPRESENTING THE DIVERSITY OF OUR POPULATION AND WHO WILL MEET THE GROWING DEMAND FOR CARE. PHI IS ALSO AT THE FOREFRONT OF THE OPIOID EPIDEMIC, SUPPORTING LOCAL MULTI-SECTOR COALITIONS ADDRESSING PREVENTION AND NEW SUBSTANCE USE DISORDER AND BEHAVIORAL HEALTH CARE MODELS. IMPLEMENTING PROGRAMS, SYSTEMS AND RESEARCH THAT CONNECT PUBLIC HEALTH AND HEALTH CARE DELIVERY THRU NEW DESIGN METHODS AND DATA TOOLS, WE ARE BRIDGING HISTORIC GAPS IN POPULATION HEALTH. PHI SPEARHEADS TRAININGS AND SOLUTIONS TO ADDRESS CLIMATE CHANGE, WHICH, ALTHOUGH TYPICALLY FRAMED AS AN ENVIRONMENTAL ISSUE, REPRESENTS A HUGE THREAT TO HUMAN HEALTH. TOGETHER, PHI PROGRAMS ARE HELPING TO CREATE HEALTHY COMMUNITIES WHERE INDIVIDUALS CAN ACHIEVE THEIR HIGHEST POTENTIAL. THE BREADTH OF PHI EXPERTISE AND EXPERIENCE POSITIONS US AS A PREMIER PARTNER AND LEADER IN PUBLIC HEALTH.

4d Other program services (Describe in Schedule O.)
(Expenses $ 109,007,323 including grants of $ 27,027,239) (Revenue $)

4e **Total program service expenses** ▶ 224,422,723

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

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L,* Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L,* Part I	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L,* Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	345		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		Yes	

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

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	**2a**	1,353		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			**2b**	Yes
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			**3a**	No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			**3b**	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			**4a**	Yes
b	If "Yes," enter the name of the foreign country: ▶ IN See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			**5a**	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**	No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			**5c**	
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			**6a**	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			**6b**	
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			**7a**	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			**7c**	No
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			**7e**	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			**7f**	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			**7g**	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			**7h**	
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			**8**	
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?			**9a**	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			**9b**	
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	**10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	**11a**			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	**11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			**12a**	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	**12b**			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O.			**13a**	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	**13b**			
c	Enter the amount of reserves on hand	**13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?			**14a**	No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			**14b**	
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.			**15**	No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			**16**	No
17	**Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.			**17**	

Part VI **Governance, Management, and Disclosure.** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in 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 in Schedule O.	**1a**	12		
b	Enter the number of voting members included in line 1a, above, who are independent	**1b**	10		
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?		**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		**5**		No
6	Did the organization have members or stockholders?		**6**		No
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?		**7a**		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?		**8b**	Yes	
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 in Schedule O*		**9**		No

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?	**10a**		No
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?	**10b**		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	**11a**	Yes	
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*	**12a**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*	**12c**	Yes	
13	Did the organization have a written whistleblower policy?	**13**	Yes	
14	Did the organization have a written document retention and destruction policy?	**14**	Yes	
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	**15a**	Yes	
b	Other officers or key employees of the organization	**15b**	Yes	
	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?	**16a**		No
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?	**16b**		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ C A

18 Section 6104 requires an organization to make its Form 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 in Schedule O)

19 Describe in 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: ▶Derrick Browning 555 12th Street Suite 600 Oakland, C A 946074046 (510) 285-5654

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, box 6 of 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, or 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 dotted 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) Adaeze Enekwechi Vice Chair	1.0	X		X				0	0	0
(2) Dara Johnson Treseder Board Chair	1.0	X		X				0	0	0
(3) Dr Mary A Pittman President & CEO	40.0	X		X				644,344	0	61,518
(4) Santiago Muoz Secretary/Treasurer	1.0	X		X				0	0	0
(5) Afia Asamoah Board Member	1.0	X						0	0	0
(6) Andrew Pines Board Member	1.0	X						0	0	0
(7) Anthony Barrueta Board Member	1.0	X						0	0	0
(8) Nick Macchione Board Member	1.0	X						0	0	0
(9) Paul Kuehnert Board Member	1.0	X						0	0	0
(10) Radha Muthiah Board Member	1.0	X						0	0	0
(11) Sergio Gaxiola Board Member	1.0	X						0	0	0
(12) Susan Watson Program Director IV	40.0	X						202,320	0	31,814
(13) Israel Ghebretinsae Chief Financial Officer	40.0			X				302,617	0	57,056
(14) B Melange Matthews Exec VP & Chief Operating Officer	40.0				X			395,261	0	52,774
(15) David Hausner Program Director IV	40.0				X			207,985	0	55,876
(16) Leah Williams Chief Legal Officer	40.0				X			296,941	0	66,071
(17) Matthew Marsom Chief of Programs, Policy & Govt Relations	40.0				X			285,110	0	36,349

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 dotted 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) Valerie McCann Woodson Chief Human Resources Officer	40.0				X			282,939	0	52,047
(19) Amy Bloom Uniquely Skilled Sr Tech Expert	40.0					X		275,054	0	39,572
(20) Baker Maggwa Expert Advisory Professional	40.0					X		276,929	0	61,888
(21) Dorcas Muteteke Senior Technical Advisor II	40.0					X		277,051	0	27,938
(22) Doug Jutte Sr Enterprise Applications Director	40.0					X		236,095	0	25,091
(23) Raz Stevenson Senior Technical Advisor II	40.0					X		252,961	0	50,991
1b Sub-Total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶								3,935,607	0	618,985

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 ▶ 283

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

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
RESCUE AGENCY PUBLIC BENEFIT LLC 2437 MORENA BLVD SAN DIEGO, CA 92110	PROJECT CONSULTANT	10,621,304
VELOCITY GLOBAL LLC 1701 PLATTE STREET DENVER, CO 80202	PROJECT CONSULTANT	726,285
SUJATA N CHAUDHURY 4 CENTURY HILL DRIVE LATHAM, NY 12110	PROJECT CONSULTANT	487,872
DAVIDOFF COMMUNICATIONS LLC 816 MONTICELLO PLACE EVANSTON, IL 60201	TECHNICAL SUPPORT	333,700
O&G RACIAL EQUITY COLLABORATIVE LLC 624 TYVOLA ROAD SUITE 103 263 CHARLOTTE, NC 28217	TECHNICAL SUPPORT	253,606

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 ▶ 16

Part VIII Statement of Revenue

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

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants, and OtherAmt Similar Amounts				
1a Federated campaigns . . 1a				
b Membership dues . . 1b				
c Fundraising events . . 1c				
d Related organizations 1d				
e Government grants (contributions) 1e	112,791,955			
f All other contributions, gifts, grants, and similar amounts not included above 1f	37,575,103			
g Noncash contributions included in lines 1a - 1f:$ 1g	0			
h **Total.** Add lines 1a-1f . . . . . ▶	150,367,058			
Program Service Revenue — Business Code				
2a Contracts 900099	104,687,866	104,687,866		
b				
c				
d				
e				
f All other program service revenue.	0	0	0	0
g **Total.** Add lines 2a–2f. . . . . ▶	104,687,866			
3 Investment income (including dividends, interest, and other similar amounts)	142,944			142,944
4 Income from investment of tax-exempt bond proceeds ▶				
5 Royalties . . . . . ▶				
Other Revenue — (i) Real / (ii) Personal				
6a Gross rents 6a: 945,422				
b Less: rental expenses 6b: 945,422				
c Rental income or (loss) 6c: 0 / 0				
d Net rental income or (loss) . . . . . ▶	0			0
(i) Securities / (ii) Other				
7a Gross amount from sales of assets other than inventory 7a: 520,483				
b Less: cost or other basis and sales expenses 7b: 740,093				
c Gain or (loss) 7c: -219,610 / 0				
d Net gain or (loss) . . . . . ▶	-219,610			-219,610
8a 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 . . ▶				
9a Gross income from gaming activities. See Part IV, line 19 . . . 9a				
b Less: direct expenses 9b				
c Net income or (loss) from gaming activities . . ▶				
10a 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 . . ▶				
Business Code				
11a				
b				
c OtherRevenueMiscAmt				
d All other revenue	0	0	0	0
e **Total.** Add lines 11a–11d . . . . . ▶	0			
12 **Total revenue.** See instructions . . . . ▶	254,978,258	104,687,866	0	-76,666

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	74,247,084	74,247,084		
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.	3,233,447	3,233,447		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,031,022	1,331,130	1,699,892	0
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	87,645,441	71,949,710	15,695,667	64
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	6,612,146	5,462,599	1,149,542	5
9 Other employee benefits	12,716,218	10,808,785	1,907,433	0
10 Payroll taxes	6,477,357	5,323,208	1,154,143	6
11 Fees for services (non-employees):				
a Management				
b Legal	394,334		394,334	
c Accounting	121,899		121,899	
d Lobbying	135,188	37,464	97,724	
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	44,901,967	42,481,826	2,420,141	0
12 Advertising and promotion	47,313	37,855	7,738	1,720
13 Office expenses	4,603,624	3,401,069	1,202,555	
14 Information technology	162,595	36,181	126,414	
15 Royalties				
16 Occupancy	2,364,630	1,609,355	755,275	
17 Travel	1,988,390	1,928,702	59,688	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	591,921	573,945	17,976	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	557,833		557,833	
23 Insurance	201,782	10,785	190,997	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Training & Development	1,636,050	1,457,956	178,094	
b Other expenses	1,128,629	491,622	636,780	227
c				
d				
e All other expenses	0	0	0	0
25 **Total functional expenses.** Add lines 1 through 24e	252,798,870	224,422,723	28,374,125	2,022
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 IX . . . . . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		23,872,521	1	48,227,080
	2	Savings and temporary cash investments		27,320,799	2	24,071,225
	3	Pledges and grants receivable, net		31,829,241	3	59,294,306
	4	Accounts receivable, net			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		0	5	0
	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)		0	6	0
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		412,495	9	1,914,114
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,722,299			
	b	Less: accumulated depreciation	10b 4,030,022	984,615	10c	692,277
	11	Investments—publicly traded securities		3,706,924	11	6,631,351
	12	Investments—other securities. See Part IV, line 11		0	12	
	13	Investments—program-related. See Part IV, line 11		0	13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		318,196	15	6,774,719
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		88,444,791	16	147,605,072
Liabilities	17	Accounts payable and accrued expenses		25,186,049	17	38,775,566
	18	Grants payable			18	
	19	Deferred revenue		13,095,564	19	50,602,842
	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		0	22	0
	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		356,800	25	6,760,885
	26	**Total liabilities.** Add lines 17 through 25		38,638,413	26	96,139,293
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☑ and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		18,795,664	27	18,526,211
	28	Net assets with donor restrictions		31,010,714	28	32,939,568
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ 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		49,806,378	32	51,465,779
	33	Total liabilities and net assets/fund balances		88,444,791	33	147,605,072

Part XI Reconcilliation 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	254,978,258
2	Total expenses (must equal Part IX, column (A), line 25)	2	252,798,870
3	Revenue less expenses. Subtract line 2 from line 1	3	2,179,388
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	49,806,378
5	Net unrealized gains (losses) on investments	5	-519,987
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 in 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	10	51,465,779

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: ☐ Cash ☑ Accrual ☐ 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?	2a		No
	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: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	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: ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
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?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a	Yes	
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 in Schedule O and describe any steps taken to undergo such audits.	3b	Yes	

Additional Data

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Software ID: 22016089
Software Version: 2022v5.0

Form 990, Special Condition Description:

Special Condition Description

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

2022

Open to Public Inspection

Name of the organization
Public Health Institute

Employer identification number
94-1646278

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).** (Attach Schedule E (Form 990).)

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).** Enter the hospital's name, city, and state:

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).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ 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).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)

9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:

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—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

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 described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

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).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . .	52,150,662	22,917,247	110,230,613	154,496,751	150,367,058	490,162,331
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge. .	1,198,000	1,198,000	1,198,000	1,198,000	1,198,000	5,990,000
4 **Total.** Add lines 1 through 3	53,348,662	24,115,247	111,428,613	155,694,751	151,565,058	496,152,331
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) . .						84,531,057
6 **Public support.** Subtract line 5 from line 4.						411,621,274

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4. .	53,348,662	24,115,247	111,428,613	155,694,751	151,565,058	496,152,331
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . .	0	181,157	84,103	84,081	1,088,366	1,437,707
9 Net income from unrelated business activities, whether or not the business is regularly carried on. .	0	0	0			0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). .	0	0	0	0	0	0
11 **Total support.** Add lines 7 through 10						497,590,038

12 Gross receipts from related activities, etc. (see instructions) 12 436,120,359

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** . . . . . ▶☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f) divided by line 11, column (f)) . . . . . 14 82.72 %

15 Public support percentage for 2020 Schedule A, Part II, line 14 . . . . . 15 93.4 %

16a **33 1/3% support test—2022.** 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 . . . . . ▶☑

b **33 1/3% support test—2021.** 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 . . . . . ▶☐

17a **10%-facts-and-circumstances test—2022.** 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 . . . . . ▶☐

b **10%-facts-and-circumstances test—2021.** 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 . . . . . ▶☐

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 . . . . . ▶☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b. .						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c 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

15	Public support percentage for 2022 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2021 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2022** (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from **2021** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests-2022.** 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—2021.** 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 on line 12 of Part I. If you checked box 12a, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of 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? *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.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a		
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)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *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.*	4b		
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)? *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.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *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).*	5a		
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?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
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? *If "Yes," provide detail in* ***Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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? *If "Yes," complete Part I of Schedule L (Form 990) .*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8		
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))? *If "Yes," provide detail in* ***Part VI.***	9a		
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? *If "Yes," provide detail in* ***Part VI.***	9b		
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? *If "Yes," provide detail in* ***Part VI.***	9c		
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)? *If "Yes," answer line 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).*	10b		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

			Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in* ***Part VI*** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
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)? *If "No," describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	**1**		

Section D. All Type III Supporting Organizations

			Yes	No
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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	**2**		
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.*	**3**		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**:

- **a** ☐ The organization satisfied the Activities Test. Complete **line 2** below.
- **b** ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.
- **c** ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

2 Activities Test. **Answer lines 2a and 2b below.**

			Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	**2a**		
b	Did the activities described on line 2a, above constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		

3 Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No", provide details in* ***Part VI.***	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI.*** *the role played by the organization in this regard.*	**3b**		

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):	1		
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 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 ☐ 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 2022 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-2022**	**(iii) Distributable Amount for 2022**
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required-- *explain in* ***Part VI***). See instructions.			
3 Excess distributions carryover, if any, to 2022:			
a From 2017.			
b From 2018.			
c From 2019.			
d From 2020.			
e From 2021.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, *explain in* ***Part VI***. See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, *explain in* ***Part VI***. See instructions.			
7 **Excess distributions carryover to 2023.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018.			
b Excess from 2019.			
c Excess from 2020.			
d Excess from 2021.			
e Excess from 2022.			

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).

Facts And Circumstances Test

Return Reference	Explanation

Additional Data

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Software Version: 2022v5.0

Schedule B

(Form 990)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990, 990-EZ, or 990-PF.**
▶ **Go to *www.irs.gov/Form990* for the latest information.**

OMB No. 1545-0047

2022

Name of the organization
Public Health Institute

Employer identification number
94-1646278

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33$^{1}/_{3}$% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . . ▶ $ _____

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

Name of organization
Public Health Institute

Employer identification number
94-1646278

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

Contributors

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED		$ RESTRICTED	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Name of organization
Public Health Institute

Employer identification number
94-1646278

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

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

Name of organization
Public Health Institute

Employer identification number
94-1646278

Part III ***Exclusively*** **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information once. See instructions.)** ▶ **$** _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift Transferee's name, address, and ZIP 4		Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift Transferee's name, address, and ZIP 4		Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift Transferee's name, address, and ZIP 4		Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift Transferee's name, address, and ZIP 4		Relationship of transferor to transferee

Additional

Data

Softw

Software ID: 220

ware Version: 202

16089

2v5.0

Return to Form

SCHEDULE C (Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶**Complete if the organization is described below.** ▶**Attach to Form 990 or Form 990-EZ.**
▶**Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

2022

Open to Public Inspection

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

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

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

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

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

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

Name of the organization	**Employer identification number**
Public Health Institute	94-1646278

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. See instructions for definition of "political campaign activities."

2 Political campaign activity expenditures. See instructions ▶ $

3 Volunteer hours for political campaign activities. See instructions

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-.
1					
2					
3					
4					
5					
6					

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 (grass roots lobbying)	20,524	0
b Total lobbying expenditures to influence a legislative body (direct lobbying)	114,664	0
c Total lobbying expenditures (add lines 1a and 1b)	135,188	0
d Other exempt purpose expenditures	224,287,535	0
e Total exempt purpose expenditures (add lines 1c and 1d)	224,422,723	0
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000	0

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)	250,000	0	
h Subtract line 1g from line 1a. If zero or less, enter -0-.	0	0	
i Subtract line 1f from line 1c. If zero or less, enter -0-.	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? ☐ **Yes** ☐ **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	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	80,373	93,223	80,966	135,188	389,750
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	8,918	40,883	71,914	20,524	142,239

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

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

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

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

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

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

Part IV Supplemental Information

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

Return Reference	Explanation	

Additional Data

Return to Form

Software ID: 22016089
Software Version: 2022v5.0

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

2022

Open to Public Inspection

Name of the organization
Public Health Institute

Employer identification number
94-1646278

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? ☐ Yes ☐ 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? ☐ Yes ☐ 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 (e.g., recreation or education)
☐ Preservation of an 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 Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

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

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

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

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

(ii) Assets included in Form 990, Part X ▶ $ _____

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

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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 are a 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 programs
- **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 in Part XIII . . . . ☐

Part V Endowment Funds.

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

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

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

- **a** Board designated or quasi-endowment ▶ .....
- **b** Permanent endowment ▶ .....
- **c** Term endowment ▶ .....

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

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

	Yes	**No**
(i) Unrelated organizations . . . . . **3a(i)**		
(ii) Related organizations . . . . . **3a(ii)**		
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? **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				
d Equipment		4,722,299	4,030,022	692,277
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . ▶				692,277

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

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

Part VIII Investments - Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* ▶	

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	6,760,885

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☑

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	255,403,693
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	-519,987		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	0		
e	Add lines **2a** through **2d**			2e	-519,987
3	Subtract line **2e** from line **1**			3	255,923,680
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	-945,422		
c	Add lines **4a** and **4b**			4c	-945,422
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	254,978,258

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	253,744,292
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	945,422		
e	Add lines **2a** through **2d**			2e	945,422
3	Subtract line **2e** from line **1**			3	252,798,870
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			
b	Other (Describe in Part XIII.)	4b	0		
c	Add lines **4a** and **4b**			4c	0
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	252,798,870

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.

Return Reference	Explanation
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	The Institute is exempt from Federal income taxes under Section 501(c)(3) of the Internal Revenue Code and from state income and franchise taxes under Section 23701d of the California Revenue and Taxation Code, except to the extent of unrelated business taxable income as defined under Internal Revenue Code Sections 511 through 515. A provision for income taxes has not been recorded in the accompanying financial statements. The Institute is not a private foundation. For the years ended December 31, 2022 and 2021, the Institute has documented its consideration of guidance for reporting uncertainty in income taxes and has determined that no material uncertain tax positions qualify for either recognition or disclosure in the financial statements. The Federal Form 990, Return of Organization Exempt from Income Tax, is subject to examination by the Internal Revenue Service, generally for three years after it is filed. Tax positions taken related to the Institute's tax exempt status, unrelated business activities taxable income and deductibility of expenses and other miscellaneous tax positions have been reviewed, and management is of the opinion that material positions taken by the Institute would more likely than not be sustained by examination. Accordingly, the Institute has not recorded an income tax liability for uncertain tax benefits as of December 31, 2022 and 2021 nor does it expect there will be a material change in the twelve months following the year ended December 31, 2022. As of December 31, 2022, the Institute's tax years ended December 31, 2018 through December 31, 2022 remain subject to examination in the United States federal tax jurisdiction and the tax years ended December 31, 2017 through December 31, 2022 remain subject to examination in the California state tax jurisdiction.
Schedule D, Part XI, Line 4(b) Other revenues in form 990 not in audited financial statements	RENTAL EXPENSES - -945422
Schedule D, Part XII, Line 2(d) Other expenses in audited financial statements not in form 990	RENTAL EXPENSES - 945422

Additional Data

Return to Form

Software ID: 22016089
Software Version: 2022v5.0

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.**

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization
Public Health Institute

Employer identification number
94-1646278

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ **Yes** ☐ **No**

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activites per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees, agents, and independent contractors in the region	**(d)** Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in the region	**(f)** Total expenditures for and investments in the region
(1) South Asia	1	4	Program Services	Technical Assistance	560,980
(2) Central America and the Caribbean	0	0	Grants to recipients located in the region	Technical Assistance	79,144
(3) East Asia and the Pacific	0	0	Grants to recipients located in the region	Technical Assistance	53,027
(4) North America (Canada & Mexico only)	0	0	Grants to recipients located in the region	Technical Assistance	12,000
(5) South America	0	0	Grants to recipients located in the region	Technical Assistance	119,707
(6) South Asia	0	0	Grants to recipients located in the region	Technical Assistance	253,000
(7) Sub-Saharan Africa	0	0	Grants to recipients located in the region	Technical Assistance	330,404
(8) East Asia and the Pacific	0	0	Grants to recipients located in the region	Research	765,182
(9) North America (Canada & Mexico only)	0	0	Grants to recipients located in the region	Research	1,620,983
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	1	4			3,794,427
b Total from continuation sheets to Part I . . .	0	0			0
c Totals (add lines 3a and 3b)	1	4			3,794,427

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			North America (Canada & Mexico only)	Research	684,825	WIRE			
(2)			East Asia and the Pacific	Research	195,212	WIRE			
(3)			North America (Canada & Mexico only)	Research	157,630	WIRE			
(4)			East Asia and the Pacific	Research	133,630	WIRE			
(5)			North America (Canada & Mexico only)	Research	121,702	WIRE			
(6)			South America	Technical Assistance	119,707	WIRE			
(7)			North America (Canada & Mexico only)	Research	115,510	WIRE			
(8)			East Asia and the Pacific	Research	113,167	WIRE			
(9)			North America (Canada & Mexico only)	Research	102,872	WIRE			
(10)			North America (Canada & Mexico only)	Research	96,972	WIRE			
(11)			Sub-Saharan Africa	Technical Assistance	93,404	WIRE			
(12)			South Asia	Technical Assistance	85,000	WIRE			
(13)			North America (Canada & Mexico only)	Research	84,858	WIRE			
(14)			East Asia and the Pacific	Research	65,862	WIRE			
(15)			South Asia	Technical Assistance	64,000	WIRE			
(16)			East Asia and the Pacific	Research	59,667	WIRE			
(17)			North America (Canada & Mexico only)	Research	57,978	WIRE			
(18)			North America (Canada & Mexico only)	Research	56,755	WIRE			
(19)			East Asia and the Pacific	Research	54,667	WIRE			
(20)			North America (Canada & Mexico only)	Research	54,625	WIRE			
(21)			East Asia and the Pacific	Technical Assistance	53,027	WIRE			
(22)			East Asia and the Pacific	Research	49,008	WIRE			
(23)			East Asia and the Pacific	Research	44,485	WIRE			
(24)			North America (Canada & Mexico only)	Research	39,452	WIRE			
(25)			East Asia and the Pacific	Research	30,842	WIRE			
(26)			Sub-Saharan Africa	Technical Assistance	30,000	WIRE			
(27)			Sub-Saharan Africa	Technical Assistance	30,000	WIRE			
(28)			North America (Canada & Mexico only)	Research	28,235	WIRE			
(29)			South Asia	Technical Assistance	20,000	WIRE			
(30)			South Asia	Technical Assistance	20,000	WIRE			
(31)			South Asia	Technical Assistance	20,000	WIRE			
(32)			South Asia	Technical Assistance	20,000	WIRE			
(33)			Central America and the Caribbean	Technical Assistance	19,144	WIRE			
(34)			East Asia and the Pacific	Research	18,642	WIRE			
(35)			Sub-Saharan Africa	Technical Assistance	15,000	WIRE			
(36)			Sub-Saharan Africa	Technical Assistance	15,000	WIRE			
(37)			Sub-Saharan Africa	Technical Assistance	15,000	WIRE			
(38)			North America (Canada & Mexico only)	Research	13,867	WIRE			
(39)			North America (Canada & Mexico only)	Technical Assistance	12,000	WIRE			
(40)			South Asia	Technical Assistance	12,000	WIRE			
(41)			Sub-Saharan Africa	Technical Assistance	12,000	WIRE			
(42)			Sub-Saharan Africa	Technical Assistance	12,000	WIRE			
(43)			Sub-Saharan Africa	Technical Assistance	12,000	WIRE			
(44)			South Asia	Technical Assistance	12,000	WIRE			
(45)			Sub-Saharan Africa	Technical Assistance	12,000	WIRE			
(46)			Sub-Saharan Africa	Technical Assistance	12,000	WIRE			
(47)			Sub-Saharan Africa	Technical Assistance	12,000	WIRE			
(48)			Sub-Saharan Africa	Technical Assistance	12,000	WIRE			
(49)			Sub-Saharan Africa	Technical Assistance	12,000	WIRE			
(50)			Sub-Saharan Africa	Technical Assistance	12,000	WIRE			
(51)			Sub-Saharan Africa	Technical Assistance	12,000	WIRE			
(52)			Sub-Saharan Africa	Technical Assistance	12,000	WIRE			
(53)			Central America and the Caribbean	Technical Assistance	10,000	WIRE			
(54)			Central America and the Caribbean	Technical Assistance	10,000	WIRE			
(55)			Central America and the Caribbean	Technical Assistance	10,000	WIRE			
(56)			Central America and the Caribbean	Technical Assistance	10,000	WIRE			
(57)			Central America and the Caribbean	Technical Assistance	10,000	WIRE			
(58)			Central America and the Caribbean	Technical Assistance	10,000	WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ 58

3 Enter total number of other organizations or entities . . . . . ▶ 0

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	**(b)** Region	**(c)** Number of recipients	**(d)** Amount of cash grant	**(e)** Manner of cash disbursement	**(f)** Amount of noncash assistance	**(g)** Description of noncash assistance	**(h)** Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
(18)								

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)*	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* .	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)*	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).*	☐ Yes	☑ No

Part V **Supplemental Information**

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

ReturnReference	Explanation
Schedule F, Part I, Line 2 Procedures for monitoring use of grant funds	PRIOR TO MAKING AN AWARD, PHI EVALUATES THE CAPABILITY OF THE GRANTEE TO CARRY OUT GRANT AWARD TERMS AND CONDITIONS, INCLUDING EXERCISING RESPONSIBLE FINANCIAL MANAGEMENT. PHI NOTIFIES THE GRANTEE ABOUT COMPLIANCE REQUIREMENTS AND INCORPORATES COMPLIANCE, AUDIT AND ENFORCEMENT PROVISIONS INTO AWARD DOCUMENTS, INCLUDING OMB Uniform Guidance REQUIREMENTS WHERE APPLICABLE. PHI EMPLOYEES MAINTAIN REGULAR CONTACT WITH THE GRANTEE, REVIEW FINANCIAL AND PERFORMANCE REPORTS SUBMITTED BY THE GRANTEE, AND MAKE APPROPRIATE INQUIRIES.
Schedule F, Part I, Line 3 Method used to account for expenditures on org's financial statements	CENTRAL AMERICA AND THE CARIBBEAN-Accrual; EAST ASIA AND THE PACIFIC-Accrual; NORTH AMERICA (CANADA & MEXICO ONLY)-Accrual; SOUTH AMERICA-Accrual; SOUTH ASIA-Accrual; SUB-SAHARAN AFRICA-Accrual
Schedule F, Part II, Line 1 Method used to account for expenditures on org's financial statements	CENTRAL AMERICA AND THE CARIBBEAN-Accrual; EAST ASIA AND THE PACIFIC-Accrual; NORTH AMERICA (CANADA & MEXICO ONLY)-Accrual; SOUTH AMERICA-Accrual; SOUTH ASIA-Accrual; SUB-SAHARAN AFRICA-Accrual

Additional Data

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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

2022

Open to Public Inspection

Name of the organization
Public Health Institute

Employer identification number
94-1646278

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.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section (if applicable)	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of noncash assistance	**(h)** Purpose of grant or assistance
(1) RESCUE AGENCY PUBLIC BENEFIT LLC 2437 MORENA BLVD SAN DIEGO,CA 92110	47-1335192		1,189,235				Technical Assistance
(2) DRY POWDER WORKS 3120 GARDEN PARK WALK SW ATLANTA,GA 30331	85-3345588		2,079,132				Capacity Building
(3) CHILDREN'S HOSPITAL OF PHILADELPHIA PO Box 8500 Philadelphia,PA 19178	23-1352166	501(c)(3)	2,072,756				Research
(4) SEATTLE CHILDREN'S HOSPITAL 4800 SAND POINT WAY NE SEATTLE,WA 981053901	91-0564748	501(c)(3)	2,046,880				Research
(5) DANA-FARBER CANCER INSTITUTE INC PO BOX 412846 BOSTON,MA 022412846	04-2263040	501(c)(3)	1,983,663				Research
(6) MIGRANT CLINICIANS NETWORK PO BOX 164285 AUSTIN,TX 78716	74-2662919	501(c)(3)	1,929,354				Capacity Building
(7) UNIVERSITY OF SOUTHERN CALIFORNIA 3500 SFIGUEROA ST LOS ANGELES,CA 90089	95-1642394	501(c)(3)	1,754,345				Research
(8) DIGNITY HEALTH 1400 E CHURCH STREET SANTA MARIA,CA 93454	94-1196203	501(c)(3)	1,720,000				Capacity Building
(9) BAYLOR COLLEGE OF MEDICINE PO BOX 301207 DALLAS,TX 753031207	74-1613878	501(c)(3)	1,631,303				Research
(10) ADVENTIST HEALTH SYSTEMWEST 1 ADVENTIST HEALTH WAY ROSEVILLE,CA 95661	95-3484589	501(c)(3)	1,475,000				Technical Assistance
(11) THE ASPEN INSTITUTE 2300 N ST NW STE 700 WASHINGTON,DC 200371122	84-0399006	501(c)(3)	1,113,482				Technical Assistance
(12) KAISER FOUNDATION HOSPITALS 1950 FRANKLIN STREET OAKLAND,CA 94612	94-1105628	501(c)(3)	1,071,075				Research
(13) NATIONAL COUNCIL ON AGING INC 251 18TH ST SOUTH ARLINGTON,VA 22202	13-1932384	501(c)(3)	1,070,493				Capacity Building
(14) THE RESEARCH INSTITUTE AT NATIONWIDE CHILDREN'S HOSPITAL PO BOX 78000 DETROIT,MI 482781653	31-6056230	501(c)(3)	1,061,312				Research
(15) USAGING 1100 NEW JERSEY AVENUE SE WASHINGTON,DC 20003	52-1052345	501(c)(3)	983,363				Capacity Building
(16) PUBLIC HEALTH FOUNDATION ENTERPRISESINC 650 UNIVERSITY AVE SACRAMENTO,CA 95825	95-2557063	501(c)(3)	933,597				Capacity Building
(17) CHILDREN'S HOSPITAL MEDICAL CENTER 3333 BURNET AVE CINCINNATI,IL 45229	31-0833936	501(c)(3)	841,431				Research
(18) PATHWAYS COMMUNITY HUB INSTITUTE INC 427 W DUSSEL DR MAUMEE,OH 43537	81-3738049	501(c)(3)	840,000				Technical Assistance
(19) SUTTER BAY HOSPITALS 601 DUBOCE AVE SAN FRANCISCO,CA 94114	94-0562680	501(c)(3)	830,000				Technical Assistance
(20) SUTTER VALLEY HOSPITALS PO BOX 619095 ROSEVILLE,CA 95661	94-1156621	501(c)(3)	755,467				Research
(21) UNIVERSITY OF ALABAMA BIRMINGHAM 1600 7TH AVENUE SOUTH BIRMINGHAM,AL 35233	63-6005396	STATE OF AL	731,797				Research
(22) THE REGENTS OF THE UNIVERSITY OF CA SAN FRANCISCO PO BOX 748872 LOS ANGELES,CA 900744872	94-6036493	STATE OF CA	717,757				Research
(23) CHILDREN'S HOSPITAL COLORADO 13123 E 16TH AVE AURORA,CO 80045	84-0166760	501(c)(3)	710,376				Research
(24) ANN & ROBERT H LURIE CHILDREN'S 225 E CHICAGO AVE CHICAGO,IL 60611	36-2170833	501(c)(3)	662,856				Research
(25) REGENTS OF UC SAN FRANCISCO PO BOX 748872 LOS ANGELES,CA 900744872	94-6036493	STATE OF CA	596,385				Research
(26) UNIVERSITY OF FLORIDA 207 GRINTER HALL GAINESVILLE,FL 32611	59-6002052	STATE OF FL	550,624				Research
(27) PROVIDENCE ST JOSEPH HEALTH FOUNDATION 440 NE HALSEY ST PORTLAND,OR 97213	94-3078543	501(c)(3)	550,000				Technical Assistance
(28) CHILDREN'S HOSPITAL LOS ANGELES 4650 SUNSET BOULEVARD LOS ANGELES,CA 90027	95-1690977	501(c)(3)	537,359				Research
(29) CHICAGO INTERNATIONAL SOCIAL CHANGE FILM FESTIVAL 23 E 26TH ST CHICAGO,IL 60616	90-0782008	501(c)(3)	530,338				Capacity Building
(30) ST JUDE CHILDREN'S RESEARCH HOSPITAL INC PO BOX 1000 MEMPHIS,TN 381480949	62-0646012	501(c)(3)	528,367				Research
(31) CHILDREN'S RESEARCH INSTITUTE 1 INVENTA PLACE WEST TOWER SILVER SPRING,MD 20910	52-1654453	501(c)(3)	521,212				Research
(32) REGENTS OF THE UNIVERSITY OF MINNESOTA PO BOX 1450 MINNEAPOLIS,MN 554855957	41-6007513	STATE OF MN	509,430				Research
(33) LATINO HEALTH ACCESS 450 W 4TH ST SANTA ANA,CA 927014562	33-0562943	501(c)(3)	505,080				Capacity Building
(34) UNITED WAY FOX CITIES INC 1455 MIDWAY ROAD MENASHA,WI 54915	39-0912895	501(c)(3)	474,400				Capacity Building
(35) NATIONAL INDIAN HEALTH BOARD 910 PENNSYLVANIA AVE SE WASHINGTON,DC 20003	23-7226316	501(c)(3)	469,488				Capacity Building
(36) RIGHTS & DEMOCRACY EDUCATION FUND 70 S WINOOSKI AVENUE BURLINGTON,VT 05401	47-5375511	501(c)(3)	449,997				Capacity Building
(37) CHILDREN'S HOSPITAL OF ORANGE COUNTY 1201 W LA VETA AVENUE ORANGE,CA 92868	95-2321786	501(c)(3)	443,127				Research
(38) INDIANA UNIVERSITY PO BOX 78000 DETROIT,MI 482780867	35-6001673	STATE OF IN	426,392				Research
(39) FRESNO METROPOLITAN MINISTRY 1055 VAN NESS AVENUE FRESNO,CA 93718	94-2181848	501(c)(3)	419,877				Capacity Building
(40) THE MEDICAL COLLEGE OF WISCONSIN INC 8701 WATERTOWN PLANK RD MILWAUKEE,WI 532260509	39-0806261	501(c)(3)	418,735				Research
(41) UNIVERSITY OF NEW MEXICO 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE,NM 871310001	85-6000642	STATE OF NM	401,798				Research
(42) MEALS ON WHEELS AMERICA 1550 CRYSTAL DRIVE ARLINGTON,VA 22202	23-7447812	501(c)(3)	400,362				Capacity Building
(43) COOK COUNTY FAMILY CONNECTION INC 303 S COLLEGE STREET SPARKS,GA 31647	58-2642722	501(c)(3)	400,000				Capacity Building
(44) NATIONAL COALITION OF 100 BLACK WOMEN OF CENTRAL FLORIDA 815 HILLS STREET ORLANDO,FL 32805	27-3533062		400,000				Capacity Building
(45) CHILDREN'S HOSPITAL CORPORATION 300 LONGWOOD AVENUE BOSTON,MA 02115	04-2774441	501(c)(3)	379,749				Research
(46) ICF MACRO INC PO BOX 775367 CHICAGO,IL 606775367	52-0955232		374,759				Research
(47) HEALTHFUL CARE INC 3031 TISCH WAY SAN JOSE,CA 95128	87-2231800		370,000				Technical Assistance
(48) EL SOL NEIGHBORHOOD EDUCATIONAL CENTER 1535 SOUTH D STREET SAN BERNARDINO,CA 92408	33-0552297	501(c)(3)	366,446				Technical Assistance
(49) TIDES CENTER PO BOX 889385 LOS ANGELES,CA 900889385	94-3213100	501(c)(3)	355,500				Technical Assistance
(50) VANDERBILT UNIVERSITY MEDICAL CENTER PO BOX 121236 DALLAS,TX 753121236	35-2528741	501(c)(3)	351,156				Research
(51) SCRIPPS HEALTH 10140 CAMPUS POINT ZONE SAN DIEGO,CA 92121	95-1684089	501(c)(3)	340,000				Technical Assistance
(52) REGENTS OF THE UNIVERSITY OF MICHIGAN BOX 223131 PITTSBURGH,PA 152512131	38-6006309	501(c)(3)	337,182				Research
(53) UNIVERSITY OF PITTSBURGH 500 ROSS STREET PITTSBURGH,PA 152620001	25-0965591	501(c)(3)	334,880				Research
(54) THE UNIVERSITY OF TEXAS SOUTHWESTERN MEDICAL CENTER P O BOX 841765 DALLAS,TX 752841765	75-6002868	STATE OF TX	334,459				Research
(55) UNIVERSITY OF UTAH 201 S PRESIDENTS CIR SALT LAKE CITY,UT 841129020	87-6000525	501(c)(3)	334,434				Research
(56) FAMILY SUPPORT SERVICES OF AMARILLO PO BOX 31150 AMARILLO,TX 79120	75-0800642	501(c)(3)	322,000				Capacity Building
(57) CENTER FOR POPULAR DEMOCRACY INC 449 TROUTMAN STREET BROOKLYN,NY 11237	45-3813436	501(c)(3)	315,709				Capacity Building
(58) MEMORIAL SLOAN KETTERING CANCER CENTER 1275 YORK AVE NEW YORK,NY 100656007	13-1924236	501(c)(3)	300,127				Research
(59) THE BOARD OF TRUSTEES OF THE LELAND STANFORD JUNIOR UNIVERSITY PO BOX 884253 LOS ANGELES,CA 900884253	94-1156365	501(c)(3)	299,999				Research

(60) CHILDREN'S HEALTH CARE 2525 CHICAGO AVE SOUTH MINNEAPOLIS,MN 55404	41-1754276	501(c)(3)	288,189				Research
(61) CURATIVE MEDICAL ASSOCIATES INC 279 E ARROW HWY SAN DIMAS,CA 91773	85-4098687		284,751				Capacity Building
(62) RESEARCH TRIANGLE INSTITUTE POST OFFICE BOX 896945 CHARLOTTE,NC 282896945	56-0686338	501(c)(3)	284,388				Research
(63) VALLEY CHILDREN'S HOSPITAL 9300 VALLEY CHILDRENS PLACE MADERA,CA 93636	94-1294954	501(c)(3)	271,293				Research
(64) KANSAS STATE UNIV RESEARCH FOUNDATION 2005 RESEARCH PARK CIRCLE MANHATTAN,KS 665025020	48-6106237	501(c)(3)	265,000				Technical Assistance
(65) MARIN COMMUNITY CLINIC 9 COMMERCIAL BLVD NOVATO,CA 94949	94-2237120	501(c)(3)	255,507				Capacity Building
(66) PIH HEALTH WHITTIER HOSPITAL 12401 WASHINGTON BLVD WHITTIER,CA 90602	95-1934652	501(c)(3)	255,000				Technical Assistance
(67) SHARP HEALTHCARE FOUNDATION 8695 SPECTRUM CENTER BLVD SAN DIEGO,CA 92123	95-3492461	501(c)(3)	255,000				Technical Assistance
(68) THE CHILDREN'S MERCY HOSPITAL 2401 GILLHAM ROAD KANSAS CITY,MO 64108	44-0605373	501(c)(3)	253,750				Research
(69) ST JUDE CHILDREN'S RESEARCH HOSPITAL PO BOX 1000 MEMPHIS,TN 381480949	62-0646012	501(c)(3)	252,859				Research
(70) NEW YORK UNIVERSITY PO BOX 415026 BOSTON,MA 022415026	13-5562308	501(c)(3)	246,252				Research
(71) ASIAN RESOURCES INC 6270 ELDER CREEK ROAD SACRAMENTO,CA 95824	94-2658135	501(c)(3)	243,750				Capacity Building
(72) COUNTY OF TULARE 5957 S MOONEY BLVD VISALIA,CA 93277	94-6000545	TULARE COUNTY	236,249				Capacity Building
(73) WASHINGTON UNIVERSITY 660 S EUCLID AVE ST LOUIS,MO 631101010	43-0653611	501(c)(3)	235,489				Research
(74) LOMA LINDA UNIVERSITY HEALTH 11234 ANDERSON STREET LOMA LINDA,CA 92354	95-3804495	501(c)(3)	228,750				Research
(75) FRED HUTCHINSON CANCER RESEARCH CENTER PO BOX 19024 SEATTLE,WA 981091024	23-7156071	501(c)(3)	221,623				Research
(76) KAREN ORGANIZATION OF SAN DIEGO 5354 UNIVERSITY AVENUE SAN DIEGO,CA 92105	27-2917644	501(c)(3)	218,750				Technical Assistance
(77) THE REGENTS OF THE UNIVERSITY OF CA SACRAMENTO 4150 V STREET SACRAMENTO,CA 95817	94-6036494	STATE OF CA	217,293				Technical Assistance
(78) THE RESEARCH FOUNDATION FOR THE STATE UNIVERSITY OF NEW YORK 35 STATE ST ALBANY,NY 122072826	14-1368361	501(c)(3)	215,084				Research
(79) OREGON HEALTH & SCIENCE UNIVERSITY PO BOX 3003 PORTLAND,OR 972083003	93-1176109	STATE OF OR	204,479				Research
(80) CONEJO HEALTH PO BOX 7741 WESTLAKE VILLAGE,CA 91359	83-3478457	501(c)(3)	200,000				Technical Assistance
(81) CORE COMMUNITY ORGANIZED RELIEF EFFORT 6464 W SUNSET BLVD LOS ANGELES,CA 90028	27-1703237	501(c)(3)	200,000				Capacity Building
(82) COOK CHILDREN'S MEDICAL CENTER 801 SEVENTH AVE FORT WORTH,TX 76104	75-2051646	501(c)(3)	193,770				Research
(83) EMORY UNIVERSITY PO BOX 935084 ATLANTA,GA 31193	58-0566256	501(c)(3)	184,099				Research
(84) REGENTS OF THE UNIVERSITY OF CALIFORNIA LOS ANGELES 10960 WILSHIRE BLVD LOS ANGELES,CA 90024	95-6006143	501(c)(3)	182,200				Capacity Building
(85) THE REGENTS OF THE UNIVERSITY OF CA SAN DIEGO PO BOX 741539 LOS ANGELES,CA 900741539	95-6006144	501(c)(3)	182,123				Research
(86) UNIVERSITY OF ILLINOIS AT CHICAGO 809 S MARSHFIELD AVE CHICAGO,IL 606124305	37-6000511	501(c)(3)	181,461				Research
(87) SKI TEAM PRODUCTIONS LLC 3328 N BARTLETT AVE MILWAUKEE,WI 53211	86-2872873		178,501				Technical Assistance
(88) JOHNS HOPKINS UNIVERSITY 12529 COLLECTIONS CENTER DRIVE CHICAGO,IL 60693	52-0595110	501(c)(3)	175,681				Research
(89) LEVEL UP NORCAL 1681 E CYPRESS AVENUE REDDING,CA 96002	83-2049794		170,250				Capacity Building
(90) FRESNO COMMUNITY HOSPITAL AND MEDICAL 1560 E SHAW AVE FRESNO,CA 93710	94-1156276	501(c)(3)	170,000				Technical Assistance
(91) PHOENIX CHILDRENS HOSPITAL 1919 E THOMAS ROAD PHOENIX,AZ 850167710	86-0422559	501(c)(3)	161,887				Research
(92) NEW YORK MEDICAL COLLEGE 40 SUNSHINE COTTAGE ROAD VALHALLA,NY 10595	13-1099420	501(c)(3)	158,823				Research
(93) STATE UNIVERSITY OF IOWA 200 HAWKINS DRIVE IOWA CITY,IA 52242	42-6004813	STATE OF IA	158,533				Research
(94) EL CENTRO REGIONAL MEDICAL CENTER 1415 ROSS AVENUE EL CENTRO,CA 92243	95-1915820		154,000				Technical Assistance
(95) REGENTS OF THE UNIVERSITY OF COLORADO PO BOX 910238 DENVER,CO 802910238	84-6000555	501(c)(3)	153,055				Research
(96) MAYO CLINIC POBOX 4006 ROCHESTER,MN 559034006	41-6011702	501(c)(3)	152,923				Research
(97) BIG VALLEY BAND OF POMO INDIANS 2726 MISSION RANCHERIA RD LAKEPORT,CA 95453	68-0091190		150,437				Research
(98) COUNTY OF SANTA CLARA PO BOX 888414 LOS ANGELES,CA 900888414	94-6000533	SANTA CLARA COUNTY	150,000				Technical Assistance
(99) EMANATE HEALTH 140 WEST COLLEGE STREET COVINA,CA 917231515	95-3885523	501(c)(3)	150,000				Technical Assistance
(100) HIV EDUCATION AND PREVENTION PROJECT PO BOX 7522 OAKLAND,CA 94601	94-3205535	501(c)(3)	150,000				Technical Assistance
(101) SADDLEBACK MEMORIAL MEDICAL CENTER 24451 HEALTH CENTER DR LAGUNA HILLS,CA 92653	95-2585792	501(c)(3)	150,000				Technical Assistance
(102) ST JOSEPH HEALTH NORTHERN CALIFORNIA LLC 1450 MEDICAL CENTER DRIVE ROHNERT PARK,CA 94928	81-4791043	501(c)(3)	150,000				Technical Assistance
(103) HERALD CHRISTIAN HEALTH CENTER 3401 AEROJET AVE EL MONTE,CA 91731	20-3492620	501(c)(3)	147,586				Technical Assistance
(104) CHILDREN'S PRIMARY CARE MEDICAL 3880 MURPHY CANYON ROAD SAN DIEGO,CA 92123	33-0662258		142,959				Capacity Building
(105) COUNTY OF CALAVERAS 891 MOUNTAIN RANCH ROAD SAN ANDREAS,CA 95249	94-6000507	CALAVERAS COUNTY	142,117				Capacity Building
(106) CALIFORNIA ASSOCIATION OF AFRICAN AMERICAN SUPERINTENDENTS AND ADMINISTRATO RS 11856 BALBOA BLVD GRANADA HILLS,CA 91344	26-3944470	501(c)(3)	141,637				Technical Assistance
(107) COMITE CIVICO DEL VALLE INC 235 MAIN STREET BRAWLEY,CA 922271932	33-0411322	501(c)(3)	141,500				Technical Assistance
(108) LITTLE MANILA FOUNDATION PO BOX 1356 STOCKTON,CA 95201	20-2661354	501(c)(3)	141,000				Capacity Building
(109) MONTAGE HEALTH FOUNDATION 40 RYAN COURT MONTEREY,CA 93940	81-2889645	501(c)(3)	140,000				Technical Assistance
(110) CONSORTIUM OF UNIVERSITIES FOR GLOBAL 1608 RHODE ISLAND AVE NW WASHINGTON,DC 20036	27-1481036	501(c)(3)	139,993				Research
(111) BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN 21 N PARK STREET MADISON,WI 537151218	80-0770693	501(c)(3)	139,768				Research
(112) STATE OF MISSISSIPPI 2500 NORTH STATE STREET JACKSON,MS 392164505	64-6008520	STATE OF MS	136,251				Research
(113) CHILDREN'S HOSPITAL AND MEDICAL CENTER 8200 DODGE STREET OMAHA,NE 681144114	47-0379754	501(c)(3)	134,092				Research
(114) HMH HOSPITALS CORPORATION PO BOX 95000-7360 PHILADELPHIA,PA 191957360	22-1487576	501(c)(3)	132,773				Research
(115) CHINATOWN SERVICE CENTER 767 N HILL STREET LOS ANGELES,CA 90012	95-2918844	501(c)(3)	132,066				Capacity Building
(116) LEGACY EMANUEL HOSPITAL AND HEALTH 1919 NW LOVEJOY PORTLAND,OR 97209	93-0386823	501(c)(3)	130,686				Research
(117) HEALTH IMPROVEMENT PARTNERSHIP OF SANTA CRUZ COUNTY INC 343 SOQUEL AVENUE SANTA CRUZ,CA 95062	01-0826156		130,087				Capacity Building
(118) RANDOLPH COUNTY CARING COMMUNITY INC 101 WEST COATES STREET MOBERLY,MO 65270	52-2199775	501(c)(3)	130,000				Capacity Building
(119) WEILL MEDICAL COLLEGE OF CORNELL PO BOX 22371 NEW YORK,NY 100872371	13-1623978		125,139				Research
(120) COMMUNITY INITIATIVES 1000 BROADWAY OAKLAND,CA 94607	94-3255070	501(c)(3)	123,750				Capacity Building
(121) SCRIPT DEPOT LP 1619 FRANKLIN ROAD YUBA CITY,CA 95993	81-1623813		122,000				Capacity Building
(122) MARSHALL MEDICAL CENTER 1100 MARSHALL WAY PLACERVILLE,CA 95667	94-1450151	501(c)(3)	121,667				Technical Assistance
(123) BOARD OF REGENTS OF THE UNIVERSITY OF OKLAHOMA HEALTH SERVICES CENTER 865 RESEARCH PARKWAY OKLAHOMA CITY,OK 731260901	73-1563627	501(c)(3)	121,617				Research

(124) ILLINOIS INSTITUTE OF TECHNOLOGY 7562 SOLUTION CENTER CHICAGO,IL 606777005	36-2170136	501(c)(3)	121,028				Research
(125) PROVIDENCE HEALTH & SERVICES-WASHINGTON PO BOX 35143 SEATTLE,WA 98124	92-0016429		120,012				Research
(126) WAKE FOREST UNIVERSITY HEALTH SCIENCES OFFICE OF SPONSORED PROGRAMS WINSTONSALEM,N C 27157	22-3849199	501(c)(3)	119,388				Research
(127) TUFTS MEDICAL CENTER INC 800 WASHINGTON STREET BOSTON,M A 02111	04-3400617	501(c)(3)	118,427				Research
(128) CHRISTUS SANTA ROSA HEALTH CARE 315 N SAN SABA ST SAN ANTONIO,TX 78207	74-1109665	501(c)(3)	117,929				Research
(129) THE REGENTS OF THE UNIVERSITY OF CA DAVIS PO BOX 989062 WEST SACRAMENTO,C A 95798	94-6036494	STATE OF CA	115,000				Technical Assistance
(130) CONNECTICUT CHILDREN'S MEDICAL CENTER 282 WASHINGTON STREET HARTFORD,C T 06106	06-0646755	501(c)(3)	114,549				Research
(131) PUEBLO Y SALUD INC 1024 NORTH MACLAY AVENUE SAN FERNANDO,C A 91340	95-4348471	501(c)(3)	112,900				Technical Assistance
(132) NANAEFUA AFOH-MANIN 10000 WASHINGTON BOULEVARD CULVER CITY,C A 90232	32-0556686	501(c)(3)	112,210				Technical Assistance
(133) ST JOHN'S WELL CHILD & FAMILY 808 W 58TH ST LOS ANGELES,C A 90037	95-4067758	501(c)(3)	111,864				Technical Assistance
(134) HUTRX PHARMACY INC 737 COLUSA AVE YUBA CITY,C A 95991	20-5686932		111,551				Capacity Building
(135) CIRCLE OF LIFE DEVELOPMENT FOUNDATION PO BOX 13153 BAKERSFIELD,C A 93389	84-4698001	501(c)(3)	111,250				Technical Assistance
(136) THE FEINSTEIN INSTITUTES FOR MEDICAL RESEARCH PO BOX 95000-7530 PHILADELPHIA,P A 191957530	11-2673595	501(c)(3)	111,060				Research
(137) ARROWHEAD REGIONAL MEDICAL CENTER 400 N PEPPER AVE COLTON,C A 92324	95-3213342	501(c)(3)	110,000				Technical Assistance
(138) SANTA BARBARA NEIGHBORHOOD CLINICS 414 EAST COTA STREET SANTA BARBARA,C A 93101	77-0496382	501(c)(3)	110,000				Capacity Building
(139) ALL CHILDREN'S RESEARCH INSTITUTE INC 501 6TH AVENUE SOUTH ST PETERSBURG,FL 33701	59-2481742	501(c)(3)	109,633				Research
(140) INSTITUTO FAMILIAR DE LA RAZA INC 2919 MISSION ST SAN FRANCISCO,C A 94110	94-2523608	501(c)(3)	109,372				Technical Assistance
(141) VALLEY CARE COMMUNITY CONSORITUM 7515 VAN NUYS BLVD VAN NUYS,C A 91405	20-5569606	501(c)(3)	109,195				Technical Assistance
(142) THE UNIVERSITY OF CHICAGO 6054 SOUTH DREXEL AVENUE CHICAGO,IL 60637	36-2177139	501(c)(3)	108,045				Research
(143) CHILDREN'S HOSPITAL OF THE KING'S DAUGHTERS 601 CHILDRENS LANE NORFOLK,V A 235071910	54-0506321	501(c)(3)	107,885				Research
(144) NORTHERN CALIFORNIA CENTER FOR 500 DOYLE PARK SANTA ROSA,C A 95404	93-1144835	501(c)(3)	106,250				Capacity Building
(145) BANNER HEALTH 901 E WILLETTA STREET PHOENIX,A Z 85006	45-0233470	501(c)(3)	105,266				Research
(146) UNIVERSITY OF NORTH CAROLINA PO BOX 402420 ATLANTA,G A 303842420	56-6001393	501(c)(3)	105,011				Research
(147) COLUMBIA UNIVERSITY PO BOX 29789 GENERAL POST OFFICE NEW YORK,N Y 100879789	13-5598093	501(c)(3)	104,712				Research
(148) CHARLOTTE-MECKLENBURG HOSPITAL AUTHORITY PO BOX 601979 CHARLOTTE,N C 282601979	56-0529945		103,942				Research
(149) INOVA HEALTH CARE SERVICES 8095 INNOVATION PARK DR BLDG D FAIRFAX,V A 22031	54-0620889	501(c)(3)	103,492				Research
(150) EARL HALL 4825 FERNWOOD COURT FAIRFIELD,C A 94534	82-2740858	501(c)(3)	102,500				Capacity Building
(151) DUKE UNIVERSITY PO BOX 602651 CHARLOTTE,N C 282602651	56-0532129	501(c)(3)	101,081				Research
(152) ASIAN YOUTH CENTER 100 CLARY AVENUE SAN GABRIEL,C A 91776	33-0383691	501(c)(3)	100,764				Technical Assistance
(153) ARKANSAS CHILDREN'S RESEARCH INSTITUTE 1 CHILDRENS WAY LITTLE ROCK,A R 722023159	71-0694931	501(c)(3)	100,558				Research
(154) ALTAMED HEALTH SERVICES CORPORATION 2040 CAMFIELD AVENUE LOS ANGELES,C A 90040	95-2810095	501(c)(3)	100,000				Capacity Building
(155) CHICANO FEDERATION OF SAN DIEGO 3180 UNIVERSITY AVE SAN DIEGO,C A 92104	23-7085960	501(c)(3)	100,000				Capacity Building
(156) COMMUNITY FOUNDATION FOR MONTEREY COUNTY 2354 GARDEN ROAD MONTEREY,C A 93940	94-1615897	501(c)(3)	100,000				Technical Assistance
(157) EAST VALLEY COMMUNITY HEALTH CENTER INC 420 S GLENDORA AVE WEST COVINA,C A 91790	23-7068586	501(c)(3)	100,000				Capacity Building
(158) LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL 11374 MOUNTAIN VIEW AVENUE LOMA LINDA,C A 92354	46-3214504	501(c)(3)	100,000				Capacity Building
(159) PALOMAR HEALTH FOUNDATION 2125 CITRACADO PARKWAY ESCONDIDO,C A 92029	93-3573154	501(c)(3)	100,000				Technical Assistance
(160) SCHOOL HEALTH CLINICS OF SANTA CLARA 6840 VIA DEL ORO SAN JOSE,C A 95119	77-0031679	501(c)(3)	100,000				Capacity Building
(161) VENTURA COUNTY COMMUNITY FOUNDATION 4001 MISSION OAKS BLVD CAMARILLO,C A 93012	77-0165029	501(c)(3)	100,000				Technical Assistance
(162) WELLSPACE HEALTH 777 12TH STREET SACRAMENTO,C A 95814	94-1713704	501(c)(3)	100,000				Capacity Building
(163) COMMUNICARE HEALTH CENTERS PO BOX 1260 DAVIS,C A 95617	94-2188574	501(c)(3)	99,928				Capacity Building
(164) PENN STATE UNIVERSITY 500 UNIVERSITY DRIVE HERSHEY,P A 170330850	24-6000376	STATE OF PA	99,367				Research
(165) SANTA BARBARA COTTAGE HOSPITAL PO BOX 689 SANTA BARBARA,C A 93102	95-1644629	501(c)(3)	98,933				Research
(166) CONETOE FAMILY LIFE CENTER INC 204 N RAILROAD STREET CONETOE,N C 27819	56-2373189	501(c)(3)	95,480				Capacity Building
(167) MEMORIAL HEALTH SERVICES 17360 BROOKHURST STREET FOUNTAIN VALLEY,C A 92708	95-1643381	501(c)(3)	94,150				Research
(168) RADY CHILDREN'S HOSPITAL- SAN DIEGO 3020 CHILDRENS WAY SAN DIEGO,C A 92123	95-1691313	501(c)(3)	90,060				Capacity Building
(169) ALAMEDA HEALTH SYSTEM 2060 FAIRMONT DR SAN LEANDRO,C A 94578	94-3302014		90,000				Technical Assistance
(170) COUNTY OF SHASTA 2600 PARK MARINA DRIVE REDDING,C A 96001	94-3002463	SHASTA COUNTY	90,000				Capacity Building
(171) NON-PROFIT HOUSING ASSOCIATION 369 PINE STREET SAN FRANCISCO,C A 94104	94-2741597	501(c)(3)	89,250				Technical Assistance
(172) ALBANY MEDICAL CENTER 47 NEW SCOTLAND AVE ALBANY,N Y 122083479	14-1338310	501(c)(3)	88,800				Research
(173) YALE UNIVERSITY PO BOX 1873 NEW HAVEN,C T 065081873	06-0646973	501(c)(3)	88,081				Research
(174) UNIVERSITY OF KENTUCKY RESEARCH PO BOX 031113 CLEVELAND,O H 44193	61-6033693	501(c)(3)	87,992				Research
(175) THE UNIVERSITY OF TEXAS PO BOX 4266 HOUSTON,TX 772104266	74-6001118	STATE OF TX	87,656				Research
(176) CA COALITION FOR RURAL HOUSING PROJECT 717 K STREET SACRAMENTO,C A 95814	94-2832634	501(c)(3)	85,000				Technical Assistance
(177) CFHS HOLDINGS INC 4650 LINCOLN BLVD MARINA DEL REY,C A 90292	20-1645949	501(c)(3)	85,000				Technical Assistance
(178) COMMUNITY MEMORIAL HEALTH SYSTEM 147 N BRENT STREET VENTURA,C A 93003	95-1683892	501(c)(3)	85,000				Technical Assistance
(179) OLIVE VIEW-UCLA EDUCATION & RESEARCH INS 14445 OLIVE VIEW DRIVE SYLMAR,C A 913421495	95-2249539	501(c)(3)	85,000				Technical Assistance
(180) POMONA VALLEY HOSPITAL MEDICAL CENTER 1798 N GAREY AVENUE POMONA,C A 91767	95-1115230	501(c)(3)	85,000				Technical Assistance
(181) SOUTHERN HUMBOLDT COMMUNITY HEALTHCARE 733 CEDAR STREET GARBERVILLE,C A 95542	94-2664285		85,000				Technical Assistance
(182) SUTTER COAST HOSPITAL PO BOX 619111 ROSEVILLE,C A 95661	94-2988520	501(c)(3)	85,000				Technical Assistance
(183) TEMECULA VALLEY HOSPITAL 31700 TEMECULA PARKWAY TEMECULA,C A 92592	46-1246570		85,000				Technical Assistance
(184) UHS-CORONA INC 800 S MAIN ST CORONA,C A 92882	52-1247839		85,000				Technical Assistance
(185) USC ARCADIA HOSPITAL 300 W HUNTINGTON DR ARCADIA,C A 91007	95-1643336	501(c)(3)	85,000				Technical Assistance
(186) WATSONVILLE HOSPITAL HOLDINGS INC 75 NIELSON STREET WATSONVILLE,C A 95076	84-1941118		85,000				Technical Assistance
(187) YOUNG INVINCIBLES 1201 CONNECTICUT AVE NW WASHINGTON,D C 20036	46-2214021	501(c)(3)	84,119				Technical Assistance
(188) SHASTA COUNTY CITIZENS AGAINST RACISM PO BOX 48 ANDERSON,C A 96007	68-0340000	501(c)(3)	83,250				Technical Assistance

(189) ORLANDO HEALTH INC 1414 KUHL AVENUE ORLANDO,FL 32806	59-1726273	501(c)(3)	82,863				Research
(190) MULTICARE HEALTH SYSTEM PO BOX 5299 TACOMA,WA 984150299	91-1352172	501(c)(3)	82,377				Research
(191) NEWARK BETH ISRAEL MEDICAL CENTER INC 201 LYONS AVE NEWARK,NJ 07112	22-3452311	501(c)(3)	80,983				Research
(192) COMMUNITIES CREATING OPPORTUNITY 2400 TROOST KANSAS CITY,MO 64108	43-1127845	501(c)(3)	80,011				Technical Assistance
(193) SPANISH SPEAKING UNITY COUNCIL 1900 FRUITVALE AVENUE OAKLAND,CA 94601	94-1670490	501(c)(3)	78,860				Technical Assistance
(194) SOMALI FAMILY SERVICE OF SAN DIEGO 5348 UNIVERSITY AVENUE SAN DIEGO,CA 92105	91-2065038	501(c)(3)	78,750				Technical Assistance
(195) LA FAMILIA SANA 233 N CLOVERDALE BLVD CLOVERDALE,CA 95425	86-1711899	501(c)(3)	77,250				Capacity Building
(196) ST MARY'S MEDICAL CENTER INC 901 45TH STREET WEST PALM BEACH,FL 33407	75-2932830		76,759				Research
(197) BECKMAN RESEARCH INSTITUTE OF THE CITY OF HOPE 1500 EAST DUARTE ROAD DUARTE,CA 91010	95-3432210	501(c)(3)	75,600				Research
(198) EISENHOWER MEDICAL CENTER 39000 BOB HOPE DRIVE RANCHO MIRAGE,CA 92270	95-6130458	501(c)(3)	75,000				Technical Assistance
(199) SPECIAL SERVICE FOR GROUPS INC 905 E 8TH STREET LOS ANGELES,CA 90021	95-1716914	501(c)(3)	75,000				Capacity Building
(200) ST LUKE'S REGIONAL MEDICAL CENTER LTD PO BOX 1663 BOISE,ID 837011663	82-0161600	501(c)(3)	74,259				Research
(201) ST JOSEPH'S UNIVERSITY MEDICAL CENTER 703 MAIN STREET PATERSON,NJ 07503	22-1487602	501(c)(3)	74,093				Research
(202) UNIVERSITY OF LOUISVILLE RESEARCH 300 E MARKET STREET LOUISVILLE,KY 40202	61-1029626	501(c)(3)	73,033				Research
(203) THE AMELIA ANN ADAMS WHOLE LIFE CENTER 6702 INGLEWOOD AVE STOCKTON,CA 95207	81-4694078	501(c)(3)	72,500				Capacity Building
(204) RUTGERS THE STATE UNIVERSITY OF NEW JERSEY 33 KNIGHTSBRIDGE RD PISCATAWAY,NJ 08854	22-6001086	501(c)(3)	71,917				Research
(205) VALLEY ONWARD 3646 LOS ALTOS COURT MERCED,CA 95348	85-3811059	501(c)(3)	71,250				Technical Assistance
(206) CONTRA COSTA COUNTY 2500 BATES AVENUE CONCORD,CA 94520	94-6000509	CONTRA COSTA COUNTY	70,000				Technical Assistance
(207) KAWEAH DELTA HOSPITAL FOUNDATION 216 SOUTH JOHNSON STREET VISALIA,CA 93291	94-2675456	501(c)(3)	70,000				Technical Assistance
(208) SAN FRANCISCO PUBLIC HEALTH FOUNDATION 1 HALLIDIE PLAZA SAN FRANCISCO,CA 94102	94-3117093	501(c)(3)	70,000				Technical Assistance
(209) DAYTON CHILDRENS HOSPITAL ONE CHILDRENS PLAZA DAYTON,OH 45404	31-0672132	501(c)(3)	69,235				Research
(210) NORTHEAST VALLEY HEALTH CORPORATION 1172 N MACLAY AVENUE SAN FERNANDO,CA 91340	23-7120632	501(c)(3)	68,685				Capacity Building
(211) CASE WESTERN RESERVE UNIVERSITY 10900 EUCLID AVENUE CLEVELAND,OH 441067037	34-1018992	501(c)(3)	67,818				Research
(212) EAST TENNESSEE CHILDRENS HOSPITAL 2018 CLINCH AVE KNOXVILLE,TN 37916	62-6002604	501(c)(3)	67,800				Research
(213) PRIME HEALTHCARE SERVICES-STFRANCISLLC 3630 EAST IMPERIAL HIGHWAY LYNWOOD,CA 90262	85-0737566		67,500				Technical Assistance
(214) RACE FORWARD 145 E 57TH ST NEW YORK,NY 10022	94-2759879	501(c)(3)	66,000				Capacity Building
(215) CENTRO BINACIONAL PARA EL DESARROLLO 2911 TULARE STREET FRESNO,CA 93721	77-0337939	501(c)(3)	63,750				Capacity Building
(216) VISION Y COMPROMISO 1000 ALAMEDA STREET LOS ANGELES,CA 90012	32-0071651	501(c)(3)	63,346				Technical Assistance
(217) INDIANA UNIVERSITY POBOX 78000 DETROIT,MI 48278	35-6001673	STATE OF IN	62,902				Research
(218) ADVENTIST HEALTH SYSTEMSUNBELT INC 601 EAST ROLLINS STREET ORLANDO,FL 328031248	59-0724459	501(c)(3)	62,612				Research
(219) BARTON HEALTHCARE SYSTEM 2170 SOUTH AVENUE SOUTH LAKE TAHOE,CA 96150	94-6050274	501(c)(3)	61,667				Capacity Building
(220) LEHIGH VALLEY HOSPITAL 2100 MACK BLVD ALLENTOWN,PA 18103	23-1689692	501(c)(3)	61,322				Research
(221) PROMEDICA RUSSELL J EBEID CHILDREN'S 2142 N COVE BLVD TOLEDO,OH 43606	34-4428256	501(c)(3)	61,142				Research
(222) DREXEL UNIVERSITY PO BOX 95000-1090 PHILADELPHIA,PA 191951090	23-1352630	501(c)(3)	60,825				Research
(223) SALVA 1224 E AVE S PALMDALE,CA 93550	83-0579527	501(c)(3)	60,590				Technical Assistance
(224) BAYVIEW HUNTERS POINT COMMUNITY 2095 JERROLD AVENUE SAN FRANCISCO,CA 94124	94-3221152	501(c)(3)	60,000				Capacity Building
(225) LOS ANGELES COUNTYUSC MEDICAL CENTER 1200 N STATE STREET LOS ANGELES,CA 90033	95-4192908	501(c)(3)	60,000				Technical Assistance
(226) WILLIAM BEAUMONT HOSPITAL 3811 WEST THIRTEEN MILE ROAD ROYAL OAK,MI 480736769	38-1459362	501(c)(3)	59,834				Research
(227) DENVER YOUTH PROGRAM 1625 EAST 35TH AVE DENVER,CO 80205	74-2486208	501(c)(3)	58,625				Capacity Building
(228) THE CLEVELAND CLINIC FOUNDATION POBOX 931562 CLEVELAND,OH 44193	34-0714585	501(c)(3)	58,435				Research
(229) COMMUNITY PARTNERS 425 ATLANTIC AVENUE LONG BEACH,CA 90802	95-4302067	501(c)(3)	57,500				Capacity Building
(230) CALIFORNIA INDIAN MUSEUM & CULTURAL CENTER 5250 AERO DR SANTA ROSA,CA 95403	94-3244506	501(c)(3)	57,250				Technical Assistance
(231) CENTRO DE UNIDAD POPULAR BENITO JUAREZ 9009 WEEDPATCH HWY LAMONT,CA 93241	26-0525829		56,250				Capacity Building
(232) CULTIVA LA SALUD 2409 MERCED ST SUITE 103 FRESNO,CA 93721	84-3696370	501(c)(3)	56,250				Technical Assistance
(233) METHODIST CHILDREN'S HOSPITAL LB 1132- PO BOX 35143 SEATTLE,WA 981245143	75-2428911	501(c)(3)	56,244				Research
(234) COUNTY OF SAN JOAQUIN P O BOX 1020 STOCKTON,CA 95201	94-6000531	SAN JOAQUIN COUNTY	55,836				Capacity Building
(235) CATHOLIC CHARITIES OF THE DIOCESE OF STOCKTON 1106 N EL DORADO STREET STOCKTON,CA 95202	94-1629114	501(c)(3)	55,500				Capacity Building
(236) FAITH IN THE VALLEY 2027 E HARDING WAY STOCKTON,CA 95205	77-0635938	501(c)(3)	55,500				Technical Assistance
(237) THE GENERAL HOSPITAL CORPORATION 55 FRUIT ST BOSTON,MA 021142696	04-2697983	501(c)(3)	55,342				Research
(238) SOCIAL AND ENVIRONMENTAL ENTREPRENEURS 23564 CALABASAS ROAD CALABASAS,CA 91302	95-4116679	501(c)(3)	55,230				Capacity Building
(239) SCOPA HAS A DREAM INC 16003 HEALDSBURG AVENUE HEALDSBURG,CA 95448	27-3044487	501(c)(3)	55,000				Technical Assistance
(240) THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT SAN ANTONIO PO BOX 1898 SAN ANTONIO,TX 782971898	74-1586031	STATE OF TX	54,849				Research
(241) ALMA FAMILY SERVICES 900 CORPORATE CENTER DRIVE MONTEREY PARK,CA 91754	95-2959331	501(c)(3)	54,710				Capacity Building
(242) SINAI HOSPITAL OF BALTIMORE INC 2401 WEST BELVEDERE AVENUE BALTIMORE,MD 21215	52-0486540	501(c)(3)	54,568				Research
(243) RHODE ISLAND HOSPITAL 167 POINT STREET BOX 42 PROVIDENCE,RI 02903	05-0258954	501(c)(3)	53,715				Research
(244) COLUMBIA HOSPITAL AT MEDICAL CITY DALLAS 7777 FOREST LANE DALLAS,TX 75230	62-1682198		53,500				Research
(245) URBAN LEAGUE OF METROPOLITAN ST LOUIS 1408 NORTH KINGSHIGHWAY BLVD ST LOUIS,MO 63113	43-0653605	501(c)(3)	53,173				Capacity Building
(246) EASTERN MAINE MEDICAL CENTER LFCI 33 WHITING HILL RD BREWER,ME 04412	01-0211501	501(c)(3)	52,738				Research
(247) UNIVERSITY OF ROCHESTER 518 HYLAN BUILDING ROCHESTER,NY 14627	16-0743209	501(c)(3)	51,679				Research
(248) SARAH CANNON RESEARCH INSTITUE LLC 250 25th Ave N Nashville,TN 37203	20-1557751		51,050				Research
(249) ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI BOX 3500 NEW YORK,NY 10029	13-6171197	501(c)(3)	50,814				Research
(250) ACCE INSTITUTE 3655 S GRAND AVENUE LOS ANGELES,CA 90007	27-1487442	501(c)(3)	50,000				Capacity Building
(251) BEAR VALLEY COMMUNITY HEALTHCARE 41870 GARSTIN DR BIG BEAR LAKE,CA 92315	33-0294751		50,000				Technical Assistance
(252) CALIFORNIA INDIAN MANPOWER CONSORTIUM 738 NORTH MARKET BOULEVARD SACRAMENTO,CA 95834	94-2472564	501(c)(3)	50,000				Technical Assistance
(253) CENTRO LA FAMILIA ADVOCACY SERVICESINC 302 FRESNO STREET FRESNO,CA 93706	77-0310310	501(c)(3)	50,000				Capacity Building
(254) CHARLES R DREW UNIVERSITY OF MEDICINE 1721 EAST 120TH STREET LOS ANGELES,CA 900593051	95-6151774	501(c)(3)	50,000				Capacity Building

(255) CHHP MANAGEMENT LLC 2623 E SLAUSON AVENUE HUNTINGTON PARK,CA 90255	27-2104876		50,000				Technical Assistance
(256) CHILDREN'S NETWORK OF SOLANO COUNTY 827 MISSOURI STREET FAIRFIELD,CA 94533	68-0014506	501(c)(3)	50,000				Capacity Building
(257) CHOICE IN AGING 490 GOLF CLUB ROAD PLEASANT HILL,CA 94523	94-2822559	501(c)(3)	50,000				Technical Assistance
(258) COALINGA MEDICAL CENTER LLC 1191 PHELPS AVENUE COALINGA,CA 93210	83-4525898		50,000				Technical Assistance
(259) COALITION FOR ECONOMIC SURVIVAL 14320 VENTURA BLVD SHERMAN OAKS,CA 91423	95-3216284		50,000				Technical Assistance
(260) COLUSA MEDICAL CENTER LLC 199 EAST WEBSTER STREET COLUSA,CA 95932	81-4005462		50,000				Technical Assistance
(261) CONGREGATIONS ORGANIZED FOR PROPHETIC ENGAGEMENT 1505 WEST HIGHLAND AVENUE SAN BERNARDINO,CA 92411	33-0938212	501(c)(3)	50,000				Capacity Building
(262) CPH HOSPITAL MANAGEMENT LLC 13100 STUDEBAKER RD NORWALK,CA 90650	45-1738512		50,000				Technical Assistance
(263) DESERT VALLEY HOSPITAL LLC 3480 EAST GUASTI ROAD ONTARIO,CA 91761	33-0502805		50,000				Technical Assistance
(264) ELADH LP 4060 E WHITTIER BLVD LOS ANGELES,CA 90023	76-0594559		50,000				Technical Assistance
(265) FRESNO BUILDING HEALTHY COMMUNITIES 367 N FIRST STREET FRESNO,CA 93702	81-3711032	501(c)(3)	50,000				Capacity Building
(266) GARDENA HOSPITAL LP 1145 W REDONDO BEACH BLVD GARDENA,CA 90247	76-0594558		50,000				Technical Assistance
(267) GLENN MEDICAL CENTER INC 1133 W SYCAMORE ST WILLOWS,CA 95988	20-0494719	501(c)(3)	50,000				Technical Assistance
(268) HAYWARD SISTERS HOSPITAL 27200 CALAROGA AVENUE HAYWARD,CA 945454383	94-1668344	501(c)(3)	50,000				Technical Assistance
(269) KERN MEDICAL CENTER FOUNDATION 3511 UNION AVENUE BAKERSFIELD,CA 93305	36-4642420	501(c)(3)	50,000				Technical Assistance
(270) LONG BEACH FORWARD INC 425 ATLANTIC AVE LONG BEACH,CA 90802	85-1047927	501(c)(3)	50,000				Technical Assistance
(271) MADERA COMMUNITY HOSPITAL 1250 E ALMOND AVE MADERA,CA 93637	23-7429117	501(c)(3)	50,000				Technical Assistance
(272) MARTIN LUTHER KING JR-LOS ANGELES 1680 E 120TH STREET LOS ANGELES,CA 90059	27-4658935	501(c)(3)	50,000				Technical Assistance
(273) NATIVIDAD MEDICAL FOUNDATION 1441 CONSTITUTION BLVD SALINAS,CA 93906	77-0194989	501(c)(3)	50,000				Technical Assistance
(274) NEIGHBORHOOD WELLNESS FOUNDATION 7648 MARINA COVE SACRAMENTO,CA 95831	47-4874487	501(c)(3)	50,000				Capacity Building
(275) NEW GEORGIA PROJECT INC 830 GLENWOOD AVENUE SE ATLANTA,GA 30316	82-1348307	501(c)(3)	50,000				Capacity Building
(276) NORCAL HEALTHCONNECT 1375 UNIVERSITY AVE HEALDSBURG,CA 95448	85-2390012		50,000				Technical Assistance
(277) NORTHERN INYO HEALTHCARE DISTRICT 150 PIONEER LN BISHOP,CA 93514	95-6005449	STATE OF CA	50,000				Technical Assistance
(278) NORTHERN VALLEY INDIAN HEALTH INC 257 N BUTTE ST WILLOWS,CA 95988	94-1747220	501(c)(3)	50,000				Capacity Building
(279) PRIME HEALTHCARE ANAHEIM LLC 3033 W ORANGE AVE ANAHEIM,CA 928043156	20-5245674		50,000				Technical Assistance
(280) PRIME HEALTHCARE CENTINELA LLC 555 EAST HARDY STREET INGLEWOOD,CA 90301	26-1150758		50,000				Technical Assistance
(281) PRIME HEALTHCARE FOUNDATION INC 4929 VAN NUYS BLVD SHERMAN OAKS,CA 91403	20-2546649		50,000				Technical Assistance
(282) PRIME HEALTHCARE FOUNDATIONINC 16237 VENTURA BLVD ENCINO,CA 91436	26-2128507		50,000				Technical Assistance
(283) PRIME HEALTHCARE HUNTINGTON BEACH LLC 17772 BEACH BLVD HUNTINGTON BEACH,CA 926476819	20-5252882		50,000				Technical Assistance
(284) PRIME HEALTHCARE LA PALMA LLC 7901 WALKER ST LA PALMA,CA 906231722	20-5253134		50,000				Technical Assistance
(285) PRIME HEALTHCARE SERVICES GARDEN GROVE 12601 GARDEN GROVE BLVD GARDEN GROVE,CA 928431908	26-2583411		50,000				Technical Assistance
(286) PRIME HEALTHCARE SERVICES-MONTCLAIR LLC 5000 SAN BERNARDINO STREET MONTCLAIR,CA 91763	20-2898771		50,000				Technical Assistance
(287) QUEEN OF THE VALLEY FOUNDATION PO BOX 2069 NAPA,CA 94558	23-7081153	501(c)(3)	50,000				Technical Assistance
(288) QUEENSCARE HEALTH CENTERS 950 SOUTH GRANDE AVE LOS ANGELES,CA 90015	95-3702136	501(c)(3)	50,000				Capacity Building
(289) RIDGECREST REGIONAL HOSPITAL 1081 N CHINA LAKE BLVD RIDGECREST,CA 93555	95-2082686	501(c)(3)	50,000				Technical Assistance
(290) ROOTS COMMUNITY HEALTH CENTER 7272 MACARTHUR BLVD OAKLAND,CA 94605	26-2583954	501(c)(3)	50,000				Technical Assistance
(291) ROSE FAMILY CREATIVE EMPOWERMENT CENTER 7000 FRANKLIN BLVD SACRAMENTO,CA 95823	80-0968840	501(c)(3)	50,000				Capacity Building
(292) SACRAMENTO NATIVE AMERICAN HEALTH CENTER 2020 J STREET SACRAMENTO,CA 95811	20-4287737	501(c)(3)	50,000				Capacity Building
(293) SALINAS VALLEY MEMORIAL HEALTHCARE 450 E ROMIE LANE SALINAS,CA 93901	94-6004020	501(c)(3)	50,000				Technical Assistance
(294) SAN BERNARDINO MOUNTAINS COMMUNITY 29101 HOSPITAL ROAD LAKE ARROWHEAD,CA 92352	26-2201665		50,000				Technical Assistance
(295) SOUTHERN INYO HEALTHCARE DISTRICT PO BOX 1009 LONE PINE,CA 935451009	95-6005450	STATE OF CA	50,000				Technical Assistance
(296) SOUTHERN MONO HEALTHCARE DISTRICT 85 SIERRA PARK RD MAMMOTH LAKES,CA 93546	95-3154530	501(c)(3)	50,000				Technical Assistance
(297) STANFORD HEALTH CARE PO BOX 742835 LOS ANGELES,CA 900742835	94-6174066	501(c)(3)	50,000				Technical Assistance
(298) STEP UP LOUISIANA ORGANIZING FUND 2022 ST BERNARD AVE NEW ORLEANS,LA 70116	85-1061102	501(c)(3)	50,000				Capacity Building
(299) STONE SOUP FRESNO 1345 E BULLDOG LANE FRESNO,CA 93710	77-0430680	501(c)(3)	50,000				Technical Assistance
(300) TABERNACLE COMMUNITY DEVELOPMENT 945 SO 45TH RICHMOND,CA 94804	94-3402767	501(c)(3)	50,000				Technical Assistance
(301) TAHOE FOREST HOSPITAL DISTRICT 10121 PINE AVE TRUCKEE,CA 96161	94-6004062	STATE OF CA	50,000				Technical Assistance
(302) TENANTS TOGETHER PO BOX 410325 SAN FRANCISCO,CA 94141	26-1777917	501(c)(3)	50,000				Technical Assistance
(303) VERTIAS HEALTH SERVICES INC 5451 WALNUT AVE CHINO,CA 91710	33-0928285		50,000				Technical Assistance
(304) WEST OAKLAND HEALTH COUNCIL 700 ADELINE STREET OAKLAND,CA 94607	94-1667294	501(c)(3)	50,000				Capacity Building
(305) YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE EAST BAY 263 S 20TH STREET RICHMOND,CA 94804	94-1156317	501(c)(3)	50,000				Technical Assistance
(306) OPEN DOOR COMMUNITY HEALTH CENTERS 1275 8TH STREET ARCATA,CA 95521	95-2671433	501(c)(3)	49,994				Capacity Building
(307) MAKE THE ROAD STATES INC 301 GROVE STREET BROOKLYN,NY 11237	84-3988830	501(c)(3)	49,980				Capacity Building
(308) H LEE MOFFITT CANCER CENTER AND PO BOX 742801 ATLANTA,GA 303742801	59-2451713	501(c)(3)	49,974				Research
(309) LITTLE ROSES PRESCHOOL 1650 CROCKETT BLVD CROCKETT,CA 94525	47-5223632	501(c)(3)	49,850				Technical Assistance
(310) ARKANSAS COMMUNITY INSTITUTE 2101 S MAIN STREET LITTLE ROCK,AR 72206	72-1072223	501(c)(3)	49,570				Capacity Building
(311) MAINE PEOPLE'S RESOURCE CENTER 565 CONGRESS ST PORTLAND,ME 04101	22-2586108	501(c)(3)	49,360				Capacity Building
(312) UNIVERSITY OF SOUTH ALABAMA 307 UNIVERSITY BLVD MOBILE,AL 36688	63-0477348	501(c)(3)	49,165				Research
(313) ARIZONA CENTER FOR EMPOWERMENT 5716 N 19TH AVE PHOENIX,AZ 85015	27-2366780	501(c)(3)	48,000				Capacity Building
(314) DARTMOUTH-HITCHCOCK CLINICMEDICAL CTR ONE MEDICAL CENTER DRIVE LEBANON,NH 03756	22-2519596	501(c)(3)	47,602				Research
(315) ACTION INSTITUTE NC 1817 CENTRAL AVE CHARLOTTE,NC 28205	56-1088116	501(c)(3)	47,375				Capacity Building
(316) COMMUNITY MEDICAL CENTERS INC 7210 MURRAY DRIVE STOCKTON,CA 95210	94-2437106	501(c)(3)	47,338				Capacity Building
(317) PACOIMA BEAUTIFUL 12510 VAN NUYS BLVD PACOIMA,CA 91331	95-4770745	501(c)(3)	46,321				Technical Assistance
(318) COUNTY OF SAN LUIS OBISPO 2180 JOHNSON AVE SAN LUIS OBISPO,CA 93401	95-6000939	SLO COUNTY	45,000				Capacity Building
(319) SOUTHERN CALIFORNIA GRANTMAKERS 1000 N ALAMEDA STREET LOS ANGELES,CA 90012	95-2831058	501(c)(3)	42,500				Technical Assistance
(320) ONEFUTURE COACHELLA VALLEY 41-550 ECLECTIC STREET PALM DESERT,CA 92260	81-3653698	501(c)(3)	42,480				Technical Assistance

(321) NATIONAL CENTER FOR HEALTHY HOUSING INC 10320 LITTLE PATUXENT PKWY COLUMBIA,MD 21044	52-1792579	501(c)(3)	41,319				Technical Assistance
(322) HTI HOSPITAL HOLDING INC 4700 WATERS AVENUE SAVANNAH,GA 31404	82-1969974		41,317				Research
(323) NORTHWESTERN UNIVERSITY 633 CLARK STREET EVANSTON,IL 602081112	36-2167817	501(c)(3)	40,346				Research
(324) GREATER DAYTON UNION COOPERATIVE 33 1ST ST DAYTON,OH 45402	81-3470466	501(c)(3)	40,000				Technical Assistance
(325) REGENTS OF THE UNIVERSITY OF CALIFORNIA MERCED PO BOX 2450 MERCED,CA 95344	27-0093858	STATE OF CA	40,000				Technical Assistance
(326) THE PRESBYTERIAN HOSPITAL 2927 LYNDHURST AVENUE WINSTON SALEM,NC 27103	56-0554230	501(c)(3)	39,803				Research
(327) RICHMOND AREA MULTI-SERVICES INC 4355 GEARY BLVD SAN FRANCISCO,CA 94118	23-7389436	501(c)(3)	39,648				Research
(328) HENRY M JACKSON FOUNDATION FOR THE ADVANCEMENT OF MILITARY MEDICINE 6720 A ROCKLEDGE DRIVE BETHESDA,MD 20817	52-1317896	501(c)(3)	39,189				Research
(329) EAST CAROLINA UNIVERSITY 1525 WT HARRIS BOULEVARD CHARLOTTE,NC 282752162	56-6000403	501(c)(3)	38,628				Research
(330) BERKELEY AIR MONITORING GROUP 1935 ADDISON ST BERKELEY,CA 94704	26-3881064		38,550				Research
(331) DOWNTOWN BOXING GYM YOUTH PROGRAM 6445 E VERNOR HIGHWAY DETROIT,MI 48207	27-5106242	501(c)(3)	37,905				Capacity Building
(332) CENTRAL MICHIGAN UNIVERSITY 304 WARRINER HALL MOUNT PLEASANT,MI 48859	38-6004447	501(c)(3)	37,875				Research
(333) SOUTHWEST COMMUNITY CORPORATION 446 RANDOLPH STREET SAN FRANCISCO,CA 94132	94-3297348	501(c)(3)	37,500				Technical Assistance
(334) VALLEY CENTER FOR THE BLIND 3417 W SHAW AVE FRESNO,CA 93711	94-2255626	501(c)(3)	37,500				Capacity Building
(335) THE NEMOURS FOUNDATION 10140 CENTURION PARKWAY JACKSONVILLE,FL 322560532	59-0634433	501(c)(3)	37,095				Research
(336) CALEXICO WELLNESS CENTER 420 HEFFERNAN AVE CALEXICO,CA 92231	36-4880887	501(c)(3)	37,000				Capacity Building
(337) UNIVERSITY OF MIAMI PO BOX 405803 ATLANTA,GA 303845803	59-0624458	501(c)(3)	36,000				Research
(338) REGENTS OF THE UNIVERSITY OF CALIFORNIA AT BERKELEY 1608 FOURTH STREET BERKELEY,CA 947101103	94-6002123	501(c)(3)	35,771				Research
(339) CHILDREN'S HOSPITAL MEDICAL CENTER ONE PERKINS SQUARE AKRON,OH 443081062	34-0714357	501(c)(3)	35,092				Research
(340) COUNTY OF MONO PO BOX 476 BRIDGEPORT,CA 93517	95-6005661	MONO COUNTY	35,000				Capacity Building
(341) PENINSULA CONFLICT RESOLUTION CENTER 1670 S AMPHLETT BLVD SAN MATEO,CA 94402	77-0144000	501(c)(3)	35,000				Capacity Building
(342) PILIPINO BAYANIHAN RESOURCE CENTER 200 NORTHGATE AVENUE DALY CITY,CA 94015	94-3129745	501(c)(3)	35,000				Capacity Building
(343) PLACER COMMUNITY FOUNDATION 219 MAPLE STREET AUBURN,CA 95603	20-1485011	501(c)(3)	35,000				Capacity Building
(344) RIDEOUT MEMORIAL HOSPITAL PO BOX 619002 ROSEVILLE,CA 956619002	94-1387866	501(c)(3)	35,000				Capacity Building
(345) SISKIYOU COMMUNITY RESOURCE PO BOX 206 YREKA,CA 96097	68-0191354	501(c)(3)	35,000				Capacity Building
(346) COUNTY OF MENDOCINO 1120 SOUTH DORA STREET UKIAH,CA 95482	94-6000520	MENDOCINO COUNTY	34,999				Capacity Building
(347) VENICE FAMILY CLINIC 604 ROSE AVE VENICE,CA 90291	95-2769432	501(c)(3)	34,581				Capacity Building
(348) PRISMA HEALTH - MIDLANDS PO BOX 748580 ATLANTA,GA 303748580	58-2296052	501(c)(3)	33,651				Research
(349) COUNTY OF MARIPOSA PO BOX 99 MARIPOSA,CA 95338	94-6000880	MARIPOSA COUNTY	33,470				Capacity Building
(350) TEXAS TECH UNIVERSITY HEALTH SCIENCES 1400 S COULTER ST AMARILLO,TX 79106	75-2668014	STATE OF TX	31,664				Research
(351) SAN DIEGO WORKFORCE PARTNERSHIP INC 9246 LIGHTWAVE AVENUE SAN DIEGO,CA 92123	33-0660504	501(c)(3)	31,000				Capacity Building
(352) UNIVERSITY OF VERMONT AND STATE AGRICULTURAL COLLEGE 85 SOUTH PROSPECT STREET BURLINGTON,VT 05405	03-0179440	501(c)(3)	30,677				Research
(353) LOYOLA UNIVERSITY OF CHICAGO 820 N MICHIGAN AVENUE CHICAGO,IL 60611	36-1408475	501(c)(3)	30,300				Research
(354) PRESBYTERIAN HEALTHCARE SERVICES PO BOX 27728 ALBUQUERQUE,NM 87125	85-0105601	501(c)(3)	30,042				Research
(355) CALIFORNIA HAWAII STATE CONFERENCE 1026 FLORIN ROAD SACRAMENTO,CA 95831	85-4382980		30,000				Capacity Building
(356) CENTRAL CALIFORNIA ENVIRONMENTAL JUSTICE NETWORK 2297 GOSHEN AVE CLOVIS,CA 93611	87-1795259	501(c)(3)	30,000				Capacity Building
(357) ELANA NEEDLE 260 MADISON AVENUE NEW YORK CITY,NY 10016	88-3864569		30,000				Technical Assistance
(358) NATIONAL ASSOCIATION FOR THE ADVANCEMENT OF COLORED PEOPLE PO BOX 1092 SANTA MARIA,CA 93456	77-0423554	501(C)(4)	30,000				Capacity Building
(359) NATIONAL COALITION AGAINST PRESCRIPTION PO BOX 87 SAN RAMON,CA 94583	90-0769605	501(c)(3)	30,000				Technical Assistance
(360) TRAINING INSTITUTE FOR LEADERSHIP 920 PERALTA STREET OAKLAND,CA 94607	68-0437852	501(c)(3)	30,000				Capacity Building
(361) ST LOUIS UNIVERSITY 3700 WEST PINE MALL ST LOUIS,MO 63108	43-0654872	501(c)(3)	29,888				Research
(362) WESLEYAN UNIVERSITY 291 MAIN STREET MIDDLETOWN,CT 06457	06-0646959	501(c)(3)	29,811				Technical Assistance
(363) VARIETY CHILDREN'S HOSPITAL 3100 SW 62ND AVE MIAMI,FL 33155	59-0638499	501(c)(3)	29,803				Research
(364) PRISMA HEALTH - UPSTATE PO BOX 748580 ATLANTA,GA 303748580	81-1723202	501(c)(3)	28,353				Research
(365) CURATORS OF THE UNIVERSITY OF MISSOURI PO BOX 807012 KANSAS CITY,MO 641807012	43-6003859	STATE OF MO	27,789				Research
(366) SAINT FRANCIS HOSPITAL 6600 S YALE AVENUE TULSA,OK 74136	73-0700090	501(c)(3)	27,735				Research
(367) CONTINUING EDUCATION OF THE BAR dba Regents of University of CA 405 HILGARD AVE LOS ANGELES,CA 900957089	95-6006143	501(c)(3)	27,252				Research
(368) UNIVERSITY OF MASSACHUSETTS WORCESTER 55 LAKE AVE NORTH WORCESTER,MA 01655	04-3167352	STATE OF MA	27,150				Research
(369) LOMPOC VALLEY MEDICAL CENTER 1515 E OCEAN AVENUE LOMPOC,CA 93436	95-6001880		26,304				Capacity Building
(370) BLACK WELLNESS & PROSPERITY CENTER 1133 S STREET FRESNO,CA 93721	84-3848144	501(c)(3)	25,000				Technical Assistance
(371) EL CAMINO HOSPITAL 2500 GRANT ROAD MOUNTAIN VIEW,CA 94040	94-3167314	501(c)(3)	25,000				Technical Assistance
(372) EXCEPTIONAL PARENTS UNLIMITED 4440 N FIRST STREET FRESNO,CA 93726	77-0263702	501(c)(3)	25,000				Capacity Building
(373) MIXTECOINDIGENA COMMUNITY ORGANIZING PROJECT 520 W FIFTH STREET OXNARD,CA 93030	30-0045901	501(c)(3)	25,000				Capacity Building
(374) YOUNG PEOPLE IN RECOVERY 201 E 4TH STREET LOVELAND,CO 80537	46-4109067	501(c)(3)	25,000				Technical Assistance
(375) MICHIGAN STATE UNIVERSITY 426 AUDITORIUM ROAD EAST LANSING,MI 48824	38-6005984	501(c)(3)	24,858				Research
(376) BAYLOR RESEARCH INSTITUTE 3434 LIVE OAK DALLAS,TX 75204	75-1921898	501(c)(3)	24,575				Research
(377) SOUTH BROWARD HOSPITAL DISTRICT PO BOX 538514 ATLANTA,GA 30353	59-6014973	501(c)(3)	24,367				Research
(378) MH MISSION HOSPITAL LLLP 1 HOSPITAL DRIVE ASHEVILLE,NC 28801	83-2048706		24,092				Research
(379) ST VINCENT HOSPITAL AND HEALTH CARE 835 S VAN BUREN STREET GREEN BAY,WI 54301	35-0869066	501(c)(3)	23,958				Research
(380) PURDUE UNIVERSITY 23510 NETWORK PLACE CHICAGO,IL 606731235	13-5602041	STATE OF IN	23,514				Technical Assistance
(381) ORGANIZACION EN CALIFORNIA DE LIDERES PO BOX 20033 OXNARD,CA 93034	95-4611282	501(c)(3)	23,500				Technical Assistance
(382) MAIMONIDES MEDICAL CENTER 4802 TENTH AVENUE BROOKLYN,NY 11219	11-1635081	501(c)(3)	23,083				Research
(383) KAPIOLANI MEDICAL CENTER FOR WOMEN 55 MERCHANT STREET HONOLULU,HI 96813	99-0177350	501(c)(3)	22,101				Research
(384) COUNTY OF TEHAMA PO BOX 400 RED BLUFF,CA 96080	94-6000543	TEHAMA COUNTY	21,990				Capacity Building

(385) EL DORADO COUNTY COMMUNITY HEALTH CENTER 4212 MISSOURI FLAT RD PLACERVILE,CA 95667	42-1533531	501(c)(3)	21,666				Capacity Building
(386) THE UNIVERSITY OF ARIZONA PO BOX 41867 TUCSON,AZ 85717	74-2652689	STATE OF AZ	21,592				Research
(387) CONTROLLER OF MARYLAND PO BOX 41428 BALTIMORE,MD 212036428	52-6002033	STATE OF MD	21,400				Research
(388) MOVIMIENTO CULTURAL DE LA UNION INDIGENA 135 CAMINO DORADO NAPA,CA 94558	46-1037804	501(c)(3)	21,000				Capacity Building
(389) RAIZES COLLECTIVE PO BOX 8606 SANTA ROSA,CA 95407	47-3129493	501(c)(3)	21,000				Capacity Building
(390) MAINEHEALTH ONE DANA COURT WESTBROOK,ME 04092	01-0238552	501(c)(3)	20,812				Research
(391) HAWAII PUBLIC HEALTH INSTITUTE 850 RICHARDS STREET HONOLULU,HI 96813	68-0637054	501(c)(3)	20,681				Capacity Building
(392) ADVENTIST HEALTH CLEARLAKE HOSPITAL INC PO 6701 CLEARLAKE,CA 95422	68-0395149	501(c)(3)	20,000				Technical Assistance
(393) AFRICA HOUSE SACRAMENTO 9215 ROSE PARADE WAY SACRAMENTO,CA 95826	84-2637035	501(c)(3)	20,000				Capacity Building
(394) AFRICAN ECONOMIC DEVELOPMENT SOLUTIONS 1821 UNIVERSITY AVE W ST PAUL,MN 55104	80-0345712	501(c)(3)	20,000				Capacity Building
(395) COMMUNITIES FIRST INC 415 W COURT STREET FLINT,MI 48503	27-3600343	501(c)(3)	20,000				Technical Assistance
(396) DOLORES C HUERTA FOUNDATION PO BOX 2087 BAKERSFIELD,CA 93303	91-2145992	501(c)(3)	20,000				Technical Assistance
(397) FRESNO COUNTY ECONOMIC OPPORTUNITIES 1920 MARIPOSA MALL FRESNO,CA 93721	94-1606519	501(c)(3)	20,000				Technical Assistance
(398) INFINITE GIVING INC 3659 KIEKEBUSCH COURT CARMICHAEL,CA 95608	86-3853195	501(c)(3)	20,000				Capacity Building
(399) MARIA PARRA CANO 6427 S CENTRAL AVE PHOENIX,AZ 85042	82-4846555	501(c)(3)	20,000				Technical Assistance
(400) MIAMI WORKERS CENTER 10800 BISCAYNE BLVD MIAMI,FL 33161	65-0942224	501(c)(3)	20,000				Technical Assistance
(401) MQVN COMMUNITY DEVELOPMENT CONSORTIUM 4626 ALCEE FORTIER BLVD NEW ORLEANS,LA 70129	89-2962186		20,000				Technical Assistance
(402) POWER CENTER COMMUNITY DEVELOPMENT 6120 WINCHESTER RD MEMPHIS,TN 38115	20-1578885	501(c)(3)	20,000				Capacity Building
(403) SANKOFA COMMUNITY DEVELOPMENT 5200 DAUPHINE ST NEW ORLEANS,LA 70117	26-3471054	501(c)(3)	20,000				Technical Assistance
(404) SPANISH LAKE COMMUNITY DEVELOPMENT 11840 BELLEFONTAINE RD ST LOUIS,MO 63138	46-4952594	501(c)(3)	20,000				Capacity Building
(405) VIRGINIA COMMUNITY VOICE PO BOX 26972 RICHMOND,VA 23261	83-3596756	501(c)(3)	20,000				Technical Assistance
(406) AS ONE FOUNDATION 9575 ASHLEY OAKS DRIVE JONESBORO,GA 30236	20-8431214	501(c)(3)	19,000				Research
(407) BAYSTATE MEDICAL CENTER INC 759 CHESTNUT STREET SPRINGFIELD,MA 011990001	04-2790311	501(c)(3)	18,788				Research
(408) HUMANIDAD THERAPY AND EDUCATION SERVICES 1260 N DUTTON AVENUE SANTA ROSA,CA 95401	46-3725156	501(c)(3)	18,500				Capacity Building
(409) PEDIATRIC AND FAMILY MEDICAL CENTER 1530 S OLIVE STREET LOS ANGELES,CA 90015	95-1690966	501(c)(3)	17,669				Capacity Building
(410) HCA-HEALTHONE LLC 1719 E 19TH AVENUE DENVER,CO 80218	84-1321373		17,600				Research
(411) SACRAMENTO NAACP BRANCH 4540 FLORIN ROAD UNIT E258 SACRAMENTO,CA 95823	94-6172654	501(C)(4)	17,500				Capacity Building
(412) SOUTHERN ILLINOIS UNIVERSITY SCHOOL OF MEDICINE PO BOX 19607 SPRINGFIELD,IL 627949607	37-6005961	501(c)(3)	17,075				Research
(413) TRI CITY HEALTHCARE DISTRICT 4002 VISTA WAY OCEANSIDE,CA 92056	95-2126937	STATE OF CA	16,667				Technical Assistance
(414) STATE OF WEST VIRGINIA 886 CHESTNUT RIDGE ROAD MORGANTOWN,WV 26506	55-6000842	STATE OF WV	16,367				Research
(415) ST JOSEPH'S HOSPITAL INC 3001 W DR MARTIN LUTHER KING JR TAMPA,FL 33607	59-0774199	501(c)(3)	16,325				Research
(416) SAN ANTONIO REGIONAL HOSPITAL 999 SAN BERNARDINO RD UPLAND,CA 91786	95-1183919	501(c)(3)	16,304				Technical Assistance
(417) CEDARS SINAI MEDICAL CENTER PO BOX 48955 LOS ANGELES,CA 90048	95-1644600	501(c)(3)	15,400				Research
(418) ARIZONA CENTER FOR DISABILITY LAW 5025 EAST WASHINGTON ST PHOENIX,AZ 85034	23-7408586	501(c)(3)	15,000				Technical Assistance
(419) BUILDING OPPORTUNITIES FOR SELF SUFFICIENCY 1918 UNIVERSITY AVENUE BERKELEY,CA 94704	51-0173390	501(c)(3)	15,000				Capacity Building
(420) FIGHTING BACK SANTA MARIA VALLEY 201 SOUTH MILLER STREET SANTA MARIA,CA 93454	65-1234981	501(c)(3)	15,000				Capacity Building
(421) LA CLINICA DE LA RAZA INC POBOX 22210 OAKLAND,CA 946232210	94-1744108	501(c)(3)	15,000				Technical Assistance
(422) ABILITY 360 5025 E WASHINGTON ST PHOENIX,AZ 850341101	86-0486447	501(c)(3)	14,615				Technical Assistance
(423) ASCENSION ST JOHN HOSPITAL 28000 DEQUINDRE RD WARREN,MI 480922468	38-1359063	501(c)(3)	14,092				Research
(424) LEE MEMORIAL HEALTH SYSTEM 9981 HEALTH PARK DRIVE FORT MYERS,FL 33901	59-0714812	501(c)(3)	14,029				Research
(425) INDEPENDENT LIVING CENTER OF SOUTHERN CA 14141 HAYNES STREET VAN NUYS,CA 91401	95-3026060	501(c)(3)	13,615				Technical Assistance
(426) DISABILITY COMMUNITY RESOURCE CENTER 12901 VENICE BLVD LOS ANGELES,CA 90066	95-3013310	501(c)(3)	13,530				Technical Assistance
(427) Brown University of Providence 69 BROWN STREET PROVIDENCE,RI 02912	05-0258809	501(c)(3)	13,429				Research
(428) RESEARCH FOUNDATION OF THE CITY 230 WEST 41ST STREET NEW YORK,NY 10036	13-1988190	501(c)(3)	12,375				Research
(429) AZUSA PACIFIC UNIVERSITY 901 E ALOSTA AVE AZUSA,CA 91702	95-1744369	501(c)(3)	12,366				Research
(430) ZERO BREAST CANCER 30 N SAN PEDRO RD SAN RAFAEL,CA 94903	68-0386016	501(c)(3)	12,356				Research
(431) THE RECTOR AND VISITORS OF THE UNIVERSITY OF VIRGINIA PO BOX 400195 CHARLOTTESVILLE,VA 229044195	54-6001796	501(c)(3)	12,008				Research
(432) ASCENSION SETON PO BOX 204242 DALLAS,TX 75320	74-1109643	501(c)(3)	12,000				Research
(433) COUNTY OF TUOLUMNE 20111 CEDAR RD SONORA,CA 95370	94-6000547	TUOLUMNE COUNTY	12,000				Capacity Building
(434) LOCAL INDIANS FOR EDUCATION INC 1294 LAKE BLVD REDDING,CA 96003	94-2376538	501(c)(3)	12,000				Capacity Building
(435) PLANNED PARENTHOOD GULF COAST 4600 GULF FREEWAY HOUSTON,TX 77023	74-1100163	501(c)(3)	12,000				Technical Assistance
(436) BREASTFEEDING TASK FORCE OF GREATER LOS ANGELES 2851 WEST 120TH ST HAWTHORNE,CA 90250	95-4861413	501(c)(3)	11,840				Capacity Building
(437) SPECTRUM HEALTH HOSPITALS 100 MICHIGAN STREET NE GRAND RAPIDS,MI 49503	38-1360529	501(c)(3)	11,740				Research
(438) UNITED WAY OF NORTHERN CALIFORNIA 3300 CHURN CREEK ROAD REDDING,CA 96002	94-1251675	501(c)(3)	11,258				Capacity Building
(439) CAMC HEALTH EDUCATION AND RESEARCH 3200 MACCORKLE AVENUE SE CHARLESTON,WV 25304	55-0753754	501(c)(3)	10,192				Research
(440) WEST VIRGINIA HEALTHY KIDS AND FAMILIES 1506 KANAWHA BLVD W CHARLESTON,WV 25387	45-2857448	501(c)(3)	10,053				Technical Assistance
(441) BUTTE-GLENN MEDICAL SOCIETY 1905 NOTRE DAME BLVD CHICO,CA 95928	94-1449874	501(c)(6)	10,000				Technical Assistance
(442) COMMUNITY SERVICE EDUCATION & RESEARCH 5380 ELVAS AVE SACRAMENTO,CA 95819	23-7003581	501(c)(3)	10,000				Technical Assistance
(443) COUNTY OF LAKE PO BOX 1024 LUCERNE,CA 95458	94-6000825	LAKE COUNTY	10,000				Technical Assistance
(444) COUNTY OF PLUMAS PUBLIC HEALTH AGENCY 270 COUNTY HOSPITAL ROAD QUINCY,CA 95971	94-6000528	PLUMAS COUNTY	10,000				Capacity Building
(445) DAVE PURCHASE PROJECT 535 DOCK STREET TACOMA,WA 98402	91-1435394	501(c)(3)	10,000				Technical Assistance
(446) DEL NORTE MISSION POSSIBLE C/O 1765 NORTHCREST DRIVE CRESCENT CITY,CA 95531	84-3538055	501(c)(3)	10,000				Capacity Building
(447) FIRST BAPTIST CHURCH OF MAYWOOD 3759 E 57TH ST MAYWOOD,CA 90270	95-6001190	501(c)(3)	10,000				Capacity Building
(448) FIRST UNITED METHODIST CHURCH OF RESEDA 18120 SATICOY ST RESEDA,CA 91335	95-6005594	501(c)(3)	10,000				Capacity Building
(449) HEALTH ALLIANCE OF NORTHERN CALIFORNIA PO BOX 990834 REDDING,CA 960990834	31-1580642	501(c)(3)	10,000				Technical Assistance
(450) HMONG CULTURAL CENTER OF DEL NORTE 1124 EL DORADO STREET CRESCENT CITY,CA 95531	47-2989909	501(c)(3)	10,000				Capacity Building

(451) INDEPENDENT ARTS & MEDIA PO BOX 420442 SAN FRANCISCO,CA 94142	94-3355076	501(c)(3)	10,000				Capacity Building
(452) LAO FAMILY COMMUNITY DEVELOPMENT INC 2325 E 12TH STREET OAKLAND,CA 94601	94-3115164	501(c)(3)	10,000				Capacity Building
(453) MENDONOMA HEALTH ALLIANCE PO BOX 1196 GUALALA,CA 95445	82-1813874	501(c)(3)	10,000				Technical Assistance
(454) NEW ANTIOCH COMMUNITY ASSISTANCE ACTION 7826 SOUTH VERMONT AVENUE LOS ANGELES,CA 90044	83-3779674	501(c)(3)	10,000				Capacity Building
(455) NITO'S WINGS INC 38 REGAL WAY OROVILLE,CA 95966	81-2442349	501(c)(3)	10,000				Capacity Building
(456) PAJARO VALLEY PREVENTION AND STUDENT 335 EAST LAKE AVE WATSONVILLE,CA 95076	77-0269322	501(c)(3)	10,000				Technical Assistance
(457) PARKSIDE STUDIOS LP 1400 PARKMOOR AVENUE SAN JOSE,CA 95126	46-2843300		10,000				Technical Assistance
(458) RIVERHOUSE ASSOCIATES 22645 GRAND STREET HAYWARD,CA 94541	77-0284021		10,000				Technical Assistance
(459) ROBERTS FAMILY DEVELOPMENT CENTER 770 DARINA AVE SACRAMENTO,CA 95815	68-0470557	501(c)(3)	10,000				Capacity Building
(460) SACRAMENTO LGBT COMMUNITY CENTER 1015 20TH STREET SACRAMENTO,CA 95811	94-2502229	501(c)(3)	10,000				Capacity Building
(461) SAINT ALBERT THE GREAT CHURCH 804 E COMPTON BLVD RANCHO DOMINGUEZ,CA 90220	95-3441035	501(c)(3)	10,000				Capacity Building
(462) SAN GABRIEL MISSION CATHOLIC CHURCH 428 S MISSION DRIVE SAN GABRIEL,CA 91776	95-6002795	501(c)(3)	10,000				Capacity Building
(463) SLAVIC-AMERICAN CHAMBER OF COMMERCE 3104 O STREET SACRAMENTO,CA 95816	27-1304045	501(C)(6)	10,000				Capacity Building
(464) SOUTH ASIAN NETWORK INC 1120 W 6TH STREET LOS ANGELES,CA 90017	33-0608166	501(c)(3)	10,000				Capacity Building
(465) ST IGNATIUS OF LOYOLA CHURCH 6024 TERRACE DRIVE LOS ANGELES,CA 90042	95-1643356	501(c)(3)	10,000				Capacity Building
(466) THAI COMMUNITY DEVELOPMENT CENTER 6376 YUCCA STREET LOS ANGELES,CA 90028	95-4531770	501(c)(3)	10,000				Capacity Building
(467) TRUE NORTH ORGANIZING NETWORK 517 3RD ST 16 EUREKA,CA 95501	47-2208314	501(c)(3)	10,000				Capacity Building
(468) UN MUNDO 873 SANTA CRUZ AVENUE MENLO PARK,CA 94025	91-2157711	501(c)(3)	10,000				Capacity Building
(469) YUROK TRIBE PO BOX 1027 KLAMATH,CA 95548	68-0178020		10,000				Technical Assistance
(470) HEALTH RESEARCH INC 150 Broadway Menands,NY 12204	14-1402155		9,733				Research
(471) METHODIST HEALTHCARE SYSTEM OF 7700 FLOYD CURL DRIVE SAN ANTONIO,TX 78229	74-2730328		9,442				Research
(472) CLINICAS DE SALUD DEL PUEBLO INC 852 E DANENBERG DRIVE EL CENTRO,CA 92243	95-2657324	501(c)(3)	9,000				Capacity Building
(473) PIONEERS MEMORIAL HEALTHCARE DISTRICT 207 WEST LEGION ROAD BRAWLEY,CA 92227	95-6002430	STATE OF CA	9,000				Capacity Building
(474) EL PASO CHILDREN'S HOSPITAL CORPORATION 4845 ALAMEDA AVENUE EL PASO,TX 79905	26-3075429	501(c)(3)	8,745				Research
(475) DAVE WALTE 6804 HENNEMAN WAY MCKINNEY,TX 75070	86-1129133		8,600				Technical Assistance
(476) AMADOR TUOLUMNE COMMUNITY ACTION 10590 HWY 88 JACKSON,CA 95642	94-2765408		8,500				Capacity Building
(477) HDMC HOLDINGS LLC 6601 WHITE FEATHER ROAD JOSHUA TREE,CA 92252	47-3550779		8,333				Technical Assistance
(478) CENTRO MEDICO DEL TURABO INC 100 LUIS MUNOZ MARIN AVE CAGUAS,PR 00725	66-0465905		8,025				Research
(479) MIAMI CANCER INSTITUTE AT BAPTIST 8900 N KENDALL DRIVE MIAMI,FL 33176	47-3090066	501(c)(3)	7,833				Research
(480) CARILION MEDICAL CENTER 213 S JEFFERSON STREET ROANOKE,VA 24011	54-0506332	501(c)(3)	7,608				Research
(481) TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA PO BOX 785541 PHILADELPHIA,PA 191785541	23-1352685	501(c)(3)	7,519				Research
(482) 3-FOLD COMMUNICATIONS 1610 R COMMUNICATIONS SACRAMENTO,CA 95811	20-1119447		7,500				Capacity Building
(483) BLACK CULTURAL ZONE COMMUNITY 2032 SAN JOSE AVENUE ALAMEDA,CA 94501	84-3885205	501(c)(3)	7,500				Capacity Building
(484) CALIFORNIA CONSORTIUM FOR URBAN INDIAN HEALTH 1016 LINCOLN BLVD SAN FRANCISCO,CA 94129	20-4878959	501(c)(3)	7,500				Technical Assistance
(485) CALIFORNIA RURAL LEGAL ASSISTANCE 2210 K ST SACRAMENTO,CA 95816	94-2800442	501(c)(3)	7,500				Technical Assistance
(486) EDUCATION AND LEADERSHIP FOUNDATION 1308 E OLIVE AVENUE FRESNO,CA 93728	26-0417563	501(c)(3)	7,500				Technical Assistance
(487) INDEPENDENT LIVING CENTER OF KERN COUNTY 5251 OFFICE PARK DRIVE BAKERSFIELD,CA 93309	77-0384453	501(c)(3)	7,500				Technical Assistance
(488) JAKARA MOVEMENT 6089 N 1ST ST FRESNO,CA 93710	26-3225754	501(c)(3)	7,500				Capacity Building
(489) KUTTURAN CHAMORU FOUNDATION 3307 OREGON AVENUE LONG BEACH,CA 90806	26-4564957	501(c)(3)	7,500				Technical Assistance
(490) NEW HORIZONS DISABILITY EMPOWERMENT CENTER 9400 E VALLEY RD PRESCOTT VALLEY,AZ 86314	86-0701189	501(c)(3)	7,500				Technical Assistance
(491) NUESTRA ALIANZA DE WILLITS 291 SCHOOL STREET WILLITS,CA 95490	04-3732550	501(c)(3)	7,500				Capacity Building
(492) PLACER INDEPENDENT RESOURCE SERVICES 11768 ATWOOD ROAD AUBURN,CA 95603	94-3209861	501(c)(3)	7,500				Technical Assistance
(493) SUCCESS IN CHALLENGES INC 4508 ATLANTIC AVE LONG BEACH,CA 90807	33-0936763	501(c)(3)	7,500				Technical Assistance
(494) VALLEY VOICES PO BOX 903 HANFORD,CA 93230	84-3911625	501(c)(3)	7,500				Technical Assistance
(495) CENTRAL IOWA HOSPITAL CORPORATION 1200 PLEASANT STREET DES MOINES,IA 50309	42-0680452	501(c)(3)	7,439				Research
(496) ATLANTIC HEALTH SYSTEMS INC 475 SOUTH STREET MORRISTOWN,NJ 07960	52-1958352	501(c)(3)	7,358				Research
(497) COMMUNITIES ACTIVELY LIVING INDEPENDENT & FREE 634 S SPRING STREET LOS ANGELES,CA 90014	95-4860169	501(c)(3)	7,350				Technical Assistance
(498) INDEPENDENT LIVING RESOURCE CENTER 423 WEST VICTORIA STREET SANTA BARBARA,CA 93101	95-3255012	501(c)(3)	7,188				Technical Assistance
(499) RECOVERYPEOPLE 1210 N AVENUE C ELGIN,TX 78621	27-0804939	501(c)(3)	7,056				Research
(500) COMMUNITY RESOURCES FOR INDEPENDENT LIVING 439 A STREET HAYWARD,CA 94541	94-2598873	501(c)(3)	6,924				Technical Assistance
(501) MONTEFIORE MEDICAL CENTER 3411 WAYNE AVE BRONX,NY 10467	13-1740114	501(c)(3)	6,567				Research
(502) THE BOARD OF REGENTS OF THE UNIVERSITY OF NEBRASKA 985100 NEBRASKA MEDICAL CENTER OMAHA,NE 681985100	47-0049123	STATE OF NE	6,500				Research
(503) MARCH OF DIMES INC 1550 CRYSTAL DRIVE ARLINGTON,VA 22202	13-1846366	501(c)(3)	6,484				Capacity Building
(504) RURAL CENTER FOR INDEPENDENT LIVING INC PO BOX 3177 CARSON CITY,NV 89702	88-0389130	501(c)(3)	6,201				Technical Assistance
(505) SANFORD RESEARCH 2301 EAST 60TH STREET NORTH SIOUX FALLS,SD 571040569	46-0450378		6,185				Research
(506) OCHSNER CLINIC FOUNDATION PO BOX 54996 NEW ORLEANS,LA 701544996	72-0502505	501(c)(3)	6,158				Research
(507) 55 LIBERTY TOWERS CHURCH OF THE NAZARENE 5132 ELKHORN BLVD SACRAMENTO,CA 95842	44-0552034	501(c)(3)	6,000				Capacity Building
(508) CENTER FOR A NON VIOLENT COMMUNITY 542 W STOCKTON ST SONORA,CA 95370	77-0447369	501(c)(3)	6,000				Capacity Building
(509) NORTH BROWARD HOSPITAL DISTRICT 1608 SE 3RD AVENUE FT LAUDERDALE,FL 33316	59-6012065	501(c)(3)	5,859				Research
(510) EL CONCILIO CALIFORNIA 445 N SAN JOAQUIN STREET STOCKTON,CA 952022026	94-1677202	501(c)(3)	5,500				Capacity Building
(511) CENTER FOR INDEPENDENCE OF INDIVIDUALS 2001 WINWARD WAY SAN MATEO,CA 94404	94-2581080	501(c)(3)	5,322				Technical Assistance
(512) LOUISIANA STATE UNIVERSITY HEALTH 433 BOLIVAR STREET NEW ORLEANS,LA 70112	72-6087770	STATE OF LA	5,008				Research

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 442

3 Enter total number of other organizations listed in the line 1 table . . . . ▶ 70

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 noncash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of noncash assistance
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						

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

Return Reference	Explanation
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds.	PRIOR TO MAKING AN AWARD, PHI EVALUATES THE CAPABILITY OF THE GRANTEE TO CARRY OUT GRANT AWARD TERMS AND CONDITIONS, INCLUDING EXERCISING RESPONSIBLE FINANCIAL MANAGEMENT. PHI NOTIFIES THE GRANTEE ABOUT COMPLIANCE REQUIREMENTS AND INCORPORATES COMPLIANCE, AUDIT AND ENFORCEMENT PROVISIONS INTO AWARD DOCUMENTS, INCLUDING OMB UNIFORM GUIDANCE REQUIREMENTS WHERE APPLICABLE. PHI EMPLOYEES MAINTAIN REGULAR CONTACT WITH THE GRANTEE, REVIEW FINANCIAL AND PERFORMANCE REPORTS SUBMITTED BY THE GRANTEE, AND MAKE APPROPRIATE INQUIRIES.

Additional Data

Return to Form

Software ID: 22016089
Software Version: 2022v5.0

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization
Public Health Institute

Employer identification number
94-1646278

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate 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.			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax idemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (e.g., 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	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	**2**		
3	Indicate which, if any, of the following the filing 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.			
	☑ Compensation committee	☐ Written employment contract		
	☐ Independent compensation consultant	☑ Compensation survey or study		
	☑ Form 990 of other organizations	☑ 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?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 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?	**5a**		No
b	Any related organization?	**5b**		No
	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?	**6a**		No
b	Any related organization?	**6b**		No
	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 in lines 5 and 6? If "Yes," describe in Part III	**7**	Yes	
8	Were any amounts reported on Form 990, Part VII, paid or accured 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	**8**		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	**9**		

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 are not 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, 1099-MISC compensation, and/or 1099-NEC			**(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				
1Dr Mary A Pittman President & CEO	(i)	503,520	99,039	41,785	30,500	31,018	705,862	0
	(ii)	0	0	0	0	0	0	0
2Susan Watson Program Director IV	(i)	193,139	7,277	1,904	19,367	12,447	234,134	0
	(ii)	0	0	0	0	0	0	0
3Israel Ghebretinsae Chief Financial Officer	(i)	273,907	27,810	900	28,426	28,630	359,673	0
	(ii)	0	0	0	0	0	0	0
4Leah Williams Chief Legal Officer	(i)	267,350	28,119	1,472	28,742	37,329	363,012	0
	(ii)	0	0	0	0	0	0	0
5B Melange Matthews Exec VP & Chief Operating Officer	(i)	351,113	34,897	9,251	30,500	22,274	448,035	0
	(ii)	0	0	0	0	0	0	0
6David Hausner Program Director IV	(i)	202,060	4,000	1,925	21,438	34,438	263,861	0
	(ii)	0	0	0	0	0	0	0
7Valerie McCann Woodson Chief Human Resources Officer	(i)	246,863	25,442	10,634	26,006	26,041	334,986	0
	(ii)	0	0	0	0	0	0	0
8Matthew Marsom Chief of Programs, Policy & Govt Relations	(i)	258,848	25,442	820	26,006	10,343	321,459	0
	(ii)	0	0	0	0	0	0	0
9Raz Stevenson Senior Technical Advisor II	(i)	247,743	4,000	1,218	18,010	32,981	303,952	0
	(ii)	0	0	0	0	0	0	0
10Doug Jutte Sr Enterprise Applications Director	(i)	231,497	3,500	1,098	23,150	1,941	261,186	0
	(ii)	0	0	0	0	0	0	0
11Baker Maggwa Expert Advisory Professional	(i)	269,400	0	7,529	27,192	34,696	338,817	0
	(ii)	0	0	0	0	0	0	0
12Amy Bloom Uniquely Skilled Sr Tech Expert	(i)	267,647	0	7,407	26,793	12,779	314,626	0
	(ii)	0	0	0	0	0	0	0
13Dorcas Muteteke Senior Technical Advisor II	(i)	275,858	0	1,193	18,228	9,710	304,989	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Info

Provide the information, explanation,

Return Reference
Schedule J, Part I, Line 7 Non-fixed payments

rmation

or descriptions required for Part I,

The organization's CEO, Mary Pittr
Directors. The following individual
MELANGE MATTHEWS -LEAH WI
received non-fixed performance-b
approved by Human Resources:

lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b

Ex

man, received a non-fixed performance-b
s received non-fixed performance-based
LLIAMS -ISRAEL GHEBRETINSAE -VAL
ased payments during 2022 that were de
-DAVID HAUSNER -DOUG JUTTE -SUS

, 7, and 8, and for Part II. Also complete

planation
ased payment in 2022 that was awarded payments during 2022 that were determi ERIE MCCANN WOODSON -MATTHEW N etermined by the individual's respective P AN WATSON -RAZ STEVENSON

this part for any additional information.

at the discretion of the Board of ined by the organization's CEO: -B. MARSOM The following individuals rogram Director or supervisor and

Additional Data

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization
Public Health Institute

Employer identification number
94-1646278

Return Reference	Explanation
Form 990, Part III, Line 4d Description of other program services	(Expenses $ 109,007,323 including grants of $ 27,027,239) FOR 50 YEARS, PHI HAS IMPLEMENTED RESEARCH AND PROGRAMS TO IMPROVE THE HEALTH AND WELL-BEING OF PEOPLE ACROSS CALIFORNIA, THE U.S., AND THE WORLD. PHI IS A HUB FOR PUBLIC HEALTH INNOVATION, PROVIDING SUPPORTIVE INFRASTRUCTURE, RESOURCES, AND INTELLECTUAL COMMUNITY WITH SOME OF THE BEST MINDS IN PUBLIC HEALTH. WITH OVER 100 RESEARCHERS AND PROJECT DIRECTORS - AND OVER 1000 STAFF WORLDWIDE - PHI LEADS NEW RESEARCH, TESTS NOVEL INTERVENTIONS, AND IMPLEMENTS AND BUILDS CAPACITY FOR ON-THE-GROUND PROGRAMS TO ADDRESS NEW AND EMERGING PUBLIC HEALTH PROBLEMS. FOR EXAMPLE, PHI PROGRAMS COMPRISE ONE OF THE LARGEST OBESITY NETWORKS IN THE COUNTRY, ADDRESSING AN EPIDEMIC THAT HAS REACHED COMMUNITIES IN THE U.S. AND AROUND THE WORLD, RAISING THE RISK FOR CHRONIC DISEASES LIKE CANCER, HEART DISEASE, AND DIABETES. GLOBALLY, PHI IS DISMANTLING THE BARRIERS TO HEALTH AND OPPORTUNITY EXPERIENCED BY WOMEN AND GIRLS IN THE U.S. AND CREATING GENDER EQUITY PARTNERSHIPS. PHI IS DEVELOPING WORKFORCE PIPELINE PROGRAMS TO TRAIN AND GRADUATE HEALTH CARE PROFESSIONALS REPRESENTING THE DIVERSITY OF OUR POPULATION AND WHO WILL MEET THE GROWING DEMAND FOR CARE. PHI IS ALSO AT THE FOREFRONT OF THE OPIOID EPIDEMIC, SUPPORTING LOCAL MULTI-SECTOR COALITIONS ADDRESSING PREVENTION AND NEW SUBSTANCE USE DISORDER AND BEHAVIORAL HEALTH CARE MODELS. IMPLEMENTING PROGRAMS, SYSTEMS AND RESEARCH THAT CONNECT PUBLIC HEALTH AND HEALTH CARE DELIVERY THRU NEW DESIGN METHODS AND DATA TOOLS, WE ARE BRIDGING HISTORIC GAPS IN POPULATION HEALTH. PHI SPEARHEADS TRAININGS AND SOLUTIONS TO ADDRESS CLIMATE CHANGE, WHICH, ALTHOUGH TYPICALLY FRAMED AS AN ENVIRONMENTAL ISSUE, REPRESENTS A HUGE THREAT TO HUMAN HEALTH. TOGETHER, PHI PROGRAMS ARE HELPING TO CREATE HEALTHY COMMUNITIES WHERE INDIVIDUALS CAN ACHIEVE THEIR HIGHEST POTENTIAL. THE BREADTH OF PHI EXPERTISE AND EXPERIENCE POSITIONS US AS A PREMIER PARTNER AND LEADER IN PUBLIC HEALTH.
Form 990, Part VI, Line 1a Delegate broad authority to a committee	The Executive Committee shall be comprised of the Chair, Vice Chair, Secretary, and Treasurer of the Board of Directors, as well as any other members-at-large as elected by the Board. All members of the Executive Committee are required to be members of the Board of Directors. The Executive Committee shall have the authority of the Board except with respect to: (a) The filling of vacancies on the Board or any committee; (b) The amendment or repeal of Bylaws or the adoption of new Bylaws; (c) The amendment or repeal of any resolution of the Board which by its express terms is not so amendable or repealable; (d) The appointment of other committees of the Board or the members thereof; and (e) The approval of any self-dealing transaction, except as permitted by state law.
Form 990, Part VI, Line 11b Review of form 990 by governing body	THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY MANAGEMENT BEFORE SIGNING. A COPY OF THE FORM 990 WAS ELECTRONICALLY SUBMITTED TO ALL BOARD MEMBERS PRIOR TO FILING WITH THE IRS.
Form 990, Part VI, Line 12c Conflict of interest policy	PHI'S WRITTEN CONFLICT OF INTEREST POLICIES APPLY TO DIRECTORS, OFFICERS, EMPLOYEES, CONSULTANTS AND AGENTS. CERTAIN POLICIES MAY APPLY TO OTHER PERSONS, E.G., PHI'S RESEARCH CONFLICT OF INTEREST POLICY. POTENTIAL, ALLEGED, OR ACTUAL CONFLICTS MAY BE REVIEWED BY A SUPERVISOR, EXECUTIVE MANAGEMENT, THE CEO OR THE COMPLIANCE OFFICE, WITH THE CEO HAVING FINAL AUTHORITY. PHI'S POLICIES PROVIDE FOR APPROPRIATE EXCLUSIONS OR RESTRICTIONS DEPENDING ON THE CIRCUMSTANCES. MONITORING AND ENFORCEMENT INCLUDES MANDATORY ANNUAL CERTIFICATION OF COMPLIANCE, MANDATORY DISCLOSURE, PRIOR APPROVAL PROCEDURES, TRAINING, INSPECTION OF RECORDS AND OTHER INVESTIGATIVE MECHANISMS.
Form 990, Part VI, Line 15a Process to establish compensation of top management official	ALL PHI EMPLOYEES INCLUDING THE CHIEF EXECUTIVE OFFICER AND KEY EMPLOYEES ARE COMPENSATED IN ACCORDANCE WITH A TITLE AND PAY PLAN BASED ON COMPARABILITY DATA REPORTED IN SEVERAL INDEPENDENT SALARY SURVEYS AND ADMINISTERED BY PHI'S HUMAN RESOURCES DEPARTMENT. DECISIONS ABOUT COMPENSATING THE CHIEF EXECUTIVE OFFICER MAY INCLUDE SEPARATE COMPARABILITY DATA AND ARE COVERED BY A SPECIAL APPROVAL PROCESS ADOPTED BY THE BOARD OF DIRECTORS IN ACCORDANCE WITH IRS EXCESS BENEFIT TRANSACTION REGULATIONS AND COMPARABLE CALIFORNIA REQUIREMENTS. COMPENSATION WAS ESTABLISHED ACCORDING TO THESE PROCEDURES. PHI PURCHASES SEVERAL PUBLISHED SALARY SURVEYS OF COMPARABLE AND PEER ORGANIZATIONS. THERE IS A PROCESS OF DOCUMENTING AND SUBSTANTIATING SALARY DECISIONS MADE FOR KEY EMPLOYEES, BASED UPON GUIDELINES ESTABLISHED UNDER PHI'S COMPENSATION POLICIES AND PROCEDURES. THE LAST CHIEF EXECUTIVE OFFICER COMPENSATION REVIEW TOOK PLACE IN NOVEMBER 2022.
Form 990, Part VI, Line 15b Process to establish compensation of other employees	ALL PHI EMPLOYEES INCLUDING THE CHIEF EXECUTIVE OFFICER AND KEY EMPLOYEES ARE COMPENSATED IN ACCORDANCE WITH A TITLE AND PAY PLAN BASED ON COMPARABILITY DATA REPORTED IN SEVERAL INDEPENDENT SALARY SURVEYS AND ADMINISTERED BY PHI'S HUMAN RESOURCES DEPARTMENT. DECISIONS ABOUT COMPENSATING OFFICERS AND KEY EMPLOYEES MAY INCLUDE SEPARATE COMPARABILITY DATA AND ARE COVERED BY A SPECIAL APPROVAL PROCESS ADOPTED BY THE BOARD OF DIRECTORS IN ACCORDANCE WITH IRS EXCESS BENEFIT TRANSACTION REGULATIONS AND COMPARABLE CALIFORNIA REQUIREMENTS. COMPENSATION WAS ESTABLISHED ACCORDING TO THESE PROCEDURES. PHI PURCHASES SEVERAL PUBLISHED SALARY SURVEYS OF COMPARABLE AND PEER ORGANIZATIONS. THERE IS A PROCESS OF DOCUMENTING AND SUBSTANTIATING SALARY DECISIONS MADE FOR OFFICERS AND KEY EMPLOYEES, BASED UPON GUIDELINES ESTABLISHED UNDER PHI'S COMPENSATION POLICIES AND PROCEDURES. THE LAST OFFICER/KEY EMPLOYEE COMPENSATION REVIEW TOOK PLACE IN NOVEMBER 2022.
Form 990, Part VI, Line 19 Required documents available to the public	THE ORGANIZATION'S GOVERNING DOCUMENTS ARE AVAILABLE TO THE PUBLIC THROUGH THE CALIFORNIA SECRETARY OF STATE AND THE CALIFORNIA ATTORNEY GENERAL'S REGISTRY OF CHARITABLE TRUSTS. THEY ARE PROVIDED TO INTERESTED PARTIES (I.E. GOVERNMENT AND PRIVATE FUNDING AGENCIES) UPON REQUEST. THE ORGANIZATION'S CONFLICT OF INTEREST POLICIES ARE PROVIDED UPON REQUEST. FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST.
Form 990, Part VIII, Line 2f Other Program Service Revenue	- Total Revenue: , Related or Exempt Function Revenue: , Unrelated Business Revenue: , Revenue Excluded from Tax Under Sections 512, 513, or 514: ;
Form 990, Part IX, Line 11g Other Fees	OTHER FEES FOR SERVICES - Total Expense: 34141451, Program Service Expense: 31764357, Management and General Expenses: 2377094, Fundraising Expenses: ; Project consultant - Total Expense: 10621304, Program Service Expense: 10621304, Management and General Expenses: , Fundraising Expenses: ; SUB CONTRACTORS - Total Expense: 96165, Program Service Expense: 96165, Management and General Expenses: , Fundraising Expenses: ; TEMPORARY HELP - Total Expense: 43047, Program Service Expense: , Management and General Expenses: 43047, Fundraising Expenses: ;
Form 990, Part VII, Section A COMPENSATION	Susan Watson IS BOTH AN EMPLOYEE OF PHI AND A VOTING MEMBER ON THE BOARD. SHE RECEIVES COMPENSATION FOR HER CAPACITY AS A PROGRAM DIRECTOR FOR PHI AND IS NOT BEING COMPENSATED FOR HER SERVICES AS A BOARD MEMBER.

Additional Data

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization
Public Health Institute

Employer identification number
94-1646278

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) PHI INDIA PRIVATED LIMITED B-4 GREATER KAILASH ENCLAVE NEW DELHI, PART-II 11048 IN 82-5394021	HEALTH SERVICES	IN	0	103,794	PUBLIC HEALTH INSTITUTE

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No

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

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

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

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

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		
b Gift, grant, or capital contribution to related organization(s)	1b		
c Gift, grant, or capital contribution from related organization(s)	1c		
d Loans or loan guarantees to or for related organization(s)	1d		
e Loans or loan guarantees by related organization(s)	1e		
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)	1g		
h Purchase of assets from related organization(s)	1h		
i Exchange of assets with related organization(s)	1i		
j Lease of facilities, equipment, or other assets to related organization(s)	1j		
k Lease of facilities, equipment, or other assets from related organization(s)	1k		
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		
o Sharing of paid employees with related organization(s)	1o		
p Reimbursement paid to related organization(s) for expenses	1p		
q Reimbursement paid by related organization(s) for expenses	1q		
r Other transfer of cash or property to related organization(s)	1r		
s Other transfer of cash or property from related organization(s)	1s		

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

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

Return Reference	Explanation

Additional Data

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