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 07-01-2022 , and ending 06-30-2023

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

C Name of organization
HORIZONS FOUNDATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
155 SANSOME STREET SUITE 650

City or town, state or province, country, and ZIP or foreign postal code
SAN FRANCISCO, CA 94104

D Employer identification number
94-2686530

E Telephone number
(415) 398-2333

G Gross receipts $ 29,396,985

F Name and address of principal officer:
ROGER DOUGHTY
155 SANSOME STREET SUITE 650
SAN FRANCISCO,CA 94104

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.HORIZONSFOUNDATION.ORG

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

L Year of formation: 1980

M State of legal domicile: CA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
TO SUPPORT NONPROFITS SERVING AND ADVOCATING FOR LGBTQ PEOPLE THROUGH GRANTMAKING AND PROGRAMS; TO INCREASE PHILANTHROPIC GIVING TO LGBTQ CAUSES; AND TO PROVIDE FOR FUTURE LGBTQ GENERATIONS AND THE LGBTQ COMMUNITY'S LONG-TERM FUTURE.

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**	14
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	14
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	**5**	14
6	Total number of volunteers (estimate if necessary)	**6**	50
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
Revenue	**8**	Contributions and grants (Part VIII, line 1h)	16,063,541	9,725,496
	9	Program service revenue (Part VIII, line 2g)	0	250
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,214,793	2,488,936
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-35,790	-177,599
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	19,242,544	12,037,083
Expenses	**13**	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	7,557,905	7,694,854
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,353,005	1,383,471
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶438,917		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	736,453	940,235
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	9,647,363	10,018,560
	19	Revenue less expenses. Subtract line 18 from line 12	9,595,181	2,018,523

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	**20**	Total assets (Part X, line 16)	46,250,238	48,901,651
	21	Total liabilities (Part X, line 26)	1,805,725	1,831,454
	22	Net assets or fund balances. Subtract line 21 from line 20	44,444,513	47,070,197

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 2024-05-14

▶ ROGER DOUGHTY PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
		2024-05-14		P01290862

Firm's name ▶ APRIO LLP — Firm's EIN ▶ 57-1157523

Firm's address ▶ 150 POST STREET SUITE 200
SAN FRANCISCO, CA 94108 — Phone no. (415) 777-4488

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:

SINCE ITS FOUNDING IN 1980, HORIZONS' MISSION HAS BEEN TO SUPPORT NONPROFITS SERVING AND ADVOCATING FOR THE LGBTQ COMMUNITY THROUGH GRANTMAKING AND PROGRAMS; TO INCREASE PHILANTHROPIC GIVING TO LGBTQ CAUSES; AND TO PROVIDE FOR THE COMMUNITY'S LONG-TERM FUTURE.

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 $ 8,161,371 including grants of $ 7,611,604) (Revenue $)

GRANTMAKING: HORIZONS FOUNDATION PROVIDED DIRECT FINANCIAL SUPPORT TO NONPROFIT ORGANIZATIONS THROUGH 1,380 GRANTS TO 776 ORGANIZATIONS TOTALING $7,611,604 IN 2023. GRANTS ADDRESSED MULTIPLE ISSUES AND POPULATIONS, INCLUDING THE COVID19 CRISIS, HEALTH, HIV/AIDS, YOUTH, ARTS, ELDERS, COMMUNITIES OF COLOR, TRANSGENDER RIGHTS, COMMUNITY BUILDING, AND CIVIL AND HUMAN RIGHTS IN THE SAN FRANCISCO BAY AREA, OTHER PARTS OF THE UNITED STATES, AND THE WORLD. GRANTS WERE ALSO MADE FROM DONOR-ADVISED FUNDS, FIELD OF INTEREST FUNDS, AND SCHOLARSHIP FUNDS. GRANTS RANGED FROM $250 TO $444,057; PROVIDED BOTH OPERATING SUPPORT AND PROJECT SUPPORT; AND INCLUDED NON-LGBTQ-SPECIFIC GRANTS THROUGH THE DONOR-ADVISED AND OTHER GRANT PROGRAMS.

4b (Code:) (Expenses $ 812,693 including grants of $ 83,250) (Revenue $ 250)

INCREASING LGBTQ COMMUNITY RESOURCES: (A) HORIZONS PROMOTED GIVING BY LGBTQ PEOPLE FOR LGBTQ CAUSES BY OFFERING EXPERT SEMINARS TO EDUCATE HUNDREDS OF DONORS AND FINANCIAL AND LEGAL ADVISORS SERVING THE LGBTQ COMMUNITY AND BY WORKING WITH INDIVIDUAL DONORS TO DEFINE THEIR PHILANTHROPIC GOALS AND DEVELOP GIVING STRATEGIES FOR BOTH LIFE-TIME AND LEGACY GIFTS. (B) HORIZONS LED NATIONAL GIVE OUT DAY, THE ONLY NATIONAL DAY OF GIVING FOR THE LGBTQ COMMUNITY THAT RAISED OVER $1,272,886 FOR LGBTQ ORGANIZATIONS ACROSS THE COUNTRY. (C) THE FOUNDATION LED INNOVATIVE RESEARCH AND TESTING EFFORTS TO STRENGTHEN THE FUNDRAISING CAPABILITIES OF LGBTQ NONPROFITS IN THE BAY AREA AND BEYOND. (D) HORIZONS CONTINUED TO BUILD THE LGBTQ COMMUNITY ENDOWMENT FUND TO PROVIDE PERMANENT RESOURCES FOR PROMOTING RIGHTS AND WELL-BEING OF LGBTQ PEOPLE. THE ENDOWMENT IS BEING BUILT PRINCIPALLY THROUGH ESTATE GIFTS, AND MORE THAN 380 PEOPLE HAVE INFORMED HORIZONS THAT THE FOUNDATION IS INCLUDED IN THEIR ESTATES.

4c (Code:) (Expenses $ 68,147 including grants of $) (Revenue $)

CAPACITY BUILDING: LEADERSHIP DEVELOPMENT: RECOGNIZING THAT STRONG LEADERSHIP IS CRUCIAL TO THE LGBQT COMMUNITY, HORIZONS HAS LONG BEEN COMMITTED TO DEVELOPING COMMUNITY LEADERSHIP. IN THE PAST YEAR, HORIZONS CONTINUED TO SPONSOR AN ON-GOING GROUP OF EXECUTIVE DIRECTORS OF LGBTQQ ORGANIZATIONS THAT PROVIDES CONSISTENT SUPPORT AND NETWORKING FOR KEY COMMUNITY LEADERS.

4d Other program services (Describe in Schedule O.)

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

4e **Total program service expenses** ▶ 9,042,211

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		No
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		No
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	Yes	
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	Yes	
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		No
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		No
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		No
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	Yes	
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	Yes	
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	Yes	
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		No
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	9			
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** 14			
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**		No
b	If "Yes," enter the name of the foreign country: ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
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**	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		**7b**	Yes	
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**		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		**7f**		
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**		No
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?		**9a**		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		**9b**		No
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?		**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	14		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	14		
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 ▶ CA

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:
▶THE ORGANIZATION 155 SANSOME STREET SUITE 650 SAN FRANCISCO,CA 94104 (415) 398-2333

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): Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former	(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
(1) TIM MURRAY CO-CHAIR	5.00	X		X				0	0	0
(2) DIPTI GHOSH CO-CHAIR	5.00	X		X				0	0	0
(3) ADAM BLUM CHAIR EMERITUS	5.00	X						0	0	0
(4) MAYA SETCHKOVA TREASURER	5.00	X		X				0	0	0
(5) JAE MALDONADO DIRECTOR	5.00	X						0	0	0
(6) XOCHITL CARRION DIRECTOR	5.00	X						0	0	0
(7) KATHRYN CLUBB DIRECTOR	5.00	X						0	0	0
(8) JUAN BARANI SECRETARY	5.00	X		X				0	0	0
(9) SHILPEN PATEL DIRECTOR	5.00	X						0	0	0
(10) LINDA SCAPAROTTI DIRECTOR	5.00	X						0	0	0
(11) MELISA MARQUEZ DIRECTOR	5.00	X						0	0	0
(12) JANE SWAN DIRECTOR	5.00	X						0	0	0
(13) JACOB LITTLE DIRECTOR	5.00	X						0	0	0
(14) CHRIS LIM DIRECTOR	5.00	X						0	0	0
(15) ROGER DOUGHTY PRESIDENT	40.00			X				250,050	0	35,613
(16) JOHN MARVUGLIO CFO	40.00			X				184,859	0	16,382
(17) CANDACE LOPEZ CHIEF PHILANTHROPIC OFFICER	40.00				X			153,250	0	7,524

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) Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former	(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
(18) FRANCISCO BUCHTING VP OF GRANTS, PROGRAMS & STRATEGIC INITIATIVES	40.00				X			168,950	0	25,565
(19) HENRY PACHECO DIRECTOR OF PHILANTHROPIC SERVICES	40.00					X		112,933	0	9,137
(20) CURTIS PARKER DIRECTOR OF COMMUNICATIONS	40.00					X		107,455	0	9,933

1b Sub-Total . . . . . ▶			
c Total from continuation sheets to Part VII, Section A . . ▶			
d Total (add lines 1b and 1c) . . . . . ▶	977,497	0	104,154

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 ▶ 6

		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

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

Part VIII Statement of Revenue

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

		(A) 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	242,222		
	d Related organizations	1d			
	e Government grants (contributions)	1e	9,075		
	f All other contributions, gifts, grants, and similar amounts not included above	1f	9,474,199		
	g Noncash contributions included in lines 1a - 1f:$	1g	1,764,446		
	h **Total.** Add lines 1a-1f . . . . . ▶		9,725,496		

Program Service Revenue

	Business Code				
2a FEES FOR SERVICES	900099	250	250		
b					
c					
d					
e					
f All other program service revenue.					
g **Total.** Add lines 2a–2f. . . . . ▶	250				

Other Revenue

3 Investment income (including dividends, interest, and other similar amounts)		1,256,325			1,256,325
4 Income from investment of tax-exempt bond proceeds ▶					
5 Royalties . . . . . ▶					

		(i) Real	(ii) Personal
6a Gross rents	6a		
b Less: rental expenses	6b		
c Rental income or (loss)	6c		
d Net rental income or (loss) . . . . . ▶			

		(i) Securities	(ii) Other				
7a Gross amount from sales of assets other than inventory	7a	18,366,626					
b Less: cost or other basis and sales expenses	7b	17,134,015					
c Gain or (loss)	7c	1,232,611					
d Net gain or (loss) . . . . . ▶				1,232,611			1,232,611

8a Gross income from fundraising events (not including $ 242,222 of contributions reported on line 1c). See Part IV, line 18	8a	43,822				
b Less: direct expenses	8b	225,887				
c Net income or (loss) from fundraising events . . ▶			-182,065			-182,065
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 OTHER INCOME	900099	4,466			4,466
b					
c					
d All other revenue					
e **Total.** Add lines 11a–11d . . . . . ▶		4,466			
12 **Total revenue.** See instructions . . . . ▶		12,037,083	250	0	2,311,337

OtherRevenueMiscAmt

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	7,688,854	7,688,854		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	6,000	6,000		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,024,841	742,576	183,077	99,188
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	164,804	65,256		99,548
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	106,487	72,983	21,538	11,966
10 Payroll taxes	87,339	58,082	15,013	14,244
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	88,032		88,032	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	191,966	38,927	100,131	52,908
12 Advertising and promotion	20,022	16,601		3,421
13 Office expenses	34,092	673	4,114	29,305
14 Information technology	42,138	32,264	9,819	55
15 Royalties				
16 Occupancy				
17 Travel	77,368	74,117	98	3,153
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	5,391	711	2,475	2,205
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	3,981		3,981	
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 ALLOCATION OF SHARED EX	277,694	183,442	36,275	57,977
b ALLOCATION OF COMMUNICA	97,226	42,743	13,620	40,863
c RECRUITMENT	42,691		42,691	
d MERCHANT SERVICE FEES	20,232	701	11,762	7,769
e All other expenses	39,402	18,281	4,806	16,315
25 **Total functional expenses.** Add lines 1 through 24e	10,018,560	9,042,211	537,432	438,917
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		1,001,378	1	1,674,381
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		10,000	3	1,091
	4	Accounts receivable, net		47,746	4	19,072
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net		216,608	7	16,601
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		729,533	9	132,159
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 316,267			
	b	Less: accumulated depreciation	10b 220,849	96,845	10c	95,418
	11	Investments—publicly traded securities		43,126,436	11	46,080,204
	12	Investments—other securities. See Part IV, line 11			12	
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		1,021,692	15	882,725
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		46,250,238	16	48,901,651
Liabilities	17	Accounts payable and accrued expenses		221,414	17	151,479
	18	Grants payable		130,500	18	238,194
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		1,453,811	25	1,441,781
	26	**Total liabilities.** Add lines 17 through 25		1,805,725	26	1,831,454
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		27,039,454	27	28,686,669
	28	Net assets with donor restrictions		17,405,059	28	18,383,528
		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		44,444,513	32	47,070,197
	33	Total liabilities and net assets/fund balances		46,250,238	33	48,901,651

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	12,037,083
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,018,560
3	Revenue less expenses. Subtract line 2 from line 1	3	2,018,523
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	44,444,513
5	Net unrealized gains (losses) on investments	5	607,161
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	47,070,197

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		No
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		

Additional Data

Return to Form

Software ID:

Software Version:

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
HORIZONS FOUNDATION

Employer identification number
94-2686530

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?		**(v)** Amount of monetary support (see instructions)	**(vi)** Amount of other support (see instructions)
			Yes	**No**		
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.") . .	7,701,148	6,381,683	6,466,341	15,834,308	9,483,274	45,866,754
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 **Total.** Add lines 1 through 3	7,701,148	6,381,683	6,466,341	15,834,308	9,483,274	45,866,754
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) . .						5,240,962
6 **Public support.** Subtract line 5 from line 4.						40,625,792

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. .	7,701,148	6,381,683	6,466,341	15,834,308	9,483,274	45,866,754
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . .	568,141	1,158,377	527,907	702,908	1,256,325	4,213,658
9 Net income from unrelated business activities, whether or not the business is regularly carried on. .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). .	55,441	367,031	348,603	230,379	290,510	1,291,964
11 **Total support.** Add lines 7 through 10						51,372,376

12 Gross receipts from related activities, etc. (see instructions) **12** 250

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** 79.080 %

15 Public support percentage for 2020 Schedule A, Part II, line 14 . . . . . **15** 81.510 %

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

Return to Form

Software ID:

Software Version:

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
HORIZONS FOUNDATION

Employer identification number
94-2686530

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
HORIZONS FOUNDATION

Employer identification number
94-2686530

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
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Employer identification number
94-2686530

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
HORIZONS FOUNDATION

Employer identification number
94-2686530

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

Return to Form

Software ID:

Software Version:

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
HORIZONS FOUNDATION

Employer identification number
94-2686530

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	166	
2	Aggregate value of contributions to (during year)	7,778,224	
3	Aggregate value of grants from (during year)	7,820,694	
4	Aggregate value at end of year	26,528,920	

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	16,672,042	16,259,246	12,837,437	12,753,906	11,226,418
b Contributions . . .	177,755	2,616,704	559,114	292,500	16,970
c Net investment earnings, gains, and losses	1,357,568	-1,391,519	3,033,716	454,864	1,510,518
d Grants or scholarships . . .					
e Other expenditures for facilities and programs . . .	757,946	812,392	171,021	663,833	
f Administrative expenses					
g End of year balance	17,449,419	16,672,042	16,259,246	12,837,437	12,753,906

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

a Board designated or quasi-endowment ▶ 3.000 %

b Permanent endowment ▶ 77.000 %

c Term endowment ▶ 20.000 %

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		No
(ii) Related organizations		No
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?		

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		40,074	7,156	32,918
d Equipment		106,802	44,302	62,500
e Other		169,391	169,391	0
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . ▶				95,418

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.)* ▶	1,441,781

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	12,556,212
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	607,161		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	607,161
3	Subtract line **2e** from line **1**			3	11,949,051
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	88,032		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	88,032
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	12,037,083

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	9,930,528
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	9,930,528
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	88,032		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	88,032
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	10,018,560

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
PART X, LINE 2:	INCOME TAXES THE FOUNDATION IS RECOGNIZED AS A PUBLIC CHARITY EXEMPT FROM THE FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SECTION 23701(D) OF THE CALIFORNIA REVENUE AND TAXATION CODE, WHEREBY ONLY UNRELATED BUSINESS INCOME, AS DEFINED BY SECTION 512(A)(1) OF THE INTERNAL REVENUE CODE AND SIMILAR CODE SECTION OF THE CALIFORNIA REVENUE AND TAXATION CODE, IS SUBJECT TO INCOME TAX.EFFECTIVE JANUARY 1, 2009, THE FOUNDATION ADOPTED THE FASB GUIDANCE ON ACCOUNTING FOR UNCERTAINTY ININCOME TAXES. THE FOUNDATION TAKES THE POSITION THAT ITS ACTIVITIES CONTINUE TO BE DIRECTLY RELATED TO ITS TAX-EXEMPT PURPOSE, AND IT CONSEQUENTLY DID NOT RECOGNIZE ANY INCREASE OR DECREASE IN LIABILITY FOR UNRECOGNIZED TAX BENEFITS TAKEN IN THE CURRENT OR PRIOR PERIODS.

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE G (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization
HORIZONS FOUNDATION

Employer identification number
94-2686530

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☐ Mail solicitations

b ☐ Internet and email solicitations

c ☐ Phone solicitations

d ☐ In-person solicitations

e ☐ Solicitation of non-government grants

f ☐ Solicitation of government grants

g ☐ Special fundraising events

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

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

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions?		**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
		Yes	**No**			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total . . . . . ▶						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1 GALA (event type)	(b) Event #2 EQUALITY SCHOLARSHIP AWARDS DINNER (event type)	(c) Other events (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	280,922	5,122		286,044
	2 Less: Contributions	238,018	4,204		242,222
	3 Gross income (line 1 minus line 2)	42,904	918		43,822
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	189,257			189,257
	7 Food and beverages				
	8 Entertainment	2,400			2,400
	9 Other direct expenses	25,995	8,235		34,230
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				225,887
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-182,065

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? . . . . . ☐ **Yes** ☐ **No**

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . . ☐ **Yes** ☐ **No**

13 Indicate the percentage of gaming activity conducted in:

a	The organization's facility	**13a**	%
b	An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . ☐ **Yes** ☐ **No**

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____.

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

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

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

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

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

Return Reference	Explanation

Schedule G (Form 990) 2022

Additional Data

Return to Form

Software ID:

Software Version:

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

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
HORIZONS FOUNDATION

Employer identification number
94-2686530

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) OPENHOUSE 65 LAGUNA STREET SAN FRANCISCO,CA 94102	94-3337955	501C3	497,607	0			UNRESTRICTED OPERATING SUPPORT GRANT
(2) UHAI EASHRI USA INC C/O MARC SOKOL 722 TENTH AVE STE 2D NEW YORK,NY 10019	35-2618978	501C3	460,000	0			RESTRICTED TO A SPECIFIC PURPOSE - FUNDS USE ARE RESTRICTED TO ISDAO
(3) PRESCOTT COLLEGE 220 GROVE AVE PRESCOTT,AZ 86301	86-0294012	501C3	305,000	0			RESTRICTED TO A SPECIFIC PURPOSE
(4) DORIAN FUND 1390 MARKET STREET SUITE 1004 SAN FRANCISCO,CA 94102	20-6309863	501C3	269,552	0			RESTRICTED TO DORIAN FUND
(5) LAMBDA LITERARY FOUNDATION PO BOX 20186 NEW YORK,NY 10014	52-1996380	501C3	256,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(6) TIDES FOUNDATION PO BOX 29198 SAN FRANCISCO,CA 941290198	51-0198509	501C3	247,232	0			RESTRICTED TO A SPECIFIC PURPOSE - DREAM DEFENDERS
(7) COLLEGE OF SAINT BENEDICT AND SAINT JOHN'S UNIVERSITY 37 SOUTH COLLEGE AVE ST JOSEPH,MN 56374	41-0969244	501C3	200,000	0			RESTRICTED TO A SPECIFIC PURPOSE - MARGARET Z. ROBSONENDOWED SCHOLARSHIP
(8) NATIONAL CENTER FOR LESBIAN RIGHTS 870 MARKET ST SUITE 370 SAN FRANCISCO,CA 94102	94-3086885	501C3	194,105	0			UNRESTRICTED OPERATING SUPPORT GRANT
(9) OUTRIGHT ACTION INTERNATIONAL 80 MAIDEN LANE SUITE 1505 NEW YORK,NY 10038	94-3139952	501C3	187,440	0			UNRESTRICTED OPERATING SUPPORT GRANT
(10) PLANNED PARENTHOOD FEDERATION OF AMERICA INC 123 WILLIAM ST FL 9 NEW YORK,NY 100383812	13-1644147	501C3	148,650	0			UNRESTRICTED OPERATING SUPPORT GRANT
(11) AMERICAN CIVIL LIBERTIES UNION FOUNDATION OF NORTHERN CALIFORNIA 39 DRUMM STREET SAN FRANCISCO,CA 94111	94-0279770	501C3	137,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(12) UNIVERSITY OF CALIFORNIA SAN FRANCISCO FOUNDATION 220 MONTGOMERY STREET 5TH FLOOR SAN FRANCISCO,CA 94104	94-2829914	501C3	120,250	0			RESTRICTED TO A SPECIFIC PURPOSE - THIS GRANT IS FOR THE UNDERGRADUATE RESEARCH INTERNSHIP PROGRAM
(13) WOMEN'S FOUNDATION OF CALIFORNIA 300 FRANK H OGAWA PLAZA SUITE 420 OAKLAND,CA 94612	94-2752421	501C3	101,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(14) IPAS PO BOX 9990 CHAPEL HILL,NC 27515	56-1071085	501C3	100,000	0			RESTRICTED TO A SPECIFIC PURPOSE - FUNDS USE ARE RESTRICTED TO GRANT # 22-GFEF-245009
(15) YVETTE A FLUNDER FOUNDATION 8400 ENTERPRISE WAY OAKLAND,CA 94621	32-0095516	501C3	100,000	0			RESTRICTED TO A SPECIFIC PURPOSE - FUNDS USE ARE RESTRICTED (WAWA ABA)
(16) GLOBAL PROJECT AGAINST HATE AND EXTREMISM 3066 ZELDA ROAD 400 MONTGOMERY,AL 36106	84-3459993	501C3	75,000	0			PROJECT SUPPORT
(17) PLANNED PARENTHOOD MAR MONTE INC 1605 THE ALAMEDA SAN JOSE,CA 95126	94-1583439	501C3	75,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(18) GLBT HISTORICAL SOCIETY 989 MARKET STREET LOWER LEVEL SAN FRANCISCO,CA 94103	94-2989004	501C3	67,750	0			RESTRICTED TO A SPECIFIC PURPOSE - END OF YEAR MATCHING CHALLENGE FUND
(19) NATIONAL LGBTQ TASK FORCE 1325 MASSACHUSETTS AVE NW SUITE 600 WASHINGTON,DC 20005	52-1624852	501C3	66,250	0			UNRESTRICTED OPERATING SUPPORT GRANT
(20) NARAL PRO-CHOICE AMERICA FOUNDATION 1725 I STREET SUITE 900 WASHINGTON,DC 20006	52-1100361	501C3	61,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(21) HAZELDEN BETTY FORD FOUNDATION 15251 PLEASANT VALLEY RD CENTER CITY,MN 550120011	41-0682405	501C3	60,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(22) WOMEN'S CANCER RESOURCE CENTER 2908 ELLSWORTH ST BERKELEY,CA 94705	94-3131204	501C3	55,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(23) PROGRESSIVE MULTIPLIER 1802 VERNON STREET NORTHWEST 1122 WASHINGTON,DC 20009	83-3190176	501C3	55,000	0			SUPPORT FOR EQUALITY OHIO
(24) SEXUAL MINORITIES UGANDA - USA DBA SMUG INTERNATIONAL 10 ALGER DRIVE SCARBOROUGH,ME 04074	82-1321263	501C3	51,500	0			RESTRICTED TO A SPECIFIC PURPOSE - GRANT FUNDS RESTRICTED FOR USE AS DETAILED IN HORIZONS' GRANT AGREEMENT #22-GFEF-242504
(25) AMALGAMATED CHARITABLE FOUNDATION INC 1825 K STREET NW WASHINGTON,DC 20006	82-1517696	501C3	51,000	0			SUPPORT FOR THE MARRIAGE DEFENSE FUND
(26) PROTEUS FUND 15 RESEARCH DRIVE SUITE B AMHERST,MA 010022776	04-3243004	501C3	51,000	0			RESTRICTED TO A SPECIFIC PURPOSE - THIRD WAVE FUND
(27) THE CENTER FOR CULTURAL POWER 360 GRAND AVE 146 OAKLAND,CA 94610	45-3154473	501C3	50,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(28) THE FILM COLLABORATIVE INC 3405 CAZADOR ST LOS ANGELES,CA 90065	32-0295081	501C3	50,000	0			PROJECT SUPPORT FOR THE HUNKY JESUS
(29) UNIVERSITY OF CALIFORNIA BERKELEY SCHOOL OF LAW 215 BOALT HALL BERKELEY,CA 947207200	94-6090626	501C3	50,000	0			SUPPORT FOR ALBERS-ALEXANDER LGBTQ LAW SCHOLARSHIP AWARD RECIPIENT
(30) BREAST CANCER ACTION 548 MARKET ST PMB 17179 SAN FRANCISCO,CA 94104	94-3138992	501C3	48,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(31) SAN FRANCISCO PARKS ALLIANCE 1663 MISSION ST 320 SAN FRANCISCO,CA 94103	23-7131784	501C3	45,000	0			RESTRICTED TO A SPECIFIC PURPOSE - FOR THE FRIENDS OF HARVEY MILK PLAZA
(32) LYRIC 127 COLLINGWOOD ST SAN FRANCISCO,CA 94114	94-3227296	501C3	41,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(33) BREAST CANCER FUND 1388 SUTTER STREET SUITE 400 SAN FRANCISCO,CA 941095400	94-3155886	501C3	40,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(34) JEWISH WOMEN'S ARCHIVE INC ONE HARVARD STREET SUITE 200 BROOKLINE,MA 02445	04-3293188	501C3	40,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(35) YES IN MY BACK YARD 1260 MISSION STREET SAN FRANCISCO,CA 94103	32-0610451	501C3	40,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(36) SAN FRANCISCO AIDS FOUNDATION 1035 MARKET STREET SUITE 400 SAN FRANCISCO,CA 94103	94-2927405	501C3	38,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(37) UNIVERSITY OF CALIFORNIA BERKELEY - FINANCIAL AID 201 SPROUL HALL 1960 BERKELEY,CA 947204422	94-6090626	501C3	37,000	0			SUPPORT FOR ALBERS-ALEXANDER LGBTQ LAW SCHOLARSHIP AWARD RECIPIENT
(38) FRAMELINE 145 9TH STREET SUITE 300 SAN FRANCISCO,CA 94103	94-2775772	501C3	36,250	0			UNRESTRICTED OPERATING SUPPORT GRANT
(39) RAY OF LIGHT THEATRE 3530 18TH STREET 4 SAN FRANCISCO,CA 94110	65-1173567	501C3	35,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(40) THEATRE RHINOCEROS PO BOX 423406 SAN FRANCISCO,CA 94142	94-2568273	501C3	33,750	0			UNRESTRICTED OPERATING SUPPORT GRANT
(41) USE THE NEWS FOUNDATION 358 NOE ST SAN FRANCISCO,CA 94114	94-3302611	501C3	32,750	0			UNRESTRICTED OPERATING SUPPORT GRANT
(42) AMERICAN CIVIL LIBERTIES UNION FOUNDATION 125 BROAD STREET 18TH FLOOR NEW YORK,NY 10004	13-6213516	501C3	31,615	0			RESTRICTED TO A SPECIFIC PURPOSE - ACLU FOUNDATION / LGBTQ PROJECT
(43) SAN FRANCISCO- MARIN FOOD BANK 900 PENNSYLVANIA AVE SAN FRANCISCO,CA 94107	94-3041517	501C3	31,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(44) LAVENDER SENIORS OF THE EAST BAY 4123 BROADWAY 818 OAKLAND,CA 94611	94-3337173	501C3	30,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(45) TAKE BACK THE COURT FOUNDATION 2370 MARKET STREET 423 SAN FRANCISCO,CA 94114	84-2145297	501C3	30,000	0			MATCHING GRANT
(46) UNIVERSITY OF WISCONSIN LAW SCHOOL 975 BASCOM MALL MADISON,WI 53706	39-1805963	501C3	30,000	0			SUPPORT FOR ALBERS-ALEXANDER LGBTQ LAW SCHOLARSHIP AWARD RECIPIENT
(47) SMITHSONIAN INSTITUTION P O BOX 37012 MRC 035 WASHINGTON,DC 20013	53-0206027	501C3	28,550	0			RESTRICTED TO A SPECIFIC PURPOSE - MARGARET Z. ROBSON SYMPOSIUM
(48) TRUSTEES OF COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK 622 WEST 113TH STREET MAILCODE 4530 NEW YORK,NY 10025	13-5598093	501C3	28,000	0			PROJECT SUPPORT FOR COLUMBIA UNIVERSITY GRADUATE SCHOOL OF JOURNALISM
(49) DOCTORS WITHOUT BORDERS USA 333 7TH AVE FL 2 NEW YORK,NY 100015089	13-3433452	501C3	27,250	0			UNRESTRICTED OPERATING SUPPORT GRANT
(50) NATIONAL AIDS MEMORIAL GROVE PO BOX 2270 SAN FRANCISCO,CA 941262270	82-4329012	501C3	26,300	0			UNRESTRICTED OPERATING SUPPORT GRANT
(51) FOTC -SF BAY AREA 111 QUINT ST SAN FRANCISCO,CA 94124	93-1300690	501C3	26,250	0			UNRESTRICTED OPERATING SUPPORT GRANT
(52) BROADWAY CARES- EQUITY FIGHTS AIDS INC 165 WEST 46TH ST SUITE 1300 NEW YORK,NY 10036	13-3458820	501C3	26,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(53) CATTICUS CORPORATION 2600 TENTH STREET BERKELEY,CA 94710	95-3579940	501C3	25,000	0			OTHER - FOR: NO STRAIGHT LINES: THE RISE OF QUEER COMICS
(54) NEW CONSERVATORY THEATRE CENTER (NCTC) 25 VAN NESS AVE LOWER LOBBY SAN FRANCISCO,CA 94102	94-2778856	501C3	25,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(55) ORAM - ORGANIZATION FOR REFUGE ASYLUM & MIGRATION 2443 FILLMORE ST 380- 6489 SAN FRANCISCO,CA 94115	26-3748676	501C3	25,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(56) SISTER SONG PO BOX 94408 ATLANTA,GA 94408	51-0544927	501C3	25,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(57) OPERA PARALLLE 44 PAGE STREET SUITE 400 SAN FRANCISCO,CA 94102	72-1584393	501C3	22,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(58) GIRLS INC 120 WALL STREET 3RD FLOOR NEW YORK,NY 100053902	13-1915124	501C3	22,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(59) ROTARY FOUNDATION OF ROTARY INTERNATIONAL 1560 SHERMAN AVE EVANSTON,IL 60201	36-3245072	501C3	22,000	0			RESTRICTED
(60) RYSE 205 41ST STREET RICHMOND,CA 94805	26-0692904	501C3	20,250	0			UNRESTRICTED OPERATING SUPPORT GRANT
(61) ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION INC 225 NORTH MICHIGAN AVENUE SUITE 1700 CHICAGO,IL 60601	13-3039601	501C3	20,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(62) CHARLOTTE MAXWELL CLINIC 411 30TH ST STE 508 OAKLAND,CA 94609	94-3116456	501C3	20,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(63) FRIENDS OF THE ISRAEL DEFENSE FORCE 60 EAST 42ND STREET NEW YORK,NY 10165	13-3156445	501C3	20,000	0			SCHOLARSHIP
(64) GOLDEN GATE PERFORMING ARTSSAN FRANCISCO GAY MEN'S CHORUS 170 VALENCIA STREET SAN FRANCISCO,CA 94103	94-2576101	501C3	20,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(65) IFWHENHOW LAWYERING FOR REPRODUCTIVE JUSTICE 1714 FRANKLIN STREET 100-393 OAKLAND,CA 94612	90-0181944	501C3	20,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(66) LYON-MARTIN HEALTH SERVICES 1735 MISSION ST SAN FRANCISCO,CA 941032417	94-2597707	501C3	20,000	0			LYON-MARTIN WOMENS HEALTH SERVICE INC
(67) NORTH DAKOTA DELTA UPSILON EDUCATION FOUNDATION 505 PRINCETON ST GRAND FOLKS,ND 58203	37-1972569	501C3	20,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(68) ROTARY SERVICE INC 300 MONTGOMERY SUITE 200 SAN FRANICSCO,CA 94104	94-6064217	501C3	20,000	0			PROJECT SUPPORT FOR THE SF ROTARY FOUNDATION PROJECTS AND TRF CAMPAIGNS
(69) SAN FRANCISCO KIDPOWER TEENPOWER FULLPOWER INTERNATIONAL 538 27TH STREET SAN FRANCISCO,CA 94131	77-0226712	501C3	20,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(70) WOMEN'S MEDICAL FUND INC PO BOX 248 MADISON,WI 53701	51-0189614	501C3	20,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(71) PEACE DEVELOPMENT FUND INC PO BOX 1280 AMHERST,MA 01004	04-2738794	501C3	19,500	0			OTHER - HEART AND HAND FUND/FRIENDS OF LITTLE EAGLE
(72) SERVICES & ADVOCACY FOR GAY LESBIAN BISEXUAL & TRANSGENDER ELDERS INC 305 SEVENTH AVE 15TH FLOOR NEW YORK,NY 10001	13-2947657	501C3	19,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(73) LAMBDA LEGAL PO BOX 5070 HAGERSTOWN,MD 217415070	23-7395681	501C3	18,650	0			UNRESTRICTED OPERATING SUPPORT GRANT
(74) LAMBDA LEGAL DEFENSE & EDUCATION FUND 120 WALL STREET 19TH FLOORS NEW YORK,NY 10005	23-7395681	501C3	18,550	0			UNRESTRICTED OPERATING SUPPORT GRANT
(75) AMOR PARA TODOS 1500 PETALUMA BLVD SOUTH PETALUMA,CA 94954	90-0988278	501C3	18,250	0			GENERAL OPERATING SUPPORT TO JOIN WITH SCHOOLS AND COMMUNITIES IN AN INNOVATIVE, INTERSECTIONAL APPROACH TO CULTIVATE MORE GENDER AND LGBTQIA+ AFFIRMING ENVIRONMENTS FOR OUR YOUTH.
(76) NATIONAL NETWORK OF ABORTION FUNDS 42 SEAVERNS AVE BOSTON,MA 02130	04-3236982	501C3	17,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(77) TRANSGENDER LAW CENTER PO BOX 741803 LOS ANGELES,CA 900741803	05-0544006	501C3	16,750	0			UNRESTRICTED OPERATING SUPPORT GRANT
(78) GLOBAL FUND FOR WOMEN 800 MARKET STREET SEVENTH FLOOR SAN FRANCISCO,CA 94104	77-0155782	501C3	16,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(79) NAACP LEGAL DEFENSE & EDUCATION FUND INC 40 RECTOR STREET 5TH FLOOR NEW YORK,NY 10006	13-1655255	501C3	16,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(80) HOPE IN A BOX INC 31 WOODRUFF AVENUE APT 3R BROOKLYN,NY 11226	82-4020709	501C3	15,250	0			UNRESTRICTED OPERATING SUPPORT GRANT
(81) CHINESE FOR AFFIRMATIVE ACTION 17 WALTER U LUM PLACE SAN FRANCISCO,CA 94108	94-2161304	501C3	15,250	0			LAVENDER PHOENIX (FORMERLY APIENC)
(82) LGBT ASYLUM PROJECT 8015 HILLSIDE STREET OAKLAND,CA 94605	47-5301730	501C3	15,250	0			PARIVAR BAY AREA
(83) SOMOS FAMILIA 2323 BROADWAY OAKLAND,CA 94612	81-4019488	501C3	15,250	0			UNRESTRICTED OPERATING SUPPORT GRANT
(84) THE BILLY FOUNDATION 1100 CODDINGTOWN CENTER SUITE 3 SANTA ROSA,CA 95401	68-0314349	501C3	15,250	0			GENERAL OPERATING SUPPORT TO FOSTER COMMUNITY, INTIMACY, AND PERSONAL EXPLORATION AMONG GAY, BI, TRANS AND QUEER MEN THROUGH SHARED VALUES AND BROTHERHOOD.
(85) QUEER CULTURAL CENTER 1024 101ST AVE OAKLAND,CA 94603	94-3227839	501C3	15,000	0			ABO COMIX
(86) ALTERTHEATER (ALTERNATIVE THEATER ENSEMBLE) 1337 FOURTH ST SUITE A SAN RAFAEL,CA 94901	86-1110074	501C3	15,000	0			PROJECT SUPPORT FOR THE PLAY PUEBLO REVOLT THAT EXPLORES THE PUEBLO UPRISING THROUGH THE EYES OF A YOUNG, GAY PUEBLO MAN AND HIS OLDER BROTHER.
(87) ASTRAEA LESBIAN FOUNDATION FOR JUSTICE 116 EAST 16TH STREET 7TH FLOOR NEW YORK,NY 10003	13-2992977	501C3	15,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(88) 7TH GENERATION 77 VAN NESS SUITE 101 BOX 1043 SAN FRANCISCO,CA 94102	68-0027247	501C3	15,000	0			BAY AREA AMERICAN INDIAN TWO-SPIRITS
(89) VMC FOUNDATION 2400 MOORPARK AVE 207 REDWOOD CITY,CA 95128	77-0187890	501C3	15,000	0			COLECTIVO ACCIN LATINA DE AMBIENTE
(90) COMMUNITY UNITED AGAINST VIOLENCE 427 SOUTH VAN NESS AVENUE SAN FRANCISCO,CA 94103	94-2758154	501C3	15,000	0			GENERAL OPERATING SUPPORT FOR PROGRAMS THAT WORK TO BUILD THE POWER OF LGBTQ COMMUNITIES TO TRANSFORM VIOLENCE AND OPPRESSION.
(91) DEM BOIS INC PO BOX 6809 SAN PABLO,CA 94806	81-1997448	501C3	15,000	0			GENERAL OPERATING SUPPORT TO PROVIDE FINANCIAL ASSISTANCE FOR FEMALE TO MALE TRANSMASCULINE IDENTIFIED PEOPLE OF COLOR SO THEY CAN OBTAIN GENDER AFFIRMING SURGERIES TO HELP THEM ON THEIR JOURNEY TO LIVING AUTHENTIC LIVES.
(92) DANCER'S GROUP 1237 DWIGHT WAY BERKELEY,CA 94702	94-2879185	501C3	15,000	0			DETOUR DANCE
(93) INTERSECTION FOR THE ARTS C/O INTERSECTION FOR THE ARTS 1446 MARKET STREET SAN FRANCISCO,CA 94102	94-1593216	501C3	15,000	0			DIAMOND WAVE
(94) SOCIAL GOOD FUND 3346 FREEMAN ROAD WALNUT CREEK,CA 94595	46-1323531	501C3	15,000	0			DYKES WITH DRILLS
(95) EAST BAY SANCTUARY COVENANT 2362BANCROFTWAY BERKELEY,CA 94704	94-3249753	501C3	15,000	0			PROJECT SUPPORT FOR EAST BAY SANCTUARY COVENANT LGBT ASYLUM PROGRAM TO PROVIDE INTEGRATED LEGAL AND SOCIAL SERVICES, PSYCHOLOGICAL SUPPORT, AND COMMUNITY-BUILDING TO LATINX LGBT ASYLUM SEEKERS IN THE BAY AREA.
(96) FRACTURED ATLAS PRODUCTIONS INC PO BOX 55 HARTSDALE,NY 10530	11-3451703	501C3	15,000	0			RESTRICTED TO A SPECIFIC PURPOSE - 26.2 TO LIFE: THE SAN QUENTIN PRISON MARATHON
(97) GRADUATE THEOLOGICAL UNION 2400 RIDGE RD BERKELEY,CA 94709	94-1581707	501C3	15,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(98) QUEER CULTURAL CENTER 4509 ADELINE ST EMERYVILLE,CA 94608	94-3227839	501C3	15,000	0			INDIA SKY DAVIS (PERFORMING ARTS PROJECT)
(99) GLBT HISTORICAL SOCIETY 3021 IRWIN STREET VALLEJO,CA 94591	94-2989004	501C3	15,000	0			LOUISE LAWRENCE TRANSGENDER ARCHIVE
(100) SIDE BY SIDE 22245 MAIN STREET SUITE 200 HAYWARD,CA 94541	94-1156301	501C3	15,000	0			OUR SPACE - A PROGRAM OF SUNNY HILL SERVICES
(101) SOCIAL GOOD FUND 1714 FRANKLIN ST 100- 404 OAKLAND,CA 94612	46-1323531	501C3	15,000	0			PEACOCK REBELLION
(102) POSITIVE IMAGES 200 MONTGOMERY DR STE C SANTA ROSA,CA 954046663	94-3137845	501C3	15,000	0			GENERAL OPERATING SUPPORT FOR A LGBTQIA+ COMMUNITY CENTER THAT PROVIDES SUPPORT TO SONOMA COUNTY'S LGBTQIA+ POPULATION, WITH AN EMPHASIS ON IDENTITIES AND INDIVIDUALS AT THE MARGINS.
(103) QUEER LIFESPACE 2275 MARKET STREET SAN FRANCISCO,CA 94114	45-2451077	501C3	15,000	0			GENERAL OPERATING SUPPORT TO PROVIDE AFFORDABLE, EVIDENCE BASED MENTAL HEALTH SERVICES, SUBSTANCE ABUSE SERVICES, AND CLINICAL TRAINING TO THE LGBTQIA+ COMMUNITY.
(104) GREEN CITIES FUND 725 WASHINGTON STREET SUITE 300 OAKLAND,CA 94607	20-3911647	501C3	15,000	0			QUEER SURF
(105) QUEER CULTURAL CENTER 3543 18TH ST 4 SAN FRANCISCO,CA 94110	94-3227839	501C3	15,000	0			SAN FRANCISCO TRANS MARCH
(106) FRESH MEAT PRODUCTIONS 375 27TH STREET A SAN FRANCISCO,CA 94131	80-0225836	501C3	15,000	0			SAN FRANCISCO TRANSGENDER FILM FESTIVAL
(107) SAN JOSE MUSEUM OF QUILTS & TEXTILES 520 SOUTH FIRST STREET SAN JOSE,CA 951132806	77-0123939	501C3	15,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(108) SLOW FOOD USA INC 20 JAY STREET SUITE M04 BROOKLYN,NY 10024	13-4100161	501C3	15,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(109) SOLANO PRIDE CENTER 1234 EMPIRE ST SUITE 1560 FAIRFIELD,CA 94533	68-0477185	501C3	15,000	0			GENERAL OPERATING SUPPORT FOR SOLANO PRIDE CENTER TO BUILD COMMUNITY AND PROMOTE WELLNESS AMONG LGBTQ PEOPLE AND OUR ALLIES.
(110) THE BOB MIZER FOUNDATION INC 920 LARKIN STREET SAN FRANCISCO,CA 94109	27-3515296	501C3	15,000	0			GENERAL OPERATING SUPPORT TO PROMOTE AND PRESERVE PROGRESSIVE AND CONTROVERSIAL PHOTOGRAPHY OF THE MID 20TH CENTURY, WITH A FOCUS ON ENSURING THE CONTROVERSIAL ARTISTIC ARTIFACTS AND STORIES OF NOW OLDER MEMBERS OF THE LGBTQ+ COMMUNITY ARE REPRESENTED AND SHARED.
(111) THE CLIMATE CENTER 831 4TH ST SANTA ROSA,CA 95404	45-0485495	501C3	15,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(112) UNIVERSITY OF SAN FRANCISCO 2130 FULTON ST SAN FRANCISCO,CA 941171080	94-1156628	501C3	15,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(113) PACIFIC CENTER FOR HUMAN GROWTH 2712 TELEGRAPH AVE BERKELEY,CA 94705	94-2287492	501C3	14,750	0			UNRESTRICTED OPERATING SUPPORT GRANT
(114) SAN FRANCISCO GENERAL HOSPITAL FOUNDATION 2789 25TH STREET SUITE 2028 SAN FRANCISCO,CA 94110	94-3189424	501C3	14,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(115) A PRECIOUS CHILD 7051 W 118TH AVE BROOMFIELD,CO 80020	26-3349334	501C3	13,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(116) RAINBOW COMMUNITY CENTER OF CONTRA COSTA COUNTY 2118 WILLOW PASS RD SUITE 500 CONCORD,CA 94520	68-0375857	501C3	13,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(117) THE TREVOR PROJECT 9056 SANTA MONICA BLVD SUITE 208 WEST HOLLYWOOD,CA 90069	95-4681287	501C3	13,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(118) ALAMEDA COUNTY COMMUNITY FOOD BANK PO BOX 2599 OAKLAND,CA 94621	94-2960297	501C3	12,750	0			UNRESTRICTED OPERATING SUPPORT GRANT
(119) PROJECT OPEN HAND 730 POLK STREET SAN FRANCISCO,CA 941097813	94-3023551	501C3	12,700	0			UNRESTRICTED OPERATING SUPPORT GRANT
(120) KQED INC 2601 MARIPOSA STREET SAN FRANCISCO,CA 94110	94-1241309	501C3	12,515	0			UNRESTRICTED OPERATING SUPPORT GRANT
(121) LARKIN STREET YOUTH SERVICES 134 GOLDEN GATE AVENUE SAN FRANCISCO,CA 94102	94-2917999	501C3	12,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(122) TURNOUT 3207 LAKESHORE AVE OAKLAND,CA 94610	47-5263212	501C3	12,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(123) NEW GEORGIA PROJECT INCORPORATED 830 GLENWOOD AVE SE SUITE 510-221 ATLANTA,GA 30316	82-1348307	501C3	12,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(124) TAMALPA RUNNERS PO BOX 4132 SAN RAFAEL,CA 94913	94-2587403	501C3	12,000	0			SQ1000 DONATION
(125) WEST EDGE OPERA 1700 SHATTUCK AVENUE NO 312 BERKELEY,CA 94709	94-2739808	501C3	12,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(126) SAN FRANCISCO PRIDE 1800 MARKET ST PMB 5 SAN FRANCISCO,CA 94102	94-3006693	501C3	11,500	0			RESTRICTED TO A SPECIFIC PURPOSE - FOR PINK TRIANGLE
(127) COMMUNITY FOUNDATION OF SONOMA COUNTY 120 STONY POINT ROAD SUITE 220 SANTA ROSA,CA 95401	68-0003212	501C3	11,250	0			HEALDSBURG FOREVER YEAR-END CAMPAIGN
(128) CONGREGATION SHA'AR ZAHAV 290 DOLORES STREET SAN FRANCISCO,CA 94103	94-2477006	501C3	11,200	0			UNRESTRICTED OPERATING SUPPORT GRANT
(129) FIRST UNITARIAN UNIVERSALIST SOCIETY OF SAN FRANCISCO ATTN GUARDIAN GROUP - BOX 71 1187 FRANKLIN STREET SAN FRANCISCO,CA 94109	94-1186221	501C3	11,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(130) PROVINCETOWN COMMONS 46 BRADFORD ST PROVINCETOWN,MA 02657	81-4915644	501C3	10,750	0			UNRESTRICTED OPERATING SUPPORT GRANT
(131) THE SUNDANCE ASSOCIATION FOR COUNTRY-WESTERN DANCING 2261 MARKET STREET PMB 225 SAN FRANCISCO,CA 94114	94-3336172	501C3	10,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(132) THE VOTER PARTICIPATION CENTER 1707 L ST NW SUITE 300 WASHINGTON,DC 20036	55-0889748	501C3	10,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(133) YALE UNIVERSITY PO BOX 2038 NEW HAVEN,CT 06521	06-0646973	501C3	10,500	0			MARK BURNS YALE COLLEGE CLASS OF 1980
(134) HAVE A GAY DAY INC 2210 ARBOR BLVD MORAINE,OH 45439	46-3331321	501C3	10,250	0			GIVE OUT DAY PRIZE AWARD GRANT - NATIONAL SMALL LEADERBOARD 1ST PRIZE
(135) VOTEORG 1270 GROVE STT 301 SAN FRANCISCO,CA 94117	26-2094990	501C3	10,250	0			RESTRICTED TO A SPECIFIC PURPOSE - MIND THE GAP
(136) BRADY CENTER TO PREVENT GUN VIOLENCE 1225 I ST NW SUITE 1100 WASHINGTON,DC 20005	52-1285097	501C3	10,220	0			UNRESTRICTED OPERATING SUPPORT GRANT
(137) ALEXANDER VALLEY FILM SOCIETY 121 EAST 1ST STREET PO BOX 71 CLOVERDALE,CA 95425	47-2085577	501C3	10,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(138) ALL-OPTIONS PO BOX 28284 OAKLAND,CA 94604	87-0729403	501C3	10,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(139) ARCHIPELAGO COLLECTIVE 3015 NW 77TH ST SEATTLE,WA 98117	81-2876277	501C3	10,000	0			OTHER - ACQUIRING A NEW PIANO
(140) CENTER FOR HUMANE TECHNOLOGY 77 VAN NESS AVE 101- 1601 SAN FRANCISCO,CA 94102	82-3492182	501C3	10,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(141) CENTER FOR INDEPENDENT DOCUMENTARY 1300 SOLDIERS FIELD ROAD SUITE 4 BOSTON,MA 02135	04-2738458	501C3	10,000	0			RESTRICTED TO A SPECIFIC PURPOSE - TO BE USED FOR THE DOCUMENTARY FILM NARROW PATH TO HAPPINESS.
(142) CHACRUNA INSTITUTE FOR PSYCHEDELIC PLANT MEDICINES 1650 CALIFORNIA ST APT 10 SAN FRANCISCO,CA 94109	84-3076078	501C3	10,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(143) CURRY SENIOR CENTER 315 TURK STREET SAN FRANCISCO,CA 94102	23-7362588	501C3	10,000	0			PROJECT SUPPORT TO PROMOTE WELLNESS, DIGNITY & INDEPENDENCE FOR SENIORS, WITH A FOCUS ON SOCIAL AND SUPPORT PROGRAMMING FOR LGBTQ+ OLDER ADULTS.
(144) DEL SHORES FOUNDATION INC 6250 HOLLYWOOD BLVD UNIT 8E LOS ANGELES,CA 90028	84-2050488	501C3	10,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(145) ENTREPRENEURSHIP FOR ALL 175 CABOT ST STE 310 LOWELL,MA 01854	47-1858182	501C3	10,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(146) AUTISTIC WOMEN & NONBINARY NETWORK 12651 SAN PABLO AVE RICHMOND,CA 94805	27-5133111	501C3	10,000	0			HEALTH JUSTICE COMMONS (HJC)
(147) JEWISH COMMUNITY FEDERATION OF SAN FRANCISCO THE PENINSULA MARIN AND SONO 121 STEUART STREET SAN FRANCISCO,CA 94105	94-1156533	501C3	10,000	0			RESTRICTED TO A SPECIFIC PURPOSE - FBO LESBIAN GLOBAL
(148) JEWISH FAMILY AND CHILDREN'S SERVICES 1710 SCOTT STREET SAN FRANCISCO,CA 94115	94-1156528	501C3	10,000	0			PROJECT SUPPORT FOR THE HOLOCAUST CENTER & TAUBER HOLOCAUST - LIBRARY NEVER FORGET CAMPAIGN
(149) LIVE OAK A LEARNING CENTER FOR CHILDREN 1555 MARIPOSA ST SAN FRANCISCO,CA 94107	94-2153158	501C3	10,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(150) LOS ANGELES LGBT COMMUNITY CENTER MCDONALD/WRIGHT BUILDING 1625 SCHRADER BLVD LOS ANGELES,CA 90028	95-3567895	501C3	10,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(151) PLYMOUTH UNITED CHURCH OF CHRIST 424 MONTE VISTA AVE OAKLAND,CA 94610	94-1447221	501C3	10,000	0			MINISTERIO LATINO
(152) ON THE MOVE 780 LINCOLN AVENUE NAPA,CA 94558	75-3149095	501C3	10,000	0			PROJECT SUPPORT FOR LGBTQ CONNECTION TO FOSTER A HEALTHY, DIVERSE AND INCLUSIVE COMMUNITY, DRIVEN BY EMERGING LEADERS IN THE RURAL AND SUBURBAN NORTH SF BAY AREA.
(153) OUT AND EQUAL WORKPLACE ADVOCATES PO BOX 894434 LOS ANGELES,CA 90189	02-0681855	501C3	10,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(154) OUTLET PROGRAM - A PROJECT OF ADOLESCENT COUNSELING SERVICES 643 BAIR ISLAND ROAD SUITE 301 REDWOOD CITY,CA 94063	51-0192551	501C3	10,000	0			PROGRAM SUPPORT TO EMPOWER YOUTH IN OUR COMMUNITY TO FIND THEIR WAY THROUGH SOCIAL-EMOTIONAL SUPPORT AND BY BUILDING SAFE, ACCEPTING COMMUNITIES.
(155) PALM SPRINGS PLAZA THEATRE FOUNDATION 1775 EAST PALM CANYON DRIVE SUITE 110-1028 PALM SPRINGS,CA 92264	87-3813182	501C3	10,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(156) PKD FOUNDATION 8330 WARD PARKWAY SUITE 501 KANSAS CITY,MO 64114	43-1266906	501C3	10,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(157) SAN FRANCISCO CHAMBER OF COMMERCE FOUNDATION 235 MONTGOMERY ST STE 760 SAN FRANCISCO,CA 94104	94-3114015	501C3	10,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(158) SEBASTOPOL AREA SENIOR CENTER 167 N HIGH ST SEBASTOPOL,CA 95472	23-7043925	501C3	10,000	0			PROJECT SUPPORT FOR SEBASTOPOL AREA SENIOR CENTER'S LGBT PROGRAMING AS THE ONLY PROGRAMMING FOCUSED ON THE LGBTQ+ COMMUNITY MEMBERS AGED 55+ WHO LIVE IN SONOMA COUNTY.
(159) SOLANO SERENITY CENTER 1415 OHIO STREET VALLEJO,CA 945905355	47-2120023	501C3	10,000	0			GENERAL OPERATING SUPPORT TO PROVIDE RESOURCES TO THE LGBTQ+ COMMUNITY, THEREBY CREATING A SAFE HAVEN FOR ALL LGBTQ+ INDIVIDUALS TO LIVE THEIR LIVES FREE FROM DISCRIMINATION AND UNFAIR TREATMENT FROM OTHERS.
(160) SPELMAN COLLEGE 350 SPELMAN LANE SW ATLANTA,GA 30314	58-0566243	501C3	10,000	0			RESTRICTED TO A SPECIFIC PURPOSE - FOR THE QUEER STUDIES INITIATIVE
(161) STANFORD UNIVERSITY FINANCIAL AID 355 GALVEZ STREET STANFORD,CA 943053021	94-1156365	501C3	10,000	0			SUPPORT FOR MARKOWSKI LEACH SCHOLARSHIP AWARD RECIPIENT
(162) STILL HERE C/O QCC 762 FULTON ST SAN FRANCISCO,CA 94102	94-3227839	501C3	10,000	0			PROJECT SUPPORT FOR STILL HERE SAN FRANCISCO/QUEER ANCESTORS PROJECT TO AMPLIFY THE VOICES AND EXPERIENCES OF LGBTQ+ PEOPLE RAISED IN SAN FRANCISCO.
(163) TEXAS ORGANIZING PROJECT EDUCATION FUND PO BOX 120296 SAN ANTONIO,TX 78212	27-1481855	501C3	10,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(164) THE NATURE CONSERVANCY - IDAHO 116 1ST AVE NORTH HAILEY,ID 83333	53-0242652	501C3	10,000	0			RESTRICTED TO A SPECIFIC PURPOSE - DESIGNATION TO SILVER CREEK PRESERVE. PLEASE ASSIGN THIS GRANT TO THE MAINTENANCE AND ENHANCEMENT OF SILVER CREEK.
(165) THE REGISTRATION PROJECT 1220 L ST NW STE 100- 348 WASHINGTON DC,VA 20005	26-4802468	501C3	10,000	0			RESTRICTED TO A SPECIFIC PURPOSE - MIND THE GAP - EVERYBODY VOTES CAMPAIGN
(166) THE SISTERS OF PERPETUAL INDULGENCE INC 584 CASTRO ST 392 SAN FRANCISCO,CA 941142594	94-3032120	501C3	10,000	0			OTHER - INTENDED TO SUPPORT THIS YEAR'S BEARRISON STREET FAIR
(167) THE SOURCE LGBT CENTER 208 WEST MAIN STREET B VISALIA,CA 93291	81-1907707	501C3	10,000	0			GIVE OUT DAY PRIZE AWARD GRANT - NATIONAL LARGE LEADERBOARD 1ST PLACE
(168) UC DAVIS FOUNDATION - LAW SCHOOL UC DAVIS GIFT ADMINISTRATION 202 COUSTEAU PLACE SUITE 185 DAVIS,CA 95618	94-6081352	501C3	10,000	0			SUPPORT FOR ALBERS-ALEXANDER LGBTQ LAW SCHOLARSHIP AWARD RECIPIENT
(169) WOODHULL FREEDOM FOUNDATION & FEDERATION 3302 GLENEAGLES DRIVE SILVER SPRING,MD 20906	11-3681116	501C3	10,000	0			SUPPORT FOR HUMAN RIGHTS COMMISSION
(170) YOUR PUBLIC RADIO 2216 N CHARLES ST BALTIMORE,MD 21218	31-1770828	501C3	10,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(171) EQUALITY FLORIDA INSTITUTE PO BOX 13184 ST PETERSBURG,FL 33733	59-3435235	501C3	9,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(172) FINE ARTS WORK CENTER IN PROVINCETOWN INC 24 PEARL ST PROVINCETOWN,MA 026571500	04-2487373	501C3	9,250	0			UNRESTRICTED OPERATING SUPPORT GRANT
(173) SAN FRANCISCO LGBT COMMUNITY CENTER 1800 MARKET STREET SAN FRANCISCO,CA 94102	94-3236718	501C3	9,250	0			UNRESTRICTED OPERATING SUPPORT GRANT
(174) UNIVERSITY OF CALIFORNIA MERCED 5200 N LAKE ROAD MERCED,CA 95343	27-0093858	501C3	9,000	0			SUPPORT FOR EQUALITY SCHOLARSHIP AWARD RECIPIENT
(175) OASIS LEGAL SERVICES 1900 ADDISON STREET SUITE 100 BERKELEY,CA 947042649	82-0696739	501C3	8,250	0			UNRESTRICTED OPERATING SUPPORT GRANT
(176) CHILD ADVOCATES OF SILICON VALLEY 509 VALLEY WAY MILPITAS,CA 95035	77-0250773	501C3	8,000	0			PROJECT SUPPORT TO SERVE CHILDREN AND YOUTH OF VARIOUS GENDER IDENTITIES AND SEXUAL ORIENTATIONS, AGED BIRTH TO 21 YEARS? OLD WHO ARE PLACED IN THE SANTA CLARA COUNTY DEPENDENCY SYSTEM, OTHERWISE KNOWN AS FOSTER CARE.
(177) IRON CROW THEATRE PO BOX 50074 BALTIMORE,MD 21211	45-5328495	501C3	8,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(178) OAKLAND LGBTQ COMMUNITY CENTER 3207 LAKESHORE AVE OAKLAND,CA 94610	82-2258008	501C3	8,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(179) RAINBOW RAILROAD USA 575 5TH AVENUE UNIT 18-139 NEW YORK,NY 10017	47-4896980	501C3	7,800	0			UNRESTRICTED OPERATING SUPPORT GRANT
(180) HUCKLEBERRY YOUTH PROGRAM 3450 GEARY BLVD SUITE 107 SAN FRANCISCO,CA 94118	94-1687559	501C3	7,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(181) SEBASTOPOL CENTER FOR THE ARTS 282 S HIGH STREET SEBASTOPOL,CA 95472	68-0168638	501C3	7,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(182) CENTER FOR CONSTITUTIONAL RIGHTS 666 BROADWAY 7TH FLOOR NEW YORK,NY 10012	22-6082880	501C3	7,000	0			RESTRICTED TO A SPECIFIC PURPOSE - GRANT TO SUPPORT TRAVEL AND LODGING FOR SMUG REPRESENTATIVES TO ATTEND OCTOBER 2022 MEETING.
(183) CENTER FOR SEX AND CULTURE 2261 MARKET STREET 455-A SAN FRANCISCO,CA 94114	91-2153691	501C3	7,000	0			GENERAL OPERATING SUPPORT TO PROVIDE JUDGMENT-FREE EDUCATION, CULTURAL EVENTS, LIBRARY/GALLERY/ARCHIVE, AND OTHER RESOURCES ACROSS THE SEX/GENDER SPECTRUM; AND RESEARCH AND DISSEMINATES INFORMATION TO FRAME AND INFORM ISSUES OF PUBLIC POLICY AND HEALTH.
(184) OAKLAND EAST BAY SYMPHONY 1440 BROADWAY SUITE 405 OAKLAND,CA 94612	94-3081554	501C3	7,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(185) ANIMAL PROTECTION OF NEW MEXICO INC PO BOX 11395 ALBUQUERQUE,NM 87192	85-0283292	501C3	6,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(186) GLBTQ LEGAL ADVOCATES & DEFENDERS 30 WINTER STREET STE 800 BOSTON,MA 02108	04-2660498	501C3	6,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(187) HUMAN RIGHTS CAMPAIGN FOUNDATION 1640 RHODE ISLAND AVENUE NW WASHINGTON,DC 200363278	52-1481896	501C3	6,417	0			UNRESTRICTED OPERATING SUPPORT GRANT
(188) RAINBOW WOMEN'S CHORUS 14938 CAMDEN AVENUE SUITE 61 SAN JOSE,CA 95124	77-0559726	501C3	6,400	0			GENERAL OPERATING SUPPORT TO DEVELOP MUSICAL EXCELLENCE WITH MUTUAL SUPPORT AND RESPECT, TO PERFORM FOR THE ENTERTAINMENT, EDUCATION, AND CULTURAL ENRICHMENT OF OUR AUDIENCES AND COMMUNITY.
(189) ALLIANCE FOR GIRLS 510 16TH ST 100 OAKLAND,CA 94612	82-1473988	501C3	6,300	0			UNRESTRICTED OPERATING SUPPORT GRANT
(190) ASIAN WOMEN'S SHELTER 3543 18TH STREET 19 SAN FRANCISCO,CA 94110	94-3030212	501C3	6,250	0			UNRESTRICTED OPERATING SUPPORT GRANT
(191) CREATIVE GROWTH ART CENTER AKA CREATIVE GROWTH INC 355 24TH ST OAKLAND,CA 94612	23-7319028	501C3	6,100	0			UNRESTRICTED OPERATING SUPPORT GRANT
(192) BRANDEIS UNIVERSITY OFFICE OF STUDENT FINANCIAL SERVICES 415 SOUTH STREET MS 027 WALTHAM,MA 02453	04-2103552	501C3	6,000	0			SUPPORT FOR EQUALITY SCHOLARSHIP AWARD RECIPIENT
(193) FRIENDS & FOUNDATION OF THE SAN FRANCISCO PUBLIC LIBRARY 710 VAN NESS AVENUE SAN FRANCISCO,CA 94102	94-6085452	501C3	6,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(194) SAN FRANCISCO STATE UNIVERSITY 1600 HOLLOWAY AVENUE SAN FRANCISCO,CA 94132	93-1137247	501C3	6,000	0			SUPPORT FOR EQUALITY SCHOLARSHIP AWARD RECIPIENT
(195) SPIRIT ROCK MEDITATION CENTER PO BOX 169 WOODACRE,CA 94973	94-2971001	501C3	6,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(196) STANFORD UNIVERSITY SCHOOL OF MEDICINE 251 CAMPUS DRIVE MSOB X383 STANFORD,CA 943055404	94-1156365	501C3	6,000	0			SUPPORT FOR EQUALITY SCHOLARSHIP AWARD RECIPIENT
(197) TRUMPETER SWAN SOCIETY 12615 ROCKFORD RD PLYMOUTH,MN 55441	23-7220654	501C3	6,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(198) UNIVERSITY OF CALIFORNIA SAN DIEGO SCHOOL OF MEDICINE 9500 GILMAN DR MC0606 LA JOLLA,CA 92093	95-6006144	501C3	6,000	0			SUPPORT FOR EQUALITY SCHOLARSHIP AWARD RECIPIENT
(199) UNIVERSITY OF CALIFORNIA SAN FRANCISCO 500 PARNASSUS AVENUE MU-201W SAN FRANCISCO,CA 941430246	94-6036493	501C3	6,000	0			SUPPORT FOR EQUALITY SCHOLARSHIP AWARD RECIPIENT
(200) UNIVERSITY OF OREGON UO CASHIERS OFFICE PO BOX 3237 EUGENE,OR 97403	46-4727800	501C3	6,000	0			SUPPORT FOR EQUALITY SCHOLARSHIP AWARD RECIPIENT
(201) UNIVERSITY OF ROCHESTER OFFICE OF THE BURSAR 330 MELIORA HALL ROCHESTER,NY 146270037	16-0743209	501C3	6,000	0			SUPPORT FOR EQUALITY SCHOLARSHIP AWARD RECIPIENT
(202) WESTERN UNIVERSITY OF HEALTH SCIENCES 309 EAST 2ND STREET POMONA,CA 91766	95-3127273	501C3	6,000	0			SUPPORT FOR EQUALITY SCHOLARSHIP AWARD RECIPIENT
(203) GRACE CATHEDRAL CORPORATION 1100 CALIFORNIA STREET SAN FRANCISCO,CA 94108	94-1156846	501C3	5,940	0			UNRESTRICTED OPERATING SUPPORT GRANT
(204) EQUALITY TEXAS FOUNDATION PO BOX 2340 AUSTIN,TX 78768	74-2569542	501C3	5,750	0			UNRESTRICTED OPERATING SUPPORT GRANT
(205) UNIVERSITY OF CALIFORNIA BERKELEY FOUNDATION OFFICE OF GIFT PLANNING 2080 ADDISON STREET 4200 BERKELEY,CA 94720	94-6090626	501C3	5,750	0			SUPPORT FOR COLLEGE OF CHEMISTRY DEIBJ INITIATIVE
(206) SECOND STAGE THEATRE 1501 BROADWAY SUITE 518 NEW YORK,NY 10036	13-3021180	501C3	5,700	0			UNRESTRICTED OPERATING SUPPORT GRANT
(207) CONGREGATION SHERITH ISRAEL 2266 CALIFORNIA ST SAN FRANCISCO,CA 94115	94-1156522	501C3	5,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(208) NATIONAL CENTER FOR JEWISH FILM BRANDEIS UNIV LOWN BLDG 102 MS 053 WALTHAM,MA 02454	04-2764044	501C3	5,500	0			"THE LONELY CHILD"
(209) STOLEN YOUTH PO BOX 296 SEATTLE,WA 98111	45-4985230	501C3	5,500	0			UNRESTRICTED OPERATING SUPPORT GRANT
(210) CHABAD OF NE PORTLAND 2125 NE 45TH AVE PORTLAND,OR 97213	47-1532709	501C3	5,400	0			RESTRICTED TO A SPECIFIC PURPOSE - ACQUISITION OF NEW BUILDING IN AUGUST 2022
(211) OUR FAMILY COALITION 1385 MISSION ST STE 340 SAN FRANCISCO,CA 94103	94-3261786	501C3	5,250	0			UNRESTRICTED OPERATING SUPPORT GRANT
(212) POSITIVE PEDALERS 584 CASTRO STREET 876 SAN FRANCISCO,CA 94114	46-3163701	501C3	5,250	0			UNRESTRICTED OPERATING SUPPORT GRANT
(213) SOGOREA TE LAND TRUST 2501 HARRISON ST OAKLAND,CA 94612	82-4415931	501C3	5,250	0			UNRESTRICTED OPERATING SUPPORT GRANT
(214) LEAGUE OF AMERICAN ORCHESTRAS 520 8TH AVE STE 2005 NEW YORK,NY 10018	23-7300636	501C3	20,000	0			UNRESTRICTED OPERATING SUPPORT GRANT
(215) FLORENCE CRITTENTON SERVICES OF COLORADO 96 SOUTH ZUNI ST DENVER,CO 80223	84-0429686	501C3	18,500	0			UNRESTRICTED OPERATING SUPPORT GRANT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . ▶ 215

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

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) SCHOLARSHIPS	2	6,000			
(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

Additional Data

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Software ID:

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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
HORIZONS FOUNDATION

Employer identification number
94-2686530

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**		No
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				
1 ROGER DOUGHTY PRESIDENT	(i)	250,050	0	0	20,004	15,609	285,663	0
	(ii)	0	0	0	0	0	0	0
2 JOHN MARVUGLIO CFO	(i)	184,859	0	0	14,789	1,593	201,241	0
	(ii)	0	0	0	0	0	0	0
3 FRANCISCO BUCHTING VP OF GRANTS, PROGRAMS & STRATEGIC I	(i)	168,950	0	0	13,516	12,049	194,515	0
	(ii)	0	0	0	0	0	0	0
4 CANDACE LOPEZ CHIEF PHILANTHROPIC OFFICER	(i)	153,250	0	0	6,350	1,174	160,774	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation

Additional Data

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization
HORIZONS FOUNDATION

Employer identification number
94-2686530

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	28	1,764,446	FAIR MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ( )				
26 Other ▶ ( )				
27 Other ▶ ( )				
28 Other ▶ ( )				

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

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

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

Return Reference	Explanation
PART I, LINE 32B:	THE ORGANIZATION USED A BROKERAGE FIRM TO SELL DONATED SECURITIES.
PART I, LINE 33:	ITEMS DONATED FOR ONLINE AUCTION WERE NOT REPORTED AS DONATIONS, SINCE PROCEEDS FROM THEIR SALE IS REPORTED AS FUNDRAISING EVENT INCOME.

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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
HORIZONS FOUNDATION

Employer identification number
94-2686530

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE BOARD APPROVED A POLICY THAT DELEGATES THE PRE-FILING REVIEW AND APPROVAL TO THE EXECUTIVE COMMITTEE OF THE BOARD. THE EXECUTIVE COMMITTEE MEETS WITH THE CFO AND PRESIDENT TO REVIEW AND APPROVE THE 990 PRIOR TO FILING. AN ELECTRONIC VERSION OF THE 990 IS DISTRIBUTED TO THE FULL BOARD PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C	BOARD MEMBERS AND STAFF ARE REQUIRED TO SIGN AN ANNUAL AFFIRMATION AND DISCLOSURE STATEMENT.
FORM 990, PART VI, SECTION B, LINE 15	BOARD CHAIR REVIEWS PRESIDENT AND CFO COMPENSATION, CONSIDERING COMPENSATION ANALYSIS AS WELL AS PERFORMANCE IN THE PROCESS. THE BOARD DISCUSSES AND APPROVES PRESIDENT AND CFO COMPENSATION IN EXECUTIVE SESSION. SALARY ADJUSTMENTS ARE SUBMITTED IN WRITING BY THE CHAIR.
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.
990, PART XII, LINE 2C	THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

Additional Data

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