

Return of Organization Exempt From Income Tax

Department of the Treasury
Internal Revenue Service

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.

2022
Open to Public Inspection

A For the **2022** calendar year, or tax year beginning **APR 1, 2022** and ending **MAR 31, 2023**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization CALIFORNIA HEALTHCARE FOUNDATION Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1438 WEBSTER ST 400 City or town, state or province, country, and ZIP or foreign postal code OAKLAND, CA 94612 F Name and address of principal officer: TIE KIM SAME AS C ABOVE	D Employer identification number 95-4523231 E Telephone number 510-238-1040 G Gross receipts \$ 162,834,755. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (4) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: WWW.CHCF.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1995
		M State of legal domicile: CA

Part I Summary

	1	Briefly describe the organization's mission or most significant activities: TO SUPPORT MEANINGFUL, MEASURABLE IMPROVEMENTS IN HEALTH CARE FOR ALL CALIFORNIANS.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)	3	11
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	10
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	69
	6	Total number of volunteers (estimate if necessary)	6	1
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	3,725,550.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	3,304,718.
	Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year
9		Program service revenue (Part VIII, line 2g)	533,971.	556,420.
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	75,626,019.	16,294,820.
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	565,418.	792,411.
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	76,725,408.	17,643,651.
13		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	38,605,606.	41,648,168.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	14,458,266.	16,320,690.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25)	0.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	10,732,399.	6,619,384.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	63,796,271.	64,588,242.
	19	Revenue less expenses. Subtract line 18 from line 12	12,929,137.	-46,944,591.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	962,705,535.
	21	Total liabilities (Part X, line 26)	8,821,641.	7,472,051.
	22	Net assets or fund balances. Subtract line 21 from line 20	953,883,894.	826,454,615.

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 TIE KIM, VP FIN, ADMIN, INVESTS/TREAS & SEC	Date
	Type or print name and title	
Paid Preparer Use Only	Print/Type preparer's name MAGA E. KISRIV	Preparer's signature
	Firm's name HOOD & STRONG LLP	Date
	Firm's address 60 SO. MARKET ST, STE 200 SAN JOSE, CA 95113	Check if self-employed <input type="checkbox"/> PTIN P01008919
		Firm's EIN 94-1254756
		Phone no. 408.998.8400

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 [X]

1 Briefly describe the organization's mission:
CHCF IS DEDICATED TO ADVANCING MEANINGFUL, MEASURABLE IMPROVEMENTS IN THE WAY THE HEALTH CARE DELIVERY SYSTEM PROVIDES CARE TO THE PEOPLE OF CALIFORNIA, PARTICULARLY THOSE WITH LOW INCOMES AND THOSE WHOSE NEEDS ARE NOT WELL SERVED BY THE STATUS QUO.

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 [X] 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 [X] 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 \$ 17,074,928. including grants of \$ 14,750,200.) (Revenue \$ 0.)
ADVANCING PEOPLE-CENTERED CARE: CHCF SUPPORTS CARE SYSTEMS TO WORK COLLABORATIVELY TO ENSURE PEOPLE RECEIVE RESPONSIVE, COMPREHENSIVE, AND COORDINATED SERVICES THAT SUPPORT THEIR HEALTH AND WELL-BEING AND REDUCE INEQUITIES IN CARE. THIS WORK INCLUDES: 1) BEHAVIORAL HEALTH TRANSFORMATION: CHCF AIMS TO TRANSFORM MENTAL HEALTH AND SUBSTANCE USE TREATMENT SO THAT WHEREVER AND HOWEVER THE CARE IS DELIVERED, IT IS EFFECTIVE, APPROPRIATE, AND ACCESSIBLE IMPROVING OUTCOMES AND REDUCING INEQUITIES. 2) CARE FOR PEOPLE WITH COMPLEX NEEDS: CHCF AIMS TO HELP MEDI-CAL ENROLLEES WITH CHALLENGING HEALTH OR SOCIAL CIRCUMSTANCES GET HIGH-QUALITY MEDICAL CARE AND SUPPORTIVE SERVICES THAT IMPROVE THEIR LIVES. 3) ADVANCING BLACK HEALTH EQUITY: CHCF AIMS TO IMPROVE CARE AND OUTCOMES FOR BLACK CALIFORNIANS BY WORKING WITH HEALTH CARE PARTNERS TO

4b (Code:) (Expenses \$ 16,567,297. including grants of \$ 14,671,468.) (Revenue \$ 0.)
IMPROVING ACCESS: CHCF AIMS TO ADVANCE STATE POLICY REFORMS AND DELIVERY SYSTEM TRANSFORMATION TO IMPROVE COVERAGE AND CARE. THIS WORK INCLUDES: 1) ACCESS TO AFFORDABLE COVERAGE: CHCF AIMS TO ADVANCE STATE POLICIES AND PRACTICES THAT ENSURE THAT ALL CALIFORNIANS WITH LOW INCOMES HAVE AFFORDABLE COVERAGE AND THAT MEDI-CAL ENROLLEES CAN GET THE CARE THEY NEED WHEN THEY NEED IT. 2) ACCESS TO PRIMARY CARE: CHCF AIMS TO ADVANCE POLICY, PAYMENT, AND DELIVERY SYSTEM REFORMS TO IMPROVE ACCESS BY CALIFORNIANS WITH LOW INCOMES TO HIGH-QUALITY, LINGUISTICALLY AND CULTURALLY RESPONSIVE PRIMARY CARE INCLUSIVE OF BEHAVIORAL HEALTH CARE. 3) ACCESS TO SPECIALTY CARE: CHCF AIMS TO SPREAD THE USE OF TELEHEALTH IN CALIFORNIA'S SAFETY NET AND TO SPUR MEDI-CAL POLICY AND PAYMENT REFORMS TO IMPROVE ACCESS TO SPECIALTY CARE FOR CALIFORNIANS

4c (Code:) (Expenses \$ 13,506,206. including grants of \$ 10,726,500.) (Revenue \$ 0.)
LAYING THE FOUNDATION: CHCF AIMS TO BUILD A STRONG FOUNDATION FOR DELIVERING MEANINGFUL CHANGE IN CALIFORNIA'S HEALTH CARE SYSTEM BY PROVIDING TIMELY RESEARCH, SUPPORTING HEALTH CARE JOURNALISM, TRAINING LEADERS, AND DEVELOPING CROSS-SECTOR NETWORKS. THIS WORK INCLUDES: 1) MARKET ANALYSIS AND INSIGHT: CHCF AIMS TO PROVIDE RESEARCH AND ANALYSIS ON CALIFORNIA'S MARKET-WIDE CARE ECOSYSTEM, WITH A PARTICULAR FOCUS ON HOW THAT SYSTEM IS STRUCTURED AND PERFORMING FOR CALIFORNIANS WITH LOW INCOMES. 2) SUPPORTING HIGH-QUALITY HEALTH JOURNALISM: CHCF SUPPORTS HEALTH CARE JOURNALISM SO THAT MAINSTREAM AND COMMUNITY/ETHNIC MEDIA OUTLETS CAN PROVIDE CALIFORNIANS WITH ACCESS TO TIMELY, RELEVANT INFORMATION ABOUT THE MOST PRESSING HEALTH CARE ISSUES. 3) BUILDING LEADERSHIP: CHCF AIMS TO SUPPORT LEADERSHIP AND SKILL-BUILDING FOR

4d Other program services (Describe on Schedule O.)
(Expenses \$ 9,073,894. including grants of \$ 1,500,000.) (Revenue \$ 556,420.)

4e Total program service expenses 56,222,325.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 21, with sub-questions a-f for questions 11 and 14. 'X' marks are present in the Yes/No columns for various questions.

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? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
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? <i>If "Yes," complete Schedule J</i>	X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part II</i>		X
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? <i>If "Yes," complete Schedule L, Part III</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
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? <i>If "Yes," complete Schedule R, Part I</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	X	

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

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

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b 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; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 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?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
TIE KIM - 510-238-1040
1438 WEBSTER ST., STE 400, OAKLAND, CA 94612

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) HERNANDEZ, SANDRA PRESIDENT & C.E.O	45.00	X		X				701,867.	0.	105,353.
(2) ZIEGLER, CRAIG VP FIN-ADM-INV/SEC&TRS(TILL 5/16/22)	45.00			X				505,210.	0.	59,818.
(3) CARTER, KARA SR VP PGRMS & SEC.(SEC. EFF 5/16/22)	45.00			X				423,157.	0.	75,158.
(4) BUCKLEY, MELISSA PROGRAM DIRECTOR OF INNOVATIONS	45.00					X		307,411.	0.	102,790.
(5) PERRONE, CHRISTOPHER PROGRAM DIRECTOR OF IMPROVING ACCESS	45.00					X		296,795.	0.	73,437.
(6) SCHNEIDERMAN, MICHELLE PRG DIR-ADVANCING PEOPLE CNTR'D CARE	45.00					X		302,901.	0.	60,037.
(7) SHEWRY, SANDRA VP OF EXTERNAL ENGAGEMENT	45.00					X		315,543.	0.	37,474.
(8) READER, CHARLES CHIEF TALENT OFFICER	45.00					X		290,059.	0.	46,079.
(9) KIM, TIE VP FIN-ADM-INV/TREAS (EFF. 5/16/22)	45.00			X				257,713.	0.	63,687.
(10) REYES, CAROLYN BOARD MEMBER	3.00	X						39,000.	0.	0.
(11) JONES, MARC E. BOARD MEMBER (TERM ENDED FY 22-23)	3.00	X						32,000.	0.	0.
(12) AUGUSTINOS, NICHOLAS BOARD MEMBER	3.00	X						31,000.	0.	0.
(13) AGUILAR-GAXIOLA, SERGIO A. BOARD MEMBER	3.00	X						30,000.	0.	0.
(14) CARLISLE, DAVID MURRAY BOARD MEMBER	3.00	X						29,000.	0.	0.
(15) O'KEEFE, LYNNE CHOU BOARD MEMBER	3.00	X						29,000.	0.	0.
(16) ESCOBAR, ZOILA DALIA BOARD MEMBER	3.00	X						26,000.	0.	0.
(17) LARET, MARK BOARD MEMBER	3.00	X						23,250.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) GROSS, DANIEL L. BOARD MEMBER (TERM ENDED FY 22-23)	3.00	X						10,750.	0.	0.
(19) GIBBONEY, ELIZABETH BOARD MEMBER	3.00	X						0.	0.	0.
(20) LINDSAY, MELVIN BOARD MEMBER (TERM STARTED FY 22-23)	3.00	X						0.	0.	0.
(21) NGUYEN, LOUIE BOARD MEMBER (TERM STARTED FY 22-23)	3.00	X						0.	0.	0.
1b Subtotal								3,650,656.	0.	623,833.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								3,650,656.	0.	623,833.

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 53

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
MAKENA CAPITAL MANAGEMENT, 2755 SAND HILL RD, SUITE 200, MENLO PARK, CA 94025	INVESTMENT MANAGEMENT	4,059,972.
L FISHER ASSOCIATES LLC, 427 BEACON RIDGE BLVD, CHAPEL HILL, NC 27516	RECRUITING SERVICES	170,536.
FORUM ONE COMMUNICATIONS CORP., 6140 S. GUN CLUB RD. K6 153, AURORA, CO 80016	WEBSITE HOSTING AND MAINTENANCE	112,065.

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 3

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f					
	g Noncash contributions included in lines 1a-1f	1g \$					
	h Total. Add lines 1a-1f						
Program Service Revenue	2 a PRI INTEREST INCOME	Business Code					
		900003	556,420.	556,420.			
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
g Total. Add lines 2a-2f			556,420.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		-67,182.		1,107,776.	-1,174,958.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		7,254.			7,254.	
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
				2,398,853.			
	b Less: rental expenses ...	6b		1,613,696.			
	c Rental income or (loss)	6c		785,157.			
	d Net rental income or (loss)			785,157.		785,157.	
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
				57,321,635.	2,617,775.		
	b Less: cost or other basis and sales expenses	7b		43,577,408.	0.		
	c Gain or (loss)	7c		13,744,227.	2,617,775.		
	d Net gain or (loss)			16,362,002.		2,617,774.	13,744,228.
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
	b Less: direct expenses	8b					
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
	b Less: direct expenses	9b					
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a _____	Business Code					
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			17,643,651.	556,420.	3,725,550.	13,361,681.	

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 ...	39,094,141.	39,094,141.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	2,554,027.	2,554,027.		
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	2,223,759.	695,329.	1,528,430.	
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	10,390,944.	8,676,586.	1,714,358.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,469,244.	1,222,248.	246,996.	
9 Other employee benefits	1,487,303.	1,136,024.	351,279.	
10 Payroll taxes	749,440.	593,011.	156,429.	
11 Fees for services (nonemployees):				
a Management				
b Legal	72,057.	40,343.	31,714.	
c Accounting	89,676.		89,676.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	3,276,292.		3,276,292.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	937,766.	508,145.	429,621.	
12 Advertising and promotion				
13 Office expenses	175,308.	142,002.	33,306.	
14 Information technology	304,002.	245,793.	58,209.	
15 Royalties				
16 Occupancy	128,093.	107,849.	20,244.	
17 Travel	397,548.	223,393.	174,155.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	70,373.	56,861.	13,512.	
23 Insurance	119,536.	95,895.	23,641.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a DIRECT CHARITABLE (PRC)	430,652.	430,652.	0.	
b STAFF PROF DEVELOPMENT	227,330.	73,697.	153,633.	
c PRI INTEREST DISCOUNT &	148,039.	148,039.	0.	
d UBI TAX	35,518.	0.	35,518.	
e All other expenses _____	207,194.	178,290.	28,904.	
25 Total functional expenses. Add lines 1 through 24e	64,588,242.	56,222,325.	8,365,917.	0.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,362,420.	1	101,185.
	2 Savings and temporary cash investments	7,716,448.	2	6,797,872.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	285,709.	4	348,049.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	509,973.	9	580,884.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 50,055,527.		
	b Less: accumulated depreciation	10b 1,250,064.	48,982,495.	10c 48,805,463.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	893,434,986.	12	765,062,076.
	13 Investments - program-related. See Part IV, line 11	9,173,984.	13	10,971,282.
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1,239,520.	15	1,259,855.
16 Total assets. Add lines 1 through 15 (must equal line 33)	962,705,535.	16	833,926,666.	
Liabilities	17 Accounts payable and accrued expenses	2,218,053.	17	3,002,537.
	18 Grants payable	6,603,588.	18	3,972,782.
	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	0.	25	496,732.
	26 Total liabilities. Add lines 17 through 25	8,821,641.	26	7,472,051.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	953,883,894.	27	826,454,615.
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	953,883,894.	32	826,454,615.
33 Total liabilities and net assets/fund balances	962,705,535.	33	833,926,666.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	17,643,651.
2	Total expenses (must equal Part IX, column (A), line 25)	2	64,588,242.
3	Revenue less expenses. Subtract line 2 from line 1	3	-46,944,591.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	953,883,894.
5	Net unrealized gains (losses) on investments	5	-80,648,722.
6	Donated services and use of facilities	6	-9,256.
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	173,290.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	826,454,615.

Part XII Financial Statements and Reporting

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

- 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?
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?
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?
If the organization changed either its oversight process or selection process during the tax year, explain on 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?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form **990** (2022)

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: CALIFORNIA HEALTHCARE FOUNDATION; Employer identification number: 95-4523231

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two Yes/No questions regarding donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose(s) of conservation easements, a table for lines 2a-2d (Total number, acreage, certified historic structures, acquired after 2006), and questions about monitoring, expenses, and reporting requirements.

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures, and a table for revenue and assets included in Form 990.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2022

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

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

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

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

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

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	4,760,000.			4,760,000.
b Buildings	42,385,545.			42,385,545.
c Leasehold improvements	1,514,455.	56,789.	42,513.	1,528,731.
d Equipment		118,496.	76,232.	42,264.
e Other		1,220,242.	1,131,319.	88,923.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				48,805,463.

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) PRIVATE EQUITY AND VENTURE CAPITAL	46,214,994.	END-OF-YEAR MARKET VALUE
(B) MULTI-ASSET CLASS COMMINGLED FUNDS	589,928,015.	END-OF-YEAR MARKET VALUE
(C) FIXED INCOME COMMINGLED GLOBAL FUND	128,156,833.	END-OF-YEAR MARKET VALUE
(D) GLOBAL EQUITY POOLED FUNDS	75,591.	END-OF-YEAR MARKET VALUE
(E) ABSOLUTE RETURN FUNDS	686,643.	END-OF-YEAR MARKET VALUE
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	765,062,076.	

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. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
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	
(2) OPERATING LEASE LIABILITIES	496,732.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	496,732.

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

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.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and a shaded area for calculations.

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.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and a shaded area for calculations.

Part XIII Supplemental Information.

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

PART X, LINE 2:

WHILE THE FOUNDATION IS GENERALLY EXEMPT FROM INCOME TAXES, IT IS SUBJECT

TO TAX ON INCOME WHICH IS DEEMED TO BE UNRELATED TO ITS EXEMPT PURPOSE.

THE FOUNDATION GENERATES SUCH UNRELATED BUSINESS INCOME THROUGH SOME OF

ITS INVESTMENT ACTIVITY.

MANAGEMENT EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE

FOUNDATION HAS MAINTAINED ITS TAX-EXEMPT STATUS AND HAD TAKEN NO UNCERTAIN

TAX POSITIONS THAT REQUIRE ADJUSTMENTS TO THE FINANCIAL STATEMENTS.

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

**SCHEDULE 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 **CALIFORNIA HEALTHCARE FOUNDATION** Employer identification number **95-4523231**

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ASSOCIATION OF BLACK FOUNDATION EXECUTIVES - 55 EXCHANGE PLACE, SUITE 401 - NEW YORK, NY 10005	23-7156531	501(C)(3)	20,000.	0.			JANUARY 2023-DECEMBER 2024 MEMBERSHIP
ABT ASSOCIATES INC. 6130 EXECUTIVE BLVD. ROCKVILLE, MD 20852	04-2347643		199,660.	0.			EVALUATION OF PROJECT ROOMKEY
ACADEMYHEALTH 1666 K STREET NW, SUITE 1100 WASHINGTON, DC 20006	52-1260918	501(C)(3)	10,000.	0.			ANNUAL MEETING, 2022; JANUARY 2023-DECEMBER 2024 MEMBERSHIP
ACUMEN AMERICA LLC 40 WORTH STREET, SUITE 303 NEW YORK, NY 10013	92-1001569	501(C)(3)	10,000.	0.			SPONSORSHIP FOR MEDICAID INNOVATION COLLABORATIVE (MIC) AT VIVE 2023
AKIDO LABS INC. 8605 SANTA MONICA BLVD. PMB 17538 WEST HOLLYWOOD, CA 90069	46-5238441		60,000.	0.			PARTNERSHIPS FOR ACTION PILOT
ALAMEDA HEALTH SYSTEM FOUNDATION 350 FRANK H OGAWA PLAZA, SUITE 900 OAKLAND, CA 94612	94-3103136	501(C)(3)	215,000.	0.			CONNECTED CARE ACCELERATOR DATA COLLECTING EXTENSION; CONNECTED CARE

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 250.

3 Enter total number of other organizations listed in the line 1 table 69.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) 2022

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALAMEDA POINT COLLABORATIVE 677 WEST RANGER AVENUE ALAMEDA, CA 94501	94-3361464	501(C)(3)	100,000.	0.			ADVANCING THE CAPITAL CAMPAIGN FOR ALAMEDA POINT COLLABORATIVE'S MEDICAL RESPITE PROGRAM
COUNTY OF ALAMEDA 1000 SAN LEANDRO BLVD, STE 300 SAN LEANDRO, CA 94577	94-6000501	COUNTY OF ALAMED	220,000.	0.			ALAMEDA COUNTY COMMUNITY HEALTH WORKER INITIATIVE
ALLIANCE FOR HEALTH POLICY 1225 19TH ST NW, STE 710 WASHINGTON, DC 20036	52-1746328	501(C)(3)	10,000.	0.			2023 UC IRVINE HEALTH CARE FORECAST CONFERENCE PLANNING SUPPORT
ALLIANCE MEDICAL CENTER 1381 UNIVERSITY STREET HEALDSBURG, CA 95448	94-2308748	501(C)(3)	50,000.	0.			OPTOMETRY EQUIPMENT FOR ALLIANCE MEDICAL CENTER-CLINICA ALIANZA'S EYE CLINIC
ALL-INCLUSIVE COMMUNITY HEALTH CENTER - 1311 N. SAN FERNANDO BLVD. - BURBANK, CA 91504	27-4198722	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
AMERICAS PHYSICIAN GROUPS 555 W. 5TH STREET, FLOOR 35 LOS ANGELES, CA 90013	47-0878940	501(C)(6)	10,000.	0.			SAFETY NET SCHOLARSHIPS FOR 2023 APG CONFERENCE
AMERICAN INSTITUTES FOR RESEARCH 1400 CRYSTAL DRIVE, 10TH FLOOR ARLINGTON, VA 22202	25-0965219	501(C)(3)	126,300.	0.			EVALUATION OF THE ADVANCING BEHAVIORAL HEALTH INTEGRATION AND EQUITY IN PRIMARY CARE
ARCATA HOUSE PARTNERSHIP 1005 11TH STREET ARCATA, CA 95521	94-3163269	501(C)(3)	36,000.	0.			CIN PARTNER STIPEND - PHASE 8
ASIAN HEALTH SERVICES 101 8TH STREET, STE. 100 OAKLAND, CA 94607	94-2235908	501(C)(3)	165,000.	0.			SUPPORT FOR THE CA AANHPI HEALTH EQUITY CONVENINGS; 2022 ANNUAL GALA; CONNECTED CARE

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASIAN AMERICANS/PACIFIC ISLANDERS IN PHILANTHROPY - 300 FRANK OGAWA PLAZA, SUITE 256 - OAKLAND, CA 94612	94-3150064	501(C)(3)	10,000.	0.			JANUARY 2023-DECEMBER 2024 MEMBERSHIP
ASIAN PACIFIC FUND 345 CALIFORNIA STREET, SUITE 700 SAN FRANCISCO, CA 94104	94-3201522	501(C)(3)	150,000.	0.			SUPPORT FOR THE RESILIENCY & RECOVERY FUND
THE ASPEN INSTITUTE, INC. 2300 N STREET, NW, SUITE 700 WASHINGTON, DC 20037	84-0399006	501(C)(3)	325,000.	0.			ANNUAL ASPEN IDEAS FESTIVAL: HEALTH, 2023; LATINOS AND SOCIETY ADVANCING ECONOMIC
A THOUSAND JOYS, INC. 1270 S. ALFRED STREET, #351839 LOS ANGELES, CA 90035	20-5204911	501(C)(3)	10,000.	0.			INNOVATION FUND ADVISORY COMMITTEE GRANT, TO SUPPORT ITS WORK TO MAKE LEARNING AND WORKING
ATI ADVISORY 3505 ALBEMARLE STREET NW WASHINGTON, DC 20008	46-5466993		33,670.	0.			SUPPORTING INDEPENDENT LIVING THROUGH COMMUNITY SUPPORTS
ATLAS CLARITY, LLC 32 6TH AVENUE SAN FRANCISCO, CA 94118	85-2589812		41,113.	0.			WESTSIDE CLUBHOUSE PILOT: FINANCIAL SUSTAINABILITY AND RESEARCH PLANNING
AVALERE HEALTH LLC 1201 NEW YORK AVE. NW, SUITE 1000 WASHINGTON, DC 20005	26-2471868		80,000.	0.			CROSS-MARKET ANALYSIS OF HEDIS MEASURES IN CALIFORNIA, 2018-21
AVIA HEALTH, LLC 515 N. STATE STREET, SUITE 300 CHICAGO, IL 60654	85-2640160		85,000.	0.			SERIES OF FOUR TECHNOLOGY LANDSCAPES LEVERAGING AVIA'S MEDICAID TRANSFORMATION PROJECT
AXIS COMMUNITY HEALTH 5925 WEST LAS POSITAS BLVD, SUITE 1 PLEASANTON, CA 94588	94-2232394	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AYUDANDO LATINOS A SONAR 636 PURISSIMA STREET HALF MOON BAY, CA 94019	46-2464722	501(C)(3)	10,000.	0.			GENERAL SUPPORT
BAILIT HEALTH PURCHASING, LLC 56 PICKERING STREET NEEDHAM, MA 02492	04-3340991		20,179.	0.			PUBLISHING PRIMARY CARE SPENDING IN CALIFORNIA'S COMMERCIAL MARKET; ISSUE BRIEF: COST AND
BAY AREA COUNCIL FOUNDATION PO BOX 4135 BERKELEY, CA 94705	20-1826827	501(C)(3)	13,750.	0.			MARCH 2023 - FEBRUARY 2024 MEMBERSHIP
BLACK DOC VILLAGE, INC. 5601 LEONA ST. OAKLAND, CA 94605	88-2152053	501(C)(3)	30,000.	0.			GENERAL OPERATING SUPPORT
BLACK MAMAS MATTER ALLIANCE, INC 1237 RALPH DAVID ABERNATHY BLVD ATLANTA, GA 30310	85-1274248	501(C)(3)	15,000.	0.			BLACK MAMAS MATTER ALLIANCES 2023 BLACK MATERNAL HEALTH WEEK SPONSORSHIP
BLUEPATH HEALTH, INC. 80 E SIR FRANCIS DRAKE BLVD, SUITE LARKSPUR, CA 94939	46-3484135		230,165.	0.			SUPPORTING CALIFORNIA'S TELEHEALTH COALITIONS 2022; SUPPORTING CALIFORNIA'S TELEHEALTH
BLUE SKY CONSULTING GROUP LLC 1999 HARRISON STREET, SUITE 1800 OAKLAND, CA 94612	59-3810591		50,000.	0.			MEDI-CAL FACTS AND FIGURES UPDATE 2023
BRANDEIS UNIVERSITY 415 SOUTH ST. WALTHAM, MA 02453	04-2103552	501(C)(3)	10,000.	0.			ANNUAL CONFERENCE, 2022
THE BRIDGESPAN GROUP 2 COPLEY PLACE, SUITE 3700B BOSTON, MA 02116	31-1625487	501(C)(3)	50,000.	0.			FIELD BUILDING INITIATIVE FOR EQUITABLE SYSTEMS CHANGE

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRIGHT RESEARCH GROUP 1211 PRESERVATION PARK WAY OAKLAND, CA 94612	27-3532904		60,000.	0.			EVALUATION OF THE CHW AND PROMOTOR WORKFORCE CAPACITY BUILDING COLLABORATIVES
CALIFORNIA BUDGET & POLICY CENTER 1107 9TH STREET, SUITE 310 SACRAMENTO, CA 95814	68-0346784	501(C)(3)	10,000.	0.			SUPPORT CALIFORNIA BUDGET AND POLICY CENTER'S 2023 POLICY INSIGHTS CONFERENCE
CALIFORNIANS FOR THE ADVANCEMENT OF MIDWIFERY - P.O. BOX 104 - SAN LEANDRO, CA 94577	77-0131956	501(C)(3)	27,000.	0.			PLANNING FOR A COMMUNITY MATERNITY CARE TRACK OFFERING AT CALIFORNIA COMMUNITY COLLEGES
CALIFORNIA BLACK MEDIA 1809 S ST. 101-226 SACRAMENTO, CA 95811	46-2808252	501(C)(3)	180,000.	0.			BLACK MENTAL HEALTH IN CALIFORNIA REPORTING PROJECT
CALIFORNIA PRIMARY CARE ASSOCIATION - 1231 I STREET, SUITE 400 - SACRAMENTO, CA 95814	94-3215565	501(C)(3)	525,000.	0.			ANNUAL CONFERENCE, 2022; CONTINUED SUPPORT FOR THE DESIGN OF APM 2.0 AND CURRICULUM DEVELOPMENT;
CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY - 1610 ARDEN WAY, SUITE 175 - SACRAMENTO, CA 95815	27-0707523	CMHS	14,625.	0.			CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY (CALMHS) INTEROPERABILITY PLANNING
CALIFORNIA ASSOCIATION OF PUBLIC HOSPITALS AND HEALTH SYSTEMS - 70 WASHINGTON STREET, SUITE 215 - OAKLAND, CA 94607	94-2932254	501(C)(6)	358,000.	0.			GENERAL SUPPORT; CAPTURING STORIES FROM PUBLIC HOSPITALS DURING COVID-19
CALIFORNIA BREASTFEEDING COALITION 510 BEAUMONT AVE. PACIFIC GROVE, CA 93950	45-2688965	501(C)(3)	25,000.	0.			EDUCATION CAMPAIGN ON INFORMAL MILK SHARING DURING EMERGENCIES; 2023 CALIFORNIA BREASTFEEDING
CALIFORNIA ASSOCIATION FOR NURSE PRACTITIONERS - 1415 L STREET, SUITE 1000 - SACRAMENTO, CA 95814	94-2599089	501(C)(6)	197,000.	0.			CALIFORNIA ASSOCIATION FOR NURSE PRACTITIONERS CONFERENCE, 2023; ADVANCING THE ROLE OF THE

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA ASSOCIATION OF AREA AGENCIES ON AGING - 968 SUNNYHILLS ROAD - OAKLAND, CA 94610	95-3403557	501(C)(3)	10,000.	0.			ANNUAL CONFERENCE, 2023
CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY - 1215 O STREET, MS 08 - SACRAMENTO, CA 95814	68-0281366	CMHS	30,000.	0.			CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY (CHHSA) DATA EXPO, 2023
CALMATTERS 1017 L STREET, #261 SACRAMENTO, CA 95814	47-2474086	501(C)(3)	208,000.	0.			CORE SUPPORT FOR HEALTH REPORTING; BEHAVIORAL HEALTH COVERAGE IN CALIFORNIA
CALIFORNIA COALITION FOR YOUTH 1321 HOWE AVE, SUITE 210 SACRAMENTO, CA 95825	94-2607710	501(C)(3)	15,000.	0.			SUPPORT FOR YOUTH EMPOWERMENT SUMMIT (YES)
CALIFORNIA COLLABORATIVE FOR IMMIGRANT JUSTICE - 1999 HARRISON STREET, SUITE 1800 - OAKLAND, CA 94612	85-2856613	501(C)(3)	50,000.	0.			VACCINE EDUCATION AND EMPOWERMENT IN DETENTION PROGRAM
CALIFORNIA COLLABORATIVE FOR LONG TERM SERVICES AND SUPPORTS - 1035 MARKET ST, L-1 - SAN FRANCISCO, CA 94103	87-1439855	501(C)(3)	50,000.	0.			ADDRESSING CHALLENGES AND SHARING BEST PRACTICES FOR LONG-TERM SERVICES AND SUPPORTS PROVIDERS
CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES - 1501 CAPITOL AVENUE - SACRAMENTO, CA 95814	68-0317191	CDOHCS	467,772.	0.			CALIFORNIA HIT LANDSCAPE ASSESSMENT; CALIFORNIA HEALTH INFORMATION TECHNOLOGY (HIT)
THE CALIFORNIA HEALTH CARE SAFETY-NET INSTITUTE - 70 WASHINGTON STREET, SUITE 215 - OAKLAND, CA 94607	94-2970752	501(C)(3)	257,522.	0.			CALIFORNIA ASSOCIATION OF PUBLIC HOSPITALS/THE SAFETY NET INSTITUTE ANNUAL CONFERENCE, 2022;
CALIFORNIA IMMIGRANT POLICY CENTER 634 S. SPRING STREET, SUITE 600A LOS ANGELES, CA 90014	81-5304541	501(C)(3)	71,510.	0.			MEDI-CAL EXPANSION IMPLEMENTATION PLANNING GRANT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA HEALTH FOUNDATION AND TRUST - 1215 K STREET, SUITE 800 - SACRAMENTO, CA 95814	94-1498697	501(C)(3)	25,000.	0.			CHERISHED FUTURES: SUPPORTING BIRTH EQUITY IN LA COUNTY VIA HOSPITAL QUALITY IMPROVEMENT AND
CALIFORNIA INSTITUTE FOR BEHAVIORAL HEALTH SOLUTIONS - 1760 CREEKSIDE OAKS DRIVE, STE. 175 - SACRAMENTO, CA 95833	68-0314970	501(C)(3)	1,715,000.	0.			EQUITY & ENGAGEMENT IN SPECIALTY BEHAVIORAL TELEHEALTH; STIPENDS FOR PARTICIPANT CLINICS &
CALIFORNIA NURSE-MIDWIVES FOUNDATION - 60 29TH STREET, SUITE 321 - SAN FRANCISCO, CA 94110	84-3622602	501(C)(3)	50,000.	0.			SUPPORTING PARTICIPATION IN THE INSTITUTE FOR MEDICAID INNOVATION'S NATIONAL MIDWIFERY
CALIFORNIA PAN-ETHNIC HEALTH NETWORK - 1221 PRESERVATION PARK WAY, STE. 200 - OAKLAND, CA 94612	94-3306223	501(C)(3)	714,022.	0.			CPEHN 30TH ANNIVERSARY VOICE FOR CHANGE CONFERENCE SPONSORSHIP; ADVANCING MENTAL HEALTH
CALIFORNIA SCHOOL-BASED HEALTH ALLIANCE - 1203 PRESERVATION PARK WAY, SUITE 302 - OAKLAND, CA 94612	94-3201896	501(C)(3)	15,000.	0.			GUIDANCE FOR HEALTH CARE PROVIDERS ON SCHOOL-BASED HEALTH CENTERS
CAL STATE FULLERTON PHILANTHROPIC FOUNDATION - 2600 NUTWOOD AVENUE, SUITE 850 - FULLERTON, CA 92831	33-0567945	501(C)(3)	250,000.	0.			CA NURSE-MIDWIFERY DIVERSIFICATION FUND
CALIFORNIA TELEHEALTH NETWORK P.O. BOX 5426 PORTLAND, OR 97228-5426	27-3045436	501(C)(3)	26,886.	0.			CALIFORNIA TELEHEALTH SUMMIT, 2022; REMOTE PATIENT MONITORING CONVENING
CAMDEN COALITION OF HEALTHCARE PROVIDERS - 800 COOPER STREET, 7TH FLOOR - CAMDEN, NJ 08102	32-0332843	501(C)(3)	71,468.	0.			PUTTING CARE AT THE CENTER 2022 CONFERENCE SPONSORSHIP (AND PRE-CONFERENCE
CANDID 32 OLD SLIP NEW YORK, NY 10005	13-1837418	501(C)(3)	20,000.	0.			JANUARY-DECEMBER 2023

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAPITOL ADVOCACY, LLC 1301 I STREET SACRAMENTO, CA 95814	94-3384043		11,000.	0.			UNDERSTANDING THE BUREAU OF REGISTERED NURSING AND NURSE PRACTITIONER LANDSCAPE
CAPITAL & MAIN 1910 W. SUNSET BLVD, SUITE 740 LOS ANGELES, CA 90026	81-0895767	501(C)(3)	72,788.	0.			REPORTING PROJECT ON FARMWORKER HEALTH ACCESS (PLANNING GRANT); FARMWORKER HEALTH ACCESS
CARDEA HEALTH 1850 MOUNTAIN BLVD. OAKLAND, CA 94611	87-0906271	501(C)(3)	60,000.	0.			PARTNERSHIPS FOR ACTION PILOT
CENTRAL AMERICAN RESOURCE CENTER - CARECEN - OF CALIFORNIA - 2845 W. 7TH STREET - LOS ANGELES, CA 90005	95-3867724	501(C)(3)	7,500.	0.			IMMIGRATION LEGAL SERVICES
CENTRAL AMERICAN RESOURCE CENTER-CARECEN OF NO. CA. - 3101 MISSION ST, STE 101 - SAN FRANCISCO, CA 94110	94-3036508	501(C)(3)	10,000.	0.			GENERAL SUPPORT
CATALYST FOR PAYMENT REFORM INC. 1344 OXFORD ST. BERKELEY, CA 94709	26-3912650	501(C)(3)	30,000.	0.			COLLABORATIVE TO ADVANCE EQUITY PRINCIPLES THROUGH BENEFIT DESIGN
CATALYST OF SAN DIEGO & IMPERIAL COUNTIES - 5060 SHOREHAM PLACE, SUITE 350 - SAN DIEGO, CA 92122	33-0868261	501(C)(3)	30,000.	0.			JANUARY 2023-DECEMBER 2024 MEMBERSHIP
CCF COMMUNITY INITIATIVES FUND 717 W. TEMPLE STREET LOS ANGELES, CA 90012	95-4774698	501(C)(3)	300,000.	0.			AFRICAN AMERICAN INFANT AND MATERNAL MORTALITY PREVENTION INITIATIVE (AAIMM) VILLAGE FUND
THE CENTER FOR COMMON CONCERNS, INC. - 870 MARKET STREET, SUITE 1228 - SAN FRANCISCO, CA 94102	94-3148303	501(C)(3)	160,680.	0.			HOMEBASE ENHANCING USE OF MEDI-CAL FUNDING TO SUPPORT CROSS-SECTOR COLLABORATION; HOMELESS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR GENDER & REFUGEE STUDIES CALIFORNIA, INC. - 200 MCALLISTER ST. - SAN FRANCISCO, CA 94102	47-2970078	501(C)(3)	175,000.	0.			GENERAL SUPPORT OF IMMIGRANT HEALTH AND LEGAL PARTNERSHIPS (IMMHELP)
CENTER FOR EFFECTIVE PHILANTHROPY INC. - 675 MASSACHUSETTS AVE, 7TH FLOOR - CAMBRIDGE, MA 02139	04-3523528	501(C)(3)	15,000.	0.			2023 ANNUAL SUPPORT
CENTER FOR EXCELLENCE IN HEALTH CARE JOURNALISM - 10 NEFF HALL - COLUMBIA, MO 65211	41-1908032	501(C)(3)	40,000.	0.			ASSOCIATION OF HEALTH CARE JOURNALISTS CONFERENCE SPONSORSHIP
CENTER FOR HEALTH POLICY DEVELOPMENT - 2 MONUMENT SQUARE, SUITE 910 - PORTLAND, ME 04101	52-1576801	501(C)(3)	10,000.	0.			NATIONAL ACADEMY FOR STATE HEALTH POLICY'S CONFERENCE, 2022
CENTER FOR HEALTH CARE STRATEGIES, INC. - 200 AMERICAN METRO BLVD, SUITE 119 - HAMILTON, NJ 08619	22-3375015	501(C)(3)	947,405.	0.			SEE PART IV
CYNOSURE HEALTH 1688 ORVIETTO DRIVE ROSEVILLE, CA 95661	26-0443177	501(C)(3)	144,000.	0.			TECHNICAL ASSISTANCE FOR HCAI HOSPITAL EQUITY MEASURES ADVISORY COMMITTEE
CHANGE ELEMENTAL 1717 PENNSYLVANIA AVE. NW, SUITE 10 WASHINGTON, DC 20006	52-1305780	501(C)(3)	10,650.	0.			EVALUATING HEALTHNET'S COMMUNITY DOULA PROGRAM
CHANGE MATRIX LLC 8275 S EASTERN AVE., SUITE 200-138 LAS VEGAS, CA 95618	26-4721525		45,000.	0.			SUPPORTING EVALUATOR DIVERSIFICATION AND THE PRACTICE OF CULTURALLY RESPONSIVE AND EQUITABLE
CHAPMAN CONSULTING, LLC 1133 LOS ROBLES STREET DAVIS, CA 95618	82-3820031		51,000.	0.			MEDI-CAL EXPLAINED: ALTERNATIVE PAYMENT MODELS AND CLINICS; EXPLORING MANAGED

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN NOW 1404 FRANKLIN STREET OAKLAND, CA 94612	94-3059243	501(C)(3)	19,000.	0.			ENGAGING LOCAL STAKEHOLDERS TO IMPROVE MEDI-CAL MANAGED CARE FOR CHILDREN
CHILDREN'S SPECIALTY CARE COALITION - 1017 L STREET, #338 - SACRAMENTO, CA 95814	68-0484332	501(C)(6)	15,000.	0.			CHILDREN'S SPECIALTY CARE COALITION 2022 ANNUAL MEETING
COALITION FOR COMPASSIONATE CARE OF CALIFORNIA - 2530 RIVER PLAZA DRIVE, SUITE 110 - SACRAMENTO, CA 95833-3675	27-0419836	501(C)(3)	120,166.	0.			PILOTING THE USE OF CONSENSUS STANDARDS IN PAYER-PROVIDER CONTRACTS; CONFERENCE SUPPORT:
THE COLLEGE FOR BEHAVIORAL HEALTH LEADERSHIP - 1959 S. POWER RD, STE 103-237 - MESA, AZ 85206	77-0588145	501(C)(3)	15,000.	0.			THE COLLEGE FOR BEHAVIORAL HEALTH LEADERSHIP EQUITY-GROUNDED
COMMUNITY BRIDGES 519 MAIN STREET WATSONVILLE, CA 95076	94-2460211	501(C)(3)	36,000.	0.			CIN PARTNER STIPEND - PHASE 8
THE COMMONWEALTH CLUB OF CALIFORNIA - 110 THE EMBARCADERO - SAN FRANCISCO, CA 94105	94-0399260	501(C)(3)	10,000.	0.			ANNUAL GALA, 2022
COMMUNITY CLINIC ASSOCIATION OF LOS ANGELES COUNTY - 445 S. FIGUEROA STREET, SUITE 2100 - LOS ANGELES, CA 90071	95-4576023	501(C)(3)	17,000.	0.			COMMUNITY CLINIC ASSOCIATION OF LOS ANGELES COUNTYS (CCALAC) HEALTH IT SUMMIT, 2022;
COMMUNITY HEALTH SYSTEMS, INC. 21801 ALESSANDRO BLVD. MORENO VALLEY, CA 92553	33-0056551	501(C)(3)	15,000.	0.			CONNECTED CARE ACCELERATOR - INFRASTRUCTURE AND SPREAD; PARTICIPATION IN
COMMUNITY INITIATIVES 1000 BROADWAY, SUITE #480 OAKLAND, CA 94607	94-3255070	501(C)(3)	30,000.	0.			PRE-HEALTH DREAMERS: ACCESS TO HIGHER EDUCATION AND HEALTH CARE SPACES FOR UNDOCUMENTED

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNICARE HEALTH CENTERS P.O. BOX 1260 DAVIS, CA 95617	94-2188574	501(C)(3)	15,000.	0.			COMPREHENSIVE AND HIGH QUALITY HEALTH CARE; CONNECTED CARE ACCELERATOR DATA
COMMUNICATIONS NETWORK 1717 NORTH NAPER BLVD, SUITE 102 NAPERVILLE, IL 60563	52-2114179	501(C)(3)	15,000.	0.			COMMUNICATIONS NETWORK, 2022
COMMUNITY CATALYST INC. ONE FEDERAL STREET, 5TH FLOOR BOSTON, MA 02110	04-3355127	501(C)(3)	135,000.	0.			CO-CREATING PATIENT-CENTERED EXPERIENCE MEASURES FOR HOME AND COMMUNITY-BASED
COMMUNITY HEALTH CENTERS OF THE CENTRAL COAST, INC. - 2050 S. BLOSSER RD. - SANTA MARIA, CA 93458	95-3253302	501(C)(3)	60,000.	0.			CONNECTED CARE ACCELERATOR EQUITY COLLABORATIVE
COMMUNITY ORIENTED CORRECTIONAL HEALTH SERVICES INC. - 1901 OLYMPIC BOULEVARD, SUITE 200 - WALNUT CREEK, CA 94596	20-3638746	501(C)(3)	27,881.	0.			UNDERSTANDING CALIFORNIA CORRECTIONAL SYSTEMS IN THE CONTEXT OF CALAIM
COMMUNITY PARTNERS P. O. BOX 741265 LOS ANGELES, CA 90074-1265	95-4302067	501(C)(3)	1,754,417.	0.			IDREAM FOR RACIAL HEALTH EQUITY TABLE SPONSOR, 2023.; PILOT WITH MATERNAL MENTAL HEALTH
CONTRA COSTA COUNTY 50 DOUGLAS DRIVE, SUITE 310-C MARTINEZ, CA 94553	94-6000509	CC COUNTY	15,000.	0.			CCHS (CONTRA COSTA HEALTH SERVICES) EHR (ELECTRONIC HEALTH RECORD) INTEGRATION TO SCALE
CORPORATION FOR SUPPORTIVE HOUSING 800 SOUTH FIGUEROA, SUITE 810 LOS ANGELES, CA 90017	13-3600232	501(C)(3)	100,000.	0.			UNPACKING THE HOUSING BUNDLE OF IN LIEU OF SERVICES FOR POLICY AND DELIVERY SYSTEM
COUNTY HEALTH EXECUTIVES ASSOCIATION OF CALIFORNIA - 1127 11TH STREET, SUITE 806 - SACRAMENTO, CA 95814	68-0250511	501(C)(4)	7,500.	0.			ANNUAL MEETING, 2022

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COUNCIL ON FOUNDATIONS INC 1255 23RD STREET NW, SUITE 200 WASHINGTON, DC 20037	13-6068327	501(C)(3)	25,000.	0.			JANUARY -DECEMBER 2023 MEMBERSHIP
CULTURE IQ 5420 SYLMAR AVENUE #115 SHERMAN OAKS, CA 91401	95-4615937		162,560.	0.			MESSAGE TESTING FOR 2024 MEDI-CAL EXPANSION
DAVID BINDER RESEARCH, INC. 44 PAGE STREET, SUITE 404 SAN FRANCISCO, CA 94102	27-0615383		143,875.	0.			CHILDCARE PROVIDER SURVEY
DESIGN IMPACT P.O. BOX 9865 CINCINNATI, OH 45209	26-4662578	501(C)(3)	14,505.	0.			CALIFORNIA IMPROVEMENT NETWORK (CIN) EQUITY CENTERED CO-DESIGN PROCESS
DIDI HIRSCH MENTAL HEALTH SERVICES 4760 SOUTH SEPULVEDA BLVD. CULVER CITY, CA 90230	95-1816023	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
DISTRICT HOSPITAL LEADERSHIP FORUM 1215 K STREET, SUITE 700 SACRAMENTO, CA 95814	27-5349262	501(C)(6)	87,558.	0.			CONTINUED SUPPORT FOR DISTRICT AND MUNICIPAL HOSPITALS: SECURING PRIME AND QIP
DIVERSITY SCIENCE 10121 SE SUNNYSIDE ROAD, SUITE 300 CLACKAMAS, OR 97015	82-2617320		103,770.	0.			TECHNICAL ASSISTANCE SUPPORT TO PROVIDERS FOR UPTAKE OF SB 464 IMPLICIT BIAS MODULES; REFRESHER
DIVERSITY UPLIFTS INC. 6371 HAVEN AVE, SUITE 3 BOX 265 RANCHO CUCAMONGA, CA 91737	83-3215066	501(C)(3)	125,350.	0.			BLACK DOULAS DATA PROJECT-- SOUTHERN CALIFORNIA; CALIFORNIA DEPARTMENT OF HEALTH CARE
DMA HEALTH STRATEGIES 9 MERIAM STREET, SUITE 4 LEXINGTON, MA 02420	04-2984036		18,410.	0.			ALMANAC ON MENTAL HEALTH

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EISNER HEALTH 1530 S. OLIVE STREET LOS ANGELES, CA 90015	95-1690966	501(C)(3)	15,000.	0.			CONNECTED CARE ACCELERATOR DATA COLLECTING EXTENSION; PARTICIPATION IN THE
ELICA HEALTH CENTERS 1860 HOWE AVENUE, SUITE 440 SACRAMENTO, CA 95825	37-1424390	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
ELIZABETH MORRISON CONSULTING 2909 OMEGA WAY MODESTO, CA 95355	83-1077870		6,250.	0.			BEME COMMUNITY ENGAGEMENT STRATEGY IN INLAND EMPIRE
EL SOL NEIGHBORHOOD EDUCATIONAL CENTER - 766 NORTH WATERMAN AVE - SAN BERNARDINO, CA 94210	33-0552297	501(C)(3)	125,000.	0.			REPORT ON THE EL SOL COMMUNITY HEALTH WORKER (CHW) AND PROMOTOR TRAINING MODEL; INLAND
ENTERTAINMENT 2 AFFECT CHANGE 2410 HYPERION AVENUE, STE. B LOS ANGELES, CA 90027	46-2660255	501(C)(3)	150,000.	0.			PRODUCTION OF "DELIVER US"
ESSIE JUSTICE GROUP 1700 BROADWAY, SUITE 200 OAKLAND, CA 94612	80-0956021	501(C)(3)	15,000.	0.			GENERAL OPERATING SUPPORT
EVITARUS, INC. 2355 WESTWOOD BLVD, #1107 LOS ANGELES, CA 90064	27-0527588		189,059.	0.			THE EXPERIENCES OF BLACK CALIFORNIANS AND RACISM IN THE HEALTH SYSTEM; PLANNING GRANT: CALAIM
FENTON COMMUNICATIONS, INC. 630 9TH AVENUE, SUITE 910 NEW YORK, NY 10036	13-3099102		6,250.	0.			GRAPHIC DESIGN SUPPORT FOR THE CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY PROJECT
THE FILM COLLABORATIVE, INC. 3405 CAZADOR STREET LOS ANGELES, CA 90065	32-0295081	501(C)(3)	25,000.	0.			NO HOME HERE DOCUMENTARY ON HOMELESSNESS IN SACRAMENTO

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FREEDMAN HEALTHCARE, LLC 29 CRAFTS STREET, SUITE 470 NEWTON, MA 02458	20-4509536		27,238.	0.			MEASURING BEHAVIORAL HEALTH INVESTMENT IN CALIFORNIA
FRESNO BUILDING HEALTHY COMMUNITIES - 367 N. FIRST STREET - FRESNO, CA 93702	81-3711032	501(C)(3)	30,000.	0.			YOUTH INTERNSHIP PROGRAM - PROMOTORITOS
FUSE CORPS P.O. BOX 26070 SAN FRANCISCO, CA 94126	27-5469219	501(C)(3)	180,000.	0.			ONE-YEAR SUPPORT FOR A FUSE FELLOWSHIP FOCUSED ON HEALTH CARE FINANCIAL HARM IN LOS ANGELES
GARDNER HEALTH SERVICES 1621 GOLD STREET ALVISO, CA 95002	94-1743078	501(C)(3)	60,000.	0.			PARTNERSHIPS FOR ACTION PILOT
THE GENERAL HOSPITAL CORPORATION 55 FRUIT STREET BOSTON, MA 02114	04-2697983	501(C)(3)	49,171.	0.			INDIVIDUAL MARKET AFFORDABILITY IN COVID CALIFORNIA: A CONSUMER SURVEY
THE GEORGE WASHINGTON UNIVERSITY 45155 RESEARCH PLACE, SUITE 260 ASHBURN, VA 20147	53-0196584	501(C)(3)	200,000.	0.			COMMUNITY BENEFIT IN CALIFORNIA HOSPITALS; INCORPORATING EQUITY CONSIDERATIONS INTO THE
GOING DIGITAL HEALTH, INC. 28 KIM LOUISE DRIVE, UNIT 4 CAMPBELL, CA 95008	92-1807334		10,000.	0.			PANEL SPONSORSHIP: GOING DIGITAL BEHAVIORAL HEALTH 2023
GOLDEN VALLEY HEALTH CENTERS 737 WEST CHILDS AVENUE MERCED, CA 95341	94-2196086	501(C)(3)	60,000.	0.			CONNECTED CARE ACCELERATOR EQUITY COLLABORATIVE
GOODWIN SIMON STRATEGIC RESEARCH, INC. - 4096 PIEDMONT AVE, #232 - OAKLAND, CA 94611-5221	27-0930150		85,000.	0.			CALAIM LISTENING: IMPLEMENTER FOCUS GROUPS AND POLLING PHASE 1

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GRANTMAKERS CONCERNED WITH IMMIGRANTS AND REFUGEES - P.O BOX 2178 - PETALUMA, CA 94953	20-2559651	501(C)(3)	30,000.	0.			JANUARY 2023-DECEMBER 2024 MEMBERSHIP
GRANTMAKERS FOR EFFECTIVE ORGANIZATIONS - 1310 L STREET, NW, SUITE 650 - WASHINGTON, DC 20005	01-0669150	501(C)(3)	32,000.	0.			JANUARY 2023-DECEMBER 2024 MEMBERSHIP
GRANTMAKERS IN HEALTH 1100 CONNECTICUT AVENUE NW, SUITE 1 WASHINGTON, DC 20036-4110	13-3206571	501(C)(3)	39,000.	0.			JANUARY 2023-DECEMBER 2024 MEMBERSHIP
GROUPS RECOVER TOGETHER 376 HARTNELL AVENUE, SUITE A REDDING, CA 96002	82-2060013		25,182.	0.			GROUPS PEER SUPPORT SPECIALIST
GROWTH MINDSET COMMUNICATIONS, INCORPORATED - 8957 CIMMARON ST. - LOS ANGELES, CA 90047	83-1493756		22,500.	0.			DOCENT-COMMONSPIRIT PROJECT MANAGEMENT
PRESIDENT AND FELLOWS OF HARVARD COLLEGE - 1033 MASSACHUSETTS AVE, 2ND FLOOR - CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	12,486.	0.			COMMUNITY HEALTH WORKER STATE PLAN AMENDMENT TECHNICAL ASSISTANCE; PLANNING GRANT:
HEALTH ACCESS FOUNDATION 1127 11TH STREET, SUITE 925 SACRAMENTO, CA 95814	93-0957949	501(C)(3)	37,500.	0.			HEALTH ACCESS 35TH ANNIVERSARY EVENT; PRIMARY CARE INVESTMENT COORDINATING GROUP -
HEALTHBEGINS, LLC 2600 W OLIVE AVE, STE 500 BURBANK, CA 91505	46-1646737		356,488.	0.			PROGRAM SUPPORT FOR THE PATH TO PATH: HEALTHBEGINS; COMMUNITY BASED
HEALTH EDUCATION COUNCIL 7617 ALMA VISTA WAY, SUITE C SACRAMENTO, CA 95831	68-0249296	501(C)(3)	20,000.	0.			MENTAL HEALTH/HEALTH SCREENINGS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEALTH CARE LA, IPA 4195 E. THOUSAND OAKS BOULEVARD, SUITE 235 - WESTLAKE VILLAGE, CA 91362-3868	95-4298276	501(C)(3)	27,370.	0.			HEALTH CARE LOS ANGELES, INDEPENDENT PHYSICIAN ASSOCIATION: DATA EXCHANGE PILOT TO SUPPORT
HEALTH CAREER CONNECTION, INC. 300 FRANK OGAWA PLAZA, SUITE 243 OAKLAND, CA 94612	25-1904312	501(C)(3)	25,000.	0.			HEALTH EQUITY SCHOLARS PROGRAM
HEALTHIMPACT P.O. BOX 70007 OAKLAND, CA 94612	82-0570413	501(C)(3)	25,092.	0.			ADVANCING NURSE PRACTITIONER INDEPENDENT PRACTICE
HEALTH LEADS INC. 24 SCHOOL STREET, 6TH FLOOR BOSTON, MA 02108	45-0484533	501(C)(3)	238,500.	0.			CHW/PROMOTOR CAPACITY BUILDING COLLABORATIVE; HEALTH LEADS COMMUNITY REFERRALS FOR HEALTH
HEALTH LITERACY MISSOURI 911 WASHINGTON AVE, SUITE 625 ST. LOUIS, MO 63101	27-1010875	501(C)(3)	7,750.	0.			LISTENING TO BLACK CALIFORNIANS FACT SHEET CONTENT
HEALTH MANAGEMENT ASSOCIATES, INC. 120 N. WASHINGTON SQUARE, SUITE 705 LANSING, MI 48933	38-2599727		77,108.	0.			SUPPLEMENTAL DATA ANALYSIS OF FQHC CONTRIBUTION TO MEDI-CAL AMBULATORY SERVICES;
HEALTH RESOURCES IN ACTION, INC. 2 BOYLSTON STREET, 4TH FLOOR BOSTON, MA 02116	04-2229839	501(C)(3)	25,000.	0.			NATIONAL ASSOCIATION OF COMMUNITY HEALTH WORKERS UNITY CONFERENCE & ANNUAL MEETING, 2022; NATIONAL
HILLSIDES 940 AVENUE 64 PASADENA, CA 91105	95-1644002	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
HINDS HOSPICE 2490 W. SHAW AVE, SUITE 101 FRESNO, CA 93711	77-0071360	501(C)(3)	75,000.	0.			CENTRAL CALIFORNIA WOMEN'S FACILITY (CCWF) PALLIATIVE CARE GARDEN PROJECT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HISPANICS IN PHILANTHROPY 414 13TH STREET, SUITE 200 OAKLAND, CA 94612	94-3040607	501(C)(3)	20,000.	0.			JANUARY 2023-DECEMBER 2024 MEMBERSHIP
HOMELESS PRENATAL PROGRAM, INC. 2500 18TH STREET SAN FRANCISCO, CA 94110	94-3146280	501(C)(3)	86,000.	0.			HOMELESS PRENATAL PROGRAM'S LEADERSHIP TRANSITION; CIN PARTNER STIPEND - PHASE 8
HOSPITAL QUALITY INSTITUTE 1215 K STREET, SUITE 700 SACRAMENTO, CA 95814	74-3205570	501(C)(3)	10,000.	0.			HOSPITAL QUALITY INSTITUTE CONFERENCES, 2022
HOW 1059 EVELYN AVENUE ALBANY, CA 94706	86-1634101	501(C)(3)	15,000.	0.			GENERAL OPERATING SUPPORT STATE LEGISLATIVE
HURST BROOKS ESPINOSA, LLC 1127 11TH STREET, SUITE 1005 SACRAMENTO, CA 95814	47-2790907		99,500.	0.			HEARINGS COVERAGE; UPDATE MEMO ON STATE POLICIES TO ADDRESS HOMELESSNESS;
ILLUMINATION FOUNDATION 1091 N BATAVIA ST. ORANGE, CA 92867	71-1047686	501(C)(3)	60,000.	0.			PARTNERSHIPS FOR ACTION PILOT
INDEPENDENT ARTS & MEDIA P.O. BOX 420442 SAN FRANCISCO, CA 94142	94-3355076	501(C)(3)	57,778.	0.			NOVEMBER IN MY SOUL: PODCASTS ON MENTAL ILLNESS IN CALIFORNIA; GENERAL OPERATING SUPPORT
INDEPENDENT SECTOR 1602 L STREET, NW, SUITE 900 WASHINGTON, DC 20036	52-1081024	501(C)(3)	25,000.	0.			JANUARY 2023-DECEMBER 2024 MEMBERSHIP
INDIAN HEALTH CENTER OF SANTA CLARA VALLEY - 1333 MERIDIAN AVENUE - SAN JOSE, CA 95125	94-2476242	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INFO LINE OF SAN DIEGO COUNTY 3860 CALLE FORTUNADA, SUITE 101 SAN DIEGO, CA 92123	33-1029843	501(C)(3)	106,000.	0.			COMMUNITY INFO EXCHANGE (CIE)-211 SAN DIEGO CALIFORNIA FORUM, 2022; PARTNERSHIPS FOR ACTION
INSIDEOUT WRITERS, INC. 3339 W. TEMPLE ST. 2ND FLOOR LOS ANGELES, CA 90026	95-4722308	501(C)(3)	25,000.	0.			COMPASSION IN OAKLANDS ANTI-VIOLENCE EFFORTS IN OAKLAND, CA
INSTITUTE FOR CLINICAL AND ECONOMIC REVIEW - 14 BEACON STREET, SUITE 800 - BOSTON, MA 02108-3704	46-3250612	501(C)(3)	240,000.	0.			CONTINUED SUPPORT FOR CALIFORNIA TECHNOLOGY ASSESSMENT FORUM, 2022-24
INSTITUTO FAMILIAR DE LA RAZA 2919 MISSION STREET SAN FRANCISCO, CA 94110	94-2523608	501(C)(3)	25,000.	0.			CLINICAL INTERNSHIP PROGRAMS
INSTITUTE FOR MEDICAID INNOVATION INC. - P.O. BOX 40619 - WASHINGTON, DC 20016	31-1661234	501(C)(3)	100,000.	0.			EVALUATING THE ADOPTION OF THE MATERNAL MENTAL HEALTH LAW (CA AB 2193) PROVISION BY MEDI-CAL
INSURE THE UNINSURED PROJECT 400 CAPITOL MALL, SUITE 900 SACRAMENTO, CA 95814	27-4159194	501(C)(3)	525,000.	0.			INSURE THE UNINSURED PROJECT (ITUP) GENERAL OPERATING SUPPORT 2023-2025; BROADBAND
INTEGRATED HEALTHCARE ASSOCIATION 180 GRAND AVE, STE 1365 OAKLAND, CA 94612	94-3211035	501(C)(6)	44,246.	0.			PRIMARY CARE INVESTMENT COORDINATING GROUP - IHA; REFINING ANALYSIS OF PRIMARY CARE SPENDING IN
INTEGRATED HEALTH DATA SYSTEMS, INC. - 2205 N MEADOWS AVENUE - MANHATTAN BEACH, CA 90266	95-3825995		30,000.	0.			DATA SOURCES AND POLICIES TO MEASURE AND SLOW HEALTH CARE SPENDING GROWTH IN CALIFORNIA
INTREPID ASCENT LLC 2120 UNIVERSITY AVE. BERKELEY, CA 94704	46-4484811		26,000.	0.			DATA EXCHANGE EXPLAINER SERIES FOR STAKEHOLDER ADVISORY GROUP; CASE STUDY: DATA EXCHANGE IN

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INVISIBLE PEOPLE 7119 W SUNSET BLVD #618 LOS ANGELES, CA 90046	27-2079758	501(C)(3)	68,673.	0.			STRENGTHENING STREET MEDICINE THROUGH VIDEO STORYTELLING
IQ 360 1000 BISHOP STREET, SUITE 500 HONOLULU, HI 96813	27-3308484		50,215.	0.			RESTORING TRUST: PUBLIC CHARGE GUIDE UPDATE AND DISSEMINATION
JEWISH COMMUNITY FREE CLINIC 50 MONTGOMERY DRIVE SANTA ROSA, CA 95404	94-3386103	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
JSI RESEARCH & TRAINING INSTITUTE, INC. - 44 FARNSWORTH STREET - BOSTON, MA 02210	04-2679824	501(C)(3)	161,640.	0.			DELTA CENTER CALIFORNIA LEARNING LAB TEAMS; ISSUE BRIEF: CERTIFIED COMMUNITY BEHAVIORAL
JUSTICE FUNDERS 436 14TH STREET, SUITE 700 OAKLAND, CA 94612	85-3980966	501(C)(3)	30,000.	0.			JANUARY 2023-DECEMBER 2024 MEMBERSHIP
KAISER FOUNDATION HEALTH PLAN OF WASHINGTON - 1300 SW 27TH STREET - RENTON, WA 98057	91-0511770	501(C)(3)	359,000.	0.			DOCENT-COMMONSPIRIT BIRTH EQUITY EVALUATION; DELTA CENTER CALIFORNIA EVALUATION; CONNECTED
HENRY J KAISER FAMILY FOUNDATION 185 BERRY STREET, SUITE 2000 SAN FRANCISCO, CA 94107	94-6064808	501(C)(3)	1,834,771.	0.			SUPPORT FOR CALIFORNIA HEALTHLINE, 2021-2022; EMPLOYER HEALTH BENEFITS SURVEY, 2022; CALIFORNIA
KINGS TULARE CONTINUUM OF CARE ON HOMELESSNESS INC. - P.O. BOX 1742 - VISALIA, CA 93279	27-0522489	501(C)(3)	60,000.	0.			PARTNERSHIPS FOR ACTION PILOT
LA CLINICA DE LA RAZA P.O BOX 22210 OAKLAND, CA 94623	94-1744108	501(C)(3)	35,000.	0.			MERGER EXPLORATION: LA CLINICA DE LA RAZA AND TIBURCIO VASQUEZ HEALTH CENTER; 2022 ANNUAL LA

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LATINO CENTER FOR PREVENTION AND ACTION IN HEALTH AND WELFARE - 450 W. 4TH STREET, SUITE 130 - SANTA ANA, CA 92701	33-0562943	501(C)(3)	10,000.	0.			LATINO HEALTH ACCESS ANNIVERSARY EVENT, 2022
LATINO COMMUNITY FOUNDATION 235 MONTGOMERY STREET, SUITE 1160 SAN FRANCISCO, CA 94104	81-0564400	501(C)(3)	600,000.	0.			LATINO POWER FUND; SUPPORT FOR THE LATINO POWER FUND
LATINO MEDIA COLLABORATIVE 360 E 2ND STREET, 8TH FLOOR LOS ANGELES, CA 90012	85-4098339	501(C)(3)	25,000.	0.			PILOTING A SHARED HEALTH DESK FOR LATINX MEDIA
LEAGUE OF CALIFORNIA COMMUNITY FOUNDATIONS - P.O. BOX 4791 - SONORA, CA 95370	45-5125583	501(C)(3)	272,000.	0.			SUPPORT FOR THE CALIFORNIA DISASTER RELIEF, RECOVERY AND RESILIENCE FUND;
LEADINGAGE CALIFORNIA FOUNDATION 1315 I STREET, SUITE 100 SACRAMENTO, CA 95814	95-2383463	501(C)(3)	100,000.	0.			DIVERSITY, EQUITY, AND INCLUSION (DEI) INITIATIVE
LEGAL AID SOCIETY OF SAN MATEO COUNTY - 330 TWIN DOLPHIN DR, SUITE 123 - REDWOOD CITY, CA 94065	94-1451894	501(C)(3)	63,714.	0.			RESTORING TRUST: PUBLIC CHARGE GUIDE UPDATE AND DISSEMINATION; KEEPYOURBENEFITS WEBSITE
LIGHTHOUSE SOCIAL SERVICE CENTERS 1003 E. COOLEY DRIVE, SUITE 205 COLTON, CA 92324	75-3147113	501(C)(3)	36,000.	0.			CIN PARTNER STIPEND - PHASE 8
LOCAL EYES VIDEO PRODUCTION 4075 PARK BLVD, SUITE 102-371 SAN DIEGO, CA 92103	46-2487395		12,520.	0.			PROVIDER AND MEDICAL STUDENT PERSPECTIVES VIDEO
LOCAL HEALTH PLANS OF CALIFORNIA 1201 K STREET, SUITE 1840 SACRAMENTO, CA 95814	95-4626128	501(C)(6)	145,000.	0.			RUNNING ENHANCED CARE MANAGEMENT AND COMMUNITY SUPPORTS LEARNING COLLABORATIVE; SYNTHESIS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE LOS ANGELES TRUST FOR CHILDREN'S HEALTH - 333 S. BEAUDRY AVE, 29TH FLOOR - LOS ANGELES, CA 90017	95-4262448	501(C)(3)	30,000.	0.			TECHNICAL ASSISTANCE FOR THE LOS ANGELES TRUST FOR CHILDREN'S HEALTH
LOS ANGELES CHRISTIAN HEALTH CENTERS - 453 S. SPRING STREET, SUITE 1201 - LOS ANGELES, CA 90013	95-4315734	501(C)(3)	30,000.	0.			SUPPORT FOR LOS ANGELES CHRISTIAN HEALTH CENTERS AND URBAN ALCHEMY CROSS-SECTOR PARTNERSHIP
MANATT, PHELPS & PHILLIPS, LLP 2049 CENTURY PARK EAST, SUITE 1700 LOS ANGELES, CA 90067	95-2375841		80,350.	0.			CONNECTING PLANS TO TECH-ENABLED BEHAVIORAL HEALTH (BH) SOLUTIONS THAT MEET THEIR NEEDS;
MARIAN REGIONAL MEDICAL CENTER 1400 EAST CHURCH STREET SANTA MARIA, CA 93454	94-1196203	501(C)(3)	60,000.	0.			PARTNERSHIPS FOR ACTION PILOT
MATERNAL MENTAL HEALTH LEADERSHIP ALLIANCE - 3068 NORTH QUINCY STREET - ARLINGTON, VA 22207	82-4169146	501(C)(3)	85,625.	0.			MATERNAL MENTAL HEALTH LEADERSHIP ALLIANCE: SUPPORT FOR FACT SHEETS ON MATERNAL MENTAL
MATHEMATICA INC. P.O. BOX 2393 PRINCETON, NJ 08543-2393	22-2112296		812,506.	0.			IMPROVING MEDI-CAL PRESUMPTIVE ELIGIBILITY: CALIFORNIA PROVIDER RESEARCH AND OTHER STATES
MEDTECH COLOR 3400 COTTAGE WAY, STE G2 #11196 SACRAMENTO, CA 95825	83-0543603	501(C)(3)	10,000.	0.			2023 SPONSORSHIP FOR MEDTECH COLOR PITCH COMPETITION
MEDIA IMPACT FUNDERS INC. 200 WEST WASHINGTON SQUARE, SUITE 2 PHILADELPHIA, PA 19106	26-1948166	501(C)(3)	15,000.	0.			JANUARY 2023-DECEMBER 2024 MEMBERSHIP
M. ENTERTAINMENT P.O. BOX 1172 LODI, CA 95240	84-3960419		165,000.	0.			BUILDING AWARENESS FOR 50+ MEDI-CAL EXPANSION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MEXICAN AMERICAN LEGAL DEFENSE AND EDUCATIONAL FUND - 634 SOUTH SPRING STREET, 11TH FLOOR - LOS ANGELES, CA 90014	74-1563270	501(C)(3)	10,000.	0.			ADVOCACY ON ACCESS TO HEALTH CARE
MIRROR GROUP LLC 3851 NEWARK STREET, NW B458 WASHINGTON, DC 20016	82-2143504		189,575.	0.			CHERISHED FUTURES EVALUATION (EXPENSE REPORTS); CHERISHED FUTURES EVALUATION;
MISSION INVESTORS EXCHANGE INC. 105 W. 86TH STREET, #358 NEW YORK, NY 10024	47-5593271	501(C)(3)	19,000.	0.			ANNUAL CONFERENCE, 2022; JANUARY 2023-DECEMBER 2024 MEMBERSHIP
MIXTECO INDIGENA COMMUNITY ORGANIZING PROJECT - 520 W. FIFTH STREET, SUITE F - OXNARD, CA 93030	30-0045901	501(C)(3)	10,000.	0.			TEQUIO RISING INITIATIVE
2020 MOM 27101 ISLAND VIEW COURT VALENCIA, CA 91355	45-5009704	501(C)(3)	27,000.	0.			2023 CONFERENCE AND WEBSITE UPDATE SUPPORT FOR 2020 MOM
MONSOON ASIANS & PACIFIC ISLANDERS IN SOLIDARITY - 4944 FRANKLIN AVENUE, STE. B - DES MOINES, IA 50310	35-2297207	501(C)(3)	25,000.	0.			AAPI WOMEN LEAD
MORENO VALLEY CLINICA MEDICA FAMILIAR - 23080 ALESSANDRO BLVD, SUITE 202 - MORENO VALLEY, CA 92553-9674	33-0717039		10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
MOSS ADAMS LLP 999 THIRD AVE, STE 2800 SEATTLE, WA 98104	91-0189318		13,435.	0.			ASSESSING IMPACT OF CONTRACT-MODE IN-HOME SUPPORTIVE SERVICES
MOUNTAIN VALLEYS HEALTH CENTER 554-850 MEDICAL CENTER DR. BIEBER, CA 96009	94-2533006	501(C)(3)	20,000.	0.			ACCESS TO HEALTH CARE SERVICES

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MT. AUBURN ASSOCIATES INC. 408 HIGHLAND AVE. SOMERVILLE, MA 02144	04-2916072		155,000.	0.			EVALUATION OF THE MEDI-CAL COMMUNITY BASED ORGANIZATION (CBO) PARTNERSHIP DEVELOPMENT
NAAPIMHA 1215 19TH ST. SUITE A DENVER, CO 80202	84-1605911	501(C)(3)	23,793.	0.			SHORT ANIMATED FILM, IS THIS GOING TO BE ON THE TEST, AND DISSEMINATION ACTIVITIES
NARRATIVE NATION, INC. 82-155 COUNTRY POINT CIRCLE BELLROSE MANOR, NY 11427	82-3760872	501(C)(3)	79,999.	0.			BIRTHRIGHT PODCASTSEASON 2
NATIONAL ACADEMY OF SCIENCES 2101 CONSTITUTION AVENUE, NW WASHINGTON, DC 20418-0007	53-0196932	501(C)(3)	265,000.	0.			NATIONAL ACADEMY OF MEDICINE'S LEADERSHIP CONSORTIUM FOR A VALUE & SCIENCE DRIVEN HEALTH
THE NATIONAL ALLIANCE FOR HISPANIC HEALTH - 1501 16TH ST, NW - WASHINGTON, DC 20036	95-2856725	501(C)(3)	12,500.	0.			JANUARY-DECEMBER 2023 MEMBERSHIP; HISPANIC HEALTH EDUCATION IN CALIFORNIA
NATIONAL QUALITY FORUM 1099 14TH STREET, NW SUITE 500 WASHINGTON, DC 20005	52-2175544	501(C)(3)	19,700.	0.			JANUARY-DECEMBER 2023 MEMBERSHIP
NATIONAL BLACK TRANS ADVOCACY COALITION - POB 118282 - CARROLLTON, TX 75011	84-1947483	501(C)(3)	40,000.	0.			FOLX HRT CARE FUND IN CALIFORNIA
NATIONAL HEALTH CARE FOR THE HOMELESS COUNCIL - 604 GALLATIN AVENUE, SUITE 106 - NASHVILLE, TN 37206	62-1475145	501(C)(3)	160,000.	0.			NATIONAL HEALTH CARE FOR THE HOMELESS COUNCIL CONSUMER SUMMIT, 2022; LA RECUPERATIVE CARE
NATIONAL HEALTH FOUNDATION 515 S. FIGUEROA STREET, SUITE 1300 LOS ANGELES, CA 90071	23-7314808	501(C)(3)	54,000.	0.			SUPPORTING A LOS ANGELES MEDICAL RESPITE CARE LEARNING NETWORK

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL HEALTH LAW PROGRAM 3701 WILSHIRE BLVD, SUITE 315 LOS ANGELES, CA 90010	95-3080947	501(C)(3)	235,000.	0.			CALIFORNIA COVERAGE FOR DOULA CARE LISTSERV; SUPPORT FOR CALAIM BEHAVIORAL HEALTH WORK;
NATIONAL ASSOCIATION OF HEALTH DATA ORGANIZATIONS - 965 E CENTER ST - PROVO, UT 84606-3535	52-1563768	501(C)(3)	10,000.	0.			ANNUAL CONFERENCE, 2022
NATIONAL MEDICAL FELLOWSHIPS INC. PO BOX 3875 NEW YORK, NY 10163	01-0963657	501(C)(3)	50,000.	0.			PRIMARY CARE LEADERSHIP PROGRAM SCHOLARS AT NORTHEAST VALLEY HEALTH CORPORATION
NATIONAL COMMITTEE FOR QUALITY ASSURANCE - 1100 13TH STREET NW, THIRD FLOOR - WASHINGTON, DC 20005	52-1191985	501(C)(3)	161,175.	0.			ADVANCING STANDARDIZED HEALTH EQUITY QUALITY MEASUREMENT; BEHAVIORAL HEALTH QUALITY FRAMEWORK
NATIONAL OPINION RESEARCH CENTER 55 EAST MONROE ST. CHICAGO, IL 60603	36-2167808	501(C)(3)	357,347.	0.			TELEHEALTH EXPERIENCE INTERVIEWS; ADDITIONAL ANALYSIS: CALIFORNIA HEALTH POLICY SURVEY;
JUSTICE IN AGING 1444 EYE STREET NW, SUITE 1100 WASHINGTON, DC 20005	95-3132674	501(C)(3)	108,000.	0.			ADVANCING EQUITY IN MEDI-CAL'S HOME AND COMMUNITY-BASED SERVICES
NEIGHBORHOOD HEALTHCARE 425 NORTH DATE STREET ESCONDIDO, CA 92025	95-2796316	501(C)(3)	65,000.	0.			CONNECTED CARE ACCELERATOR DATA COLLECTING EXTENSION; CONNECTED CARE
NEW VENTURE FUND 1828 L STREET NW, SUITE 300-A WASHINGTON, DC 20036	20-5806345	501(C)(3)	367,500.	0.			SUPPORT FOR A FUND FOR A SAFER FUTURE; HOPE AND HEAL FUND; SUPPORT FOR THE HOPE AND HEAL FUND
NORTHERN CALIFORNIA GRANTMAKERS 160 SPEAR STREET, SUITE 360 SAN FRANCISCO, CA 94105	94-2761355	501(C)(3)	49,000.	0.			JANUARY 2023-DECEMBER 2024 MEMBERSHIP; NORTHERN CALIFORNIA GRANTMAKERS' ANNUAL CONFERENCE

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OLE HEALTH FOUNDATION 1141 PEAR TREE LANE, SUITE 100 NAPA, CA 94558	68-0149424	501(C)(3)	10,000.	0.			HEALTHCARE SERVICES TO NAPA COUNTY
OLE HEALTH 1141 PEAR TREE LANE, SUITE 100 NAPA, CA 94558	23-7221695	501(C)(3)	30,000.	0.			OLE HEALTH/COMMUNICARE MERGER OPPORTUNITY STUDY
OLIVE VIEW-UCLA EDUCATION AND RESEARCH INSTITUTE, INC. - 14445 OLIVE VIEW DRIVE - SYLMAR, CA 91342	95-2249539	501(C)(3)	18,633.	0.			GENERALIST PALLIATIVE CARE IN PUBLIC HEALTH SYSTEMS (OLIVE VIEW-UCLA); FORMATIVE
OMNI FAMILY HEALTH 4900 CALIFORNIA AVE, SUITE 400B BAKERSFIELD, CA 93309	95-3218000	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
ORGANIZACION EN CALIFORNIA DE LIDERES CAMPESINAS, INC. - PO BOX 20033 - OXNARD, CA 93034	95-4611282	501(C)(3)	30,000.	0.			TAKE IT TO THE FIELDS
OXS CONSULTING, INC. 267 DEERFIELD DR. MORAGA, CA 94556	26-0584368		20,418.	0.			HEALTH CAREERS OPPORTUNITY PROGRAM (HCOP) PLANNING SUPPORT FOR HEALTH CARE ACCESS
PURCHASER BUSINESS GROUP ON HEALTH 275 BATTERY STREET, SUITE 480 SAN FRANCISCO, CA 94111	94-3093623	501(C)(3)	496,825.	0.			CALIFORNIA QUALITY COLLABORATIVE: BUILDING ACTION FOR HEALTH EQUITY; PRIMARY CARE INVESTMENT
PACIFIC HEALTH CONSULTING GROUP 72 OAK KNOLL AVENUE SAN ANSELMO, CA 94960	68-0403180		71,125.	0.			OPPORTUNITIES FOR EXPANDING SERVICES FOR OLDER ADULTS WITH COMPLEX NEEDS IN THE SAFETY NET
PALLIATIVE CARE QUALITY COLLABORATIVE NFP - 8735 W. HIGGINS ROAD, SUITE 300 - CHICAGO, IL 60631	83-4460105	501(C)(3)	63,918.	0.			INAUGURAL PALLIATIVE CARE QUALITY COLLABORATIVE QUALITY MATTERS CONFERENCE, 2022;

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PASCHAL ROTH PUBLIC AFFAIRS, INC. 1127 11TH STREET, SUITE 824 SACRAMENTO, CA 95814	26-3273301		198,071.	0.			COMMUNICATIONS SUPPORT FOR STATE POLICY PRIORITIES; COMMUNICATIONS CAMPAIGN
PEACH TREE HEALTHCARE 1114 YUBA STREET, STE. 220 MARYSVILLE, CA 95901	68-0371679	501(C)(3)	65,000.	0.			PHOTO STIPEND FOR PEACH TREE HEALTHCARE; CONNECTED CARE ACCELERATOR EQUITY
PENN CONSULTING PARTNERS, LLC 66 FRANKLIN STREET, SUITE 300 OAKLAND, CA 94607	84-2820422		24,000.	0.			EVALUATION OF CHCF INNOVATION FUND ACCELERATOR PARTNERSHIPS
THE PEOPLE CONCERN 2116 ARLINGTON AVE, SUITE 100 LOS ANGELES, CA 90018	95-6143865	501(C)(3)	36,000.	0.			CIN PARTNER STIPEND - PHASE 8
PERINATAL ADVISORY COUNCIL: LEADERSHIP, ADVOCACY, AND CONSULTATION - 1010 N. CENTRAL AVENUE, SUITE 210 - GLENDALE, CA	95-3818791	501(C)(3)	5,500.	0.			"QUALITY OF LIFE FOR FAMILIES XXV: ENVIRONMENTAL AND SOCIAL FACTORS IMPACTING
PETALUMA HEALTH CENTER 1455 N. MCDOWELL BLVD, STE. D PETALUMA, CA 94954	68-0437840	501(C)(3)	15,000.	0.			CONNECTED CARE ACCELERATOR DATA COLLECTION EXTENSION; PARTICIPATION IN THE
PLANNED PARENTHOOD-ORANGE AND SAN BERNARDINO COUNTIES INC. - 801 E. KATELLA AVENUE - ANAHEIM, CA 92805	95-6152773	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
PLAYERS PHILANTHROPY FUND 1122 KENILWORTH DRIVE #201 TOWSON, MD 21204	27-6601178	501(C)(3)	126,300.	0.			SUPPORT FOR PAUSE - INNOVATIVE SUPPORTS FOR PEOPLE OF COLOR THROUGH SERIOUS ILLNESS, END OF
PLUG IN SOUTH LA 1511 16TH ST. #101 SANTA MONICA, CA 90404	87-3704348	501(C)(3)	10,000.	0.			URBAN TECH CONNECT SUMMIT, 2022

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
POSSIBILITY LABS 1410 FRANKLIN ST, #135 SAN FRANCISCO, CA 94109	85-3989363	501(C)(3)	25,000.	0.			VISIBLE HANDS - DIGITAL HEALTH ACCELERATOR
THE PRAXIS PROJECT P.O. BOX 7259 OAKLAND, CA 94601	30-0044814	501(C)(3)	165,000.	0.			PERINATAL WORKFORCE EDUCATION PROJECT; DEVELOPING A NATIONAL BIRTH EQUITY QUALITY
PRIMARY CARE COLLABORATIVE 601 13TH STREET NW, SUITE 430N WASHINGTON, DC 20005	26-2012436	501(C)(3)	60,000.	0.			MULTI-STAKEHOLDER MEDICAID PRIMARY CARE POLICY DEVELOPMENT
PRIME HEALTH 303 E. 17TH AVE, STE. 405 DENVER, CO 80203-1258	47-2330752	501(C)(3)	175,000.	0.			INNOVATION SEED FUND
PROJECT HOPE - THE PEOPLE-TO-PEOPLE HEALTH FOUNDATION - 1220 19TH STREET NW, SUITE 800 - WASHINGTON, DC 20036	53-0242962	501(C)(3)	300,000.	0.			HEALTH AFFAIRS PERINATAL MENTAL HEALTH FULL THEME ISSUE; HEALTH AFFAIRS THEMATIC ISSUE: RESEARCH
PROVIDENCE ST. JOSEPH HEALTH FOUNDATION - 4400 NE HALSEY STREET, STE. 599 - PORTLAND, OR 97213	94-3078543	501(C)(3)	27,000.	0.			LEVERAGING ELECTRONIC HEALTH RECORDS TO SYSTEMATIZE SUPPORTIVE SERIOUS ILLNESS CARE
PUBLIC HEALTH INSTITUTE 555 12TH STREET, 10TH FLOOR OAKLAND, CA 94607-4046	94-1646278	501(C)(3)	592,500.	0.			THE CALIFORNIA ALLIANCE OF SCHOOLS AND PROGRAMS OF PUBLIC HEALTH; SALUD CON TECH DIGITAL HEALTH
PUBLIC POLICY INSTITUTE OF CALIFORNIA - 500 WASHINGTON STREET, SUITE 600 - SAN FRANCISCO, CA 94111	94-3207299	501(C)(3)	54,875.	0.			PUBLIC POLICY INSTITUTE OF CALIFORNIA SPEAKER SERIES ON CALIFORNIA'S FUTURE (2023); ASSESSING
QUANTUM MARKET RESEARCH, INC. 1635 TELEGRAPH AVE. OAKLAND, CA 94612	56-2321098		100,000.	0.			HOSPITAL PRESUMPTIVE ELIGIBILITY (HPE) RESEARCH: CONSUMER EXPERIENCES

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RACE FOR EQUITY LLC 1111 EXCELSIOR GRAND AVE. DURHAM, NC 27713	83-1481691		142,818.	0.			TECHNICAL ASSISTANCE/FACILITATOR SUPPORT FOR DEPARTMENT OF HEALTH CARE SERVICES
RALLY 5670 WILSHIRE BLVD, STE. 820 LOS ANGELES, CA 90036	26-4433321		179,931.	0.			LISTENING TO BLACK CALIFORNIANS DECISIONMAKERS COMMUNICATIONS CAMPAIGN;
RAND CORPORATION 1776 MAIN STREET, M4W SANTA MONICA, CA 90407-2138	95-1958142	501(C)(3)	511,029.	0.			MEDI-CAL PAYMENT REFORM AND BEHAVIORAL HEALTH CARE; PRIMARY CARE INVESTMENT COORDINATING
RAVENSWOOD FAMILY HEALTH NETWORK 1885 BAY ROAD EAST PALO ALTO, CA 94303	94-3372130	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
UNIVERSITY OF CALIFORNIA, SAN FRANCISCO - 1855 FOLSOM STREET, SUITE 425 - SAN FRANCISCO, CA 94143	94-6036493	501(C)(3)	2,321,573.	0.			SEE PART IV
UNIVERSITY OF CALIFORNIA, BERKELEY 200 CALIFORNIA HALL # 1500 BERKELEY, CA 94720	94-6002123	501(C)(3)	12,733.	0.			UNDERSTANDING BARRIERS AND FACILITATORS TO PAYER INVESTMENT IN COMMUNITY DOULA CARE IN CALIFORNIA
UNIVERSITY OF CALIFORNIA, LOS ANGELES - 405 HILGARD AVENUE - LOS ANGELES, CA 90095	95-6006143	501(C)(3)	1,036,680.	0.			ACTING TO REDUCE VARIATION IN UTILIZATION; EVALUATING CROSS-SECTOR IMPACTS OF THE DRUG
UNIVERSITY OF CALIFORNIA, IRVINE 510 ALDRICH HALL IRVINE, CA 92697	95-2226406	501(C)(3)	44,981.	0.			GENERALIST PALLIATIVE CARE IN PUBLIC HEALTH SYSTEMS (UC IRVINE); UC IRVINE HEALTH CARE
UNIVERSITY OF MINNESOTA 200 OAK STREET SE MINNEAPOLIS, MN 55455-2070	41-6007513	MN UNI	105,000.	0.			ON-DEMAND DATA ANALYSIS AND LEARNING FROM OTHER STATES: STATE HEALTH ACCESS ASSISTANCE CENTER

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESILIENCY VILLAGE PO BOX 523 SOULSBYVILLE, CA 95372	61-1946540	501(C)(3)	60,000.	0.			PARTNERSHIPS FOR ACTION PILOT
REYES SCHOLARSHIP FUND, INC. P.O. BOX 6443 FRESNO, CA 93703	86-1784627	501(C)(3)	20,000.	0.			EMPOWERING UNDERREPRESENTED FUTURE LEADERS (HEALTH WORKFORCE) IN
ROCK HEALTH FOUNDATION 301 HOWARD STREET, SUITE 950 SAN FRANCISCO, CA 94105	45-1204321	501(C)(3)	155,000.	0.			ROCK HEALTH SUMMIT, 2022; ROCK HEALTH CEO SUMMIT, 2023; SUPPORTING LATINO/A/X HEALTH TECH
THE RP GROUP, INC. 369-B THIRD STREET #397 SAN RAFAEL, CA 94901	94-3207140	501(C)(3)	70,000.	0.			UNDERSTANDING COMMUNITY COLLEGE HEALTH CAREER PIPELINE
SAFE HAVEN CLINIC INSTITUTE P.O. BOX 288, 864 GRAND AVE SAN DIEGO, CA 92109	87-2482356		30,000.	0.			CORE SUPPORT
SALUD PARA LA GENTE P.O. BOX 1870 WATSONVILLE, CA 95077-1870	94-2705747	501(C)(3)	62,500.	0.			CONNECTED CARE ACCELERATOR DATA COLLECTION EXTENSION; CONNECTED CARE
SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE - 7632 CORTINA COURT - CARLSBAD, CA 92009	46-5359485	501(C)(3)	120,000.	0.			SAN DIEGO CHW/P WORKFORCE CAPACITY-BUILDING COLLABORATIVE
SAN FRANCISCO GENERAL HOSPITAL FOUNDATION - P.O. BOX 410836 - SAN FRANCISCO, CA 94141	94-3189424	501(C)(3)	85,000.	0.			INNOVATION FUND ADVISORY COMMITTEE GRANT: GENERAL SUPPORT; ZUCKERBERG SAN FRANCISCO GENERAL
SAN FRANCISCO STUDY CENTER INC. 1663 MISSION STREET, SUITE 310 SAN FRANCISCO, CA 94103	94-2168838	501(C)(3)	30,000.	0.			SUPPORT FOR MINDSITE NEWS' COVERAGE IN CALIFORNIA

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAN JOAQUIN COUNTY CLINICS 500 W. HOSPITAL ROAD FRENCH CAMP, CA 95231-9693	94-6000531	SJ COUNTY	60,000.	0.			CONNECTED CARE ACCELERATOR EQUITY COLLABORATIVE
SANTA BARBARA FOUNDATION 1111 CHAPALA STREET, SUITE 200 SANTA BARBARA, CA 93101	95-1866094	501(C)(3)	120,000.	0.			CENTRAL COAST CHW/PS CAPACITY BUILDING COLLABORATIVE
SAVIE HEALTH CORP 1111 E. OCEAN AVE. SUITE 2 LOMPOC, CA 93436	86-1668790	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
SHASTA CASCADE HEALTH CENTERS P.O. BOX 1143 MCCLOUD, CA 96057	68-0427383	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
SHATTERPROOF A NON-PROFIT CORPORATION - 101 MERRITT 7, CORPORATE PARK, 1ST FLOOR - NORWALK, CT 06851	45-4619712	501(C)(3)	17,046.	0.			ADDICTION TREATMENT LOCATER, ASSESSMENT AND STANDARDS (ATLAS) IN THE CALIFORNIA
SIGNAL KEY CONSULTING 874 CORDOVA STREET SAN DIEGO, CA 92107	90-1077050		35,440.	0.			PROGRAM SUPPORT PLANNING SERVICES: DEVELOPING A TECHNICAL ASSISTANCE PROVIDERS' /QI HUB FORUM;
SILICON VALLEY COMMUNITY FOUNDATION - 2440 W. EL CAMINO REAL, STE. 300 - MOUNTAIN VIEW, CA 94040-1498	20-5205488	501(C)(3)	100,000.	0.			SUPPORT FOR THE CALIFORNIA BLACK FREEDOM FUND
SOCIAL GOOD FUND, INC. 12651 SAN PABLO AVENUE, SUITE 5473 RICHMOND, CA 94805	46-1323531	501(C)(3)	45,000.	0.			SPONSORSHIP OF THE NOCTURNISTS PODCAST; DEVELOPING A SUSTAINABLE SOCIAL PRESCRIBING MODEL
SOCIAL GOOD SOLUTIONS 9800 TOPANGA CANYON BLVD, SUITE D29 CHATSWORTH, CA 91311	47-2256800		54,556.	0.			BLACK HEALTH MOVEMENT PART I: PREPARING THE GROUND

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH CENTRAL FAMILY HEALTH CENTER 4425 SOUTH CENTRAL AVENUE LOS ANGELES, CA 90011-3629	95-3877793	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
SOUTHERN CALIFORNIA GRANTMAKERS 1000 N. ALAMEDA STREET, SUITE 230 LOS ANGELES, CA 90012	95-2831058	501(C)(3)	277,000.	0.			JANUARY 2023-DECEMBER 2024 MEMBERSHIP; SUPPORT FOR THE BLACK EQUITY COLLECTIVE; SOUTHERN
SOUTH OF MARKET HEALTH CENTER 229 7TH STREET SAN FRANCISCO, CA 94103	23-7304921	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
STALLANT HEALTH 20601 WEST PAOLI LANE WEIMAR, CA 95736	47-1442328		10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
THE BOARD OF TRUSTEES OF THE LELAND STANFORD JUNIOR UNIVERSITY - 485 BROADWAY, MAIL CODE 8838 - REDWOOD CITY, CA 94063	94-1156365	501(C)(3)	162,873.	0.			COST SHIFTING: CONCEPTS, EVIDENCE, AND UNANSWERED QUESTIONS; TO SUPPORT THE PRESENCE PROGRAM AT
STARTUP HEALTH LLC 2000 BROADWAY, 18TH FLOOR NEW YORK, NY 10023	45-4362441		225,000.	0.			STARTUP HEALTH'S HEALTH TRANSFORMER PROGRAM FOR UNDERREPRESENTED FOUNDERS
STEINBERG INSTITUTE 1121 L STREET, SUITE 300 SACRAMENTO, CA 95814	81-4361691	501(C)(3)	40,000.	0.			DEVELOPMENT OF DATA AND RESEARCH CAPACITY AT STEINBERG INSTITUTE
TCC FAMILY HEALTH 701 EAST 28TH STREET, STE. 200 LONG BEACH, CA 90806	95-1643332	501(C)(3)	60,000.	0.			CONNECTED CARE ACCELERATOR EQUITY COLLABORATIVE
TECHNICAL ASSISTANCE COLLABORATIVE, INC. - 15 COURT SQUARE, 11TH FLOOR - BOSTON, MA 02108	22-3181028	501(C)(3)	15,000.	0.			MENTAL HEALTH AND SUD EMERGENCY RESPONSE THROUGH NEW MEDICAID AND OTHER AMERICAN RESCUE

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THALAMUS 548 MARKET STREET, PMB 15342 SAN FRANCISCO, CA 94104-5401	46-4667002		174,600.	0.			RESIDENCY OPPORTUNITIES FOR BLACK AND LATINO PHYSICIANS
THALAMUS.ORG, INC. 41 PEABODY STREET NASHVILLE, TN 37210	86-3957298	501(C)(3)	50,000.	0.			RESIDENCY APPLICATION SCHOLARSHIPS FOR GROUPS UNDERREPRESENTED IN MEDICINE
THINKNOW 2100 W. MAGNOLIA BLVD. SUITE A-B BURBANK, CA 91506	27-3723924		165,000.	0.			TESTING MESSAGES TO HELP CALIFORNIANS MAINTAIN MEDI-CAL COVERAGE
TIBURCIO VASQUEZ HEALTH CENTER, INC. - 22331 MISSION BLVD. - HAYWARD, CA 94541	23-7118361	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
TIDES CENTER 1225 EIGHTH STREET, SUITE 500 SACRAMENTO, CA 95814	94-3213100	501(C)(3)	1,566,857.	0.			LATINX HEALTH POLICY SUMMIT, 2022; CONSUMER ADVOCATE: CORE SUPPORT FOR LATINO COALITION FOR
TRADEOFFS, INC. 424 SOUTH 47TH STREET PHILADELPHIA, PA 19143	83-4075323	501(C)(3)	25,000.	0.			GENERAL SUPPORT
TRANSFORMING CARE PARTNERS 2209 9TH AVENUE SAN FRANCISCO, CA 94116	82-4362206		61,938.	0.			CALIFORNIA'S PALLIATIVE CARE PROGRESS AND FUTURE PRIORITIES
TRELLA WALKER CONSULTING 600 W. 9TH STREET, UNIT 404 LOS ANGELES, CA 90015	84-5193382		7,000.	0.			DETERMINING A PROGRAM AND BUSINESS STRATEGIC PLANNING DIRECTION FOR THE NATIONAL INSTITUTE
THE TREVOR PROJECT, INC. P.O. BOX 69232 WEST HOLLYWOOD, CA 90069	95-4681287	501(C)(3)	10,000.	0.			CRISIS SUPPORT FOR LGBTQ YOUTH

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRI-STATE COMMUNITY HEALTHCARE CENTER - 1535 E. COLORADO STREET - GLENDALE, CA 91205	45-2996531	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
TRUECARE 150 VALPREDA ROAD SAN MARCOS, CA 92069	95-2847102	501(C)(3)	65,000.	0.			PHOTO STIPEND FOR TRUE CARE CLINIC; CONNECTED CARE ACCELERATOR EQUITY COLLABORATIVE
TUOLUMNE ME-WUK INDIAN HEALTH CENTER, INC. - 18880 CHERRY VALLEY BLVD. - TUOLUMNE, CA 95379	25-1902459	501(C)(3)	60,000.	0.			CONNECTED CARE ACCELERATOR EQUITY COLLABORATIVE
TURNING POINT COMMUNITY PROGRAMS 10850 GOLD CENTER DRIVE #325 RANCHO CORDOVA, CA 95670	94-2609766	501(C)(3)	36,000.	0.			CIN PARTNER STIPEND - PHASE 8
UC HASTINGS COLLEGE OF THE LAW 200 MCALLISTER STREET SAN FRANCISCO, CA 94102	94-2581680	UNIV OF CA	44,964.	0.			SUPPORT FOR 'THE SOURCE ON HEALTHCARE PRICE AND COMPETITION'
UC RIVERSIDE FOUNDATION 900 UNIVERSITY AVENUE, 1136 HINDERAKER HALL - RIVERSIDE, CA 92521	23-7433570	501(C)(3)	7,500.	0.			LISTENING TO BLACK CALIFORNIANS COMMUNITY CONVERSATIONS, INLAND EMPIRE
UCSF BENIOFF CHILDREN'S HOSPITALS FOUNDATION - 1330 BROADWAY, SUITE 1135 - OAKLAND, CA 94612-2546	94-1657474	501(C)(3)	10,000.	0.			INNOVATION FUND ADVISORY COMMITTEE GRANT: SUPPORT FOR STUDY ON PSILOCYBIN THERAPY FOR THE TREATMENT
UNIVERSITY OF CALIFORNIA, BERKELEY FOUNDATION - 1995 UNIVERSITY AVENUE, SUITE 401 - BERKELEY, CA 94704	94-6090626	501(C)(3)	10,000.	0.			UC BERKELEY - UCSF JOINT MEDICAL PROGRAM'S 50TH ANNIVERSARY CELEBRATION
UNIVERSITY OF CALIFORNIA, SAN FRANCISCO FOUNDATION - 2001 THE EMBARCADERO, 3RD FL. - SAN FRANCISCO, CA 94133	94-2829914	501(C)(3)	380,000.	0.			HEALTH EQUITY THROUGH INTERPROFESSIONAL COLLABORATION: INTERPROFESSIONAL

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED STATES OF CARE CAMPAIGN 2776 S. ARLINGTON MILL DRIVE, SUITE ARLINGTON, VA 22206	82-2860302	501(C)(3)	10,000.	0.			PANEL SPONSORSHIP: UNITED STATES OF CARE HLTH 2022
UNIVERSAL COMMUNITY HEALTH CENTER 2801 S. SAN PEDRO STREET LOS ANGELES, CA 90011	27-0600887	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
UNIVERSITY OF CHICAGO 5801 S. ELLIS AVE. CHICAGO, IL 60637	36-2177139	501(C)(3)	130,000.	0.			EVALUATION DESIGN FOR THE CALIFORNIA SAFETY-NET POPULATION HEALTH MANAGEMENT INITIATIVE
UNIVERSITY OF SOUTHERN CALIFORNIA 3720 SOUTH FLOWER STREET, SUITE 325 LOS ANGELES, CA 90089-4019	95-1642394	501(C)(3)	370,264.	0.			USC HEALTH DATA JOURNALISM FELLOWSHIP TRAINING; SUPPORT FOR THOSE WITH LIVED
UNIVERSITY OF WASHINGTON 4333 BROOKLYN AVE NE, BOX 359472 SEATTLE, WA 98195-9472	91-6001537	WA UNI	944,956.	0.			IMPLEMENTING COLLABORATIVE CARE TO ADDRESS PERINATAL MENTAL HEALTH IN LA COUNTY
THE URBAN INSTITUTE 500 LENFANT PLAZA, SW WASHINGTON, DC 20024-2274	52-0880375	501(C)(3)	155,182.	0.			UNDERSTANDING PROGRAMS TO DEVELOP AND RETAIN BLACK HEALTH PROFESSIONALS; UNDERSTANDING TRAINING
VALLEY HEALTH ASSOCIATES 427 PAJARO STREET, SUITE 4 SALINAS, CA 93901	77-0297577	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
VAYU HEALTH 19 ALISO WAY PORTOLA VALLEY, CA 94028	84-4962463	501(C)(3)	10,000.	0.			MODERNIZING PAYMENT FOR CHRONIC DISEASE CARE
VENTURE COUNTY LULAC P.O. BOX 369 OXNARD, CA 93032	82-3304951	501(C)(3)	150,000.	0.			FOOD IS MEDICINE INITIATIVE

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VENICE FAMILY CLINIC 604 ROSE AVENUE VENICE, CA 90291	95-2769432	501(C)(3)	10,000.	0.			PHOTO STIPEND FOR VENICE FAMILY CLINIC; CONNECTED CARE ACCELERATOR DATA COLLECTING EXTENSION
VIA CARE COMMUNITY HEALTH CENTER 501 S. ATLANTIC BLVD. LOS ANGELES, CA 90022-2621	80-0699156	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
VIKASA HOLDINGS, LLC 909 S. CURSON AVE. LOS ANGELES, CA 90036	81-0754481		57,500.	0.			HEALTH CARE FOR THE HOMELESS PROGRAMS IN CALIFORNIA A LANDSCAPE
VISION Y COMPROMISO 1000 N. ALAMEDA ST. STE. # 350 LOS ANGELES, CA 90012	32-0071651	501(C)(3)	10,000.	0.			VISION Y COMPROMISO 20TH ANNUAL CONFERENCE SUPPORT
VISION STRATEGY AND INSIGHTS, INC. 5420 SYLMAR AVENUE #115 SHERMAN OAKS, CA 91401	81-0906023		152,349.	0.			MESSAGE TESTING FOR 50+ MEDI-CAL EXPANSION; PHASE 2: MESSAGE TESTING FOR 50+ MEDI-CAL EXPANSION
VISTA COMMUNITY CLINIC 1000 VALE TERRACE DRIVE VISTA, CA 92084-5218	95-2815615	501(C)(3)	65,000.	0.			CONNECTED CARE ACCELERATOR - INFRASTRUCTURE AND SPREAD; CONNECTED CARE
VO MEDICAL CENTER 1590 SOUTH IMPERIAL AVENUE EL CENTRO, CA 92243	45-4615338		10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
WAXMAN STRATEGIES 1150 CONNECTICUT AVENUE NW, SUITE 8 WASHINGTON, DC 20036	46-2453965		80,000.	0.			IMPLICATIONS OF MEDICAID CHANGES FOR PEOPLE WHO ARE INCARCERATED; HEALTH AND REENTRY PROJECT
WELLSPACE HEALTH 777 12TH STREET, SUITE 250 SACRAMENTO, CA 95814	94-1713704	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESTERN CENTER ON LAW AND POVERTY 3701 WILSHIRE BOULEVARD, SUITE 208 LOS ANGELES, CA 90010-2809	95-2897721	501(C)(3)	80,000.	0.			CORE SUPPORT FOR WESTERN CENTER ON LAW AND POVERTY 2021-2024
WESTSIDE COMMUNITY SERVICES 1153 OAK STREET SAN FRANCISCO, CA 94117	94-1164909	501(C)(3)	50,000.	0.			WESTSIDE CLUBHOUSE PILOT: SAN FRANCISCO PLANNING
WESTERN SIERRA MEDICAL CLINIC, INC. - 844 OLD TUNNEL ROAD - GRASS VALLEY, CA 95945	94-2279011	501(C)(3)	10,000.	0.			PARTICIPATION IN THE TELEHEALTH IMPROVEMENT COMMUNITY
WINTERS HEALTHCARE FOUNDATION INC. 172 E. GRANT AVE. WINTERS, CA 95694	68-0454670	501(C)(3)	10,000.	0.			IMPROVE HEALTH OF UNDERSERVED POPULATIONS IN YOLO COUNTY
WONDER: STRATEGIES FOR GOOD LLC 101 DOWNEY STREET SAN FRANCISCO, CA 94117	84-4655710		65,315.	0.			INNOVATION FUND DIVERSITY COMMUNICATIONS IMPLEMENTATION; COMMUNICATIONS STRATEGY
WYNNE HEALTH GROUP LLC 5275 S. UNIVERSITY BLVD, SUITE 900 GREENWOOD VILLAGE, CO 80121	46-1207295		210,000.	0.			NATIONAL HEALTH POLICY UPDATES
YOUNG MEN'S CHRISTIAN ASSOCIATION OF SAN FRANCISCO - 169 STEUART STREET - SAN FRANCISCO, CA 94105	94-0997140	501(C)(3)	10,000.	0.			INNOVATION FUND ADVISORY COMMITTEE GRANT: YOUTH AND FAMILY ACCESS, AND ANNUAL CAMPAIGN FOR

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
2023 SUPPORT FOR FUNDERS FOR MATERNAL MENTAL HEALTH	1	27,000.	0.		
ADAPTING THE CA BRIDGE PROGRAM TO IMPROVE ACCESS TO REPRODUCTIVE HEALTH - PLANNING GRANT	1	30,000.	0.		
ADVANCING BLACK HEALTH EQUITY: LISTENING TO BLACK CALIFORNIANS	1	46,838.	0.		
ADVANCING THE ALIGNMENT OF STATE HOUSING ACTIVITIES WITH HEALTH CARE OPPORTUNITIES	1	10,710.	0.		
ADVANCING THE NURSE PRACTITIONER WORKFORCE IN CALIFORNIA AB890	1	16,481.	0.		

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

PART I, LINE 2:

BOTH GRANTS AND CONTRACTS FOR WORK WITH A CHARITABLE PURPOSE ARE TREATED AS

GRANTS FOR THE PURPOSE OF FORM 990. A CONTRACT OR AWARD LETTER IS ISSUED,

AS APPROPRIATE, AND INCLUDES THE PURPOSE OF THE GRANT, THE SCOPE OF WORK

(IF APPLICABLE), A SCHEDULE OF DELIVERABLES, A SCHEDULE OF PAYMENTS AND THE

REQUIREMENTS TO BE MET FOR THOSE PAYMENTS. WHEN GRANT DELIVERABLES ARE

RECEIVED, THEY ARE REVIEWED BY STAFF WHO ARE RESPONSIBLE FOR DETERMINING IF

THE DELIVERABLES MEET THE EXPECTATIONS OF THE GRANT. DELIVERABLES INCLUDE

FINANCIAL REPORTS AND/OR INVOICES WHICH ARE REVIEWED AGAINST THE ORIGINAL

Part III Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
ALMANAC QUALITY METRICS UPDATE 2022-2024	1.	5,950.	0.		
ALMANAC QUALITY METRICS: DEVELOPING AND UPDATING DATA SETS AND HIGH-LEVEL FINDINGS	1.	7,800.	0.		
AUDIO/VISUAL STORYTELLING PEOPLE EXPERIENCING HOMELESSNESS	2.	68,723.	0.		
BEHAVIORAL HEALTH IN MEDI-CAL	1.	1,000.	0.		
BLOG ARTICLES ON LA CARE/HOUSING INTEGRATION PILOTS	1.	9,082.	0.		
BUSINESS PLANNING SUPPORT FOR MULTICAMPUS POST-MASTER'S PMHP CONSORTIUM OFFICE	1.	31,950.	0.		
CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES COMMUNICATIONS: CROSS PROJECT LEARNING	1.	17,205.	0.		
CALIFORNIA HEALTH INSURERS ENROLLMENT AND MEDICAL LOSS RATIO UPDATE	1.	18,900.	0.		
CALIFORNIA HEALTH INSURERS, 2021 EDITION & RELATED PRODUCTS	1.	26,180.	0.		

Part III Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
CHCF BIRTH EQUITY ADVISORY GROUP, 2022	5.	7,500.	0.		
CHCF SUMMARY BRIEF ON THE 2022 CALIFORNIA HEALTH INFORMATION TECHNOLOGY (IT) LANDSCAPE ASSESSMENT	1.	12,353.	0.		
CO-FUNDING SUPPORT FOR A MATERNAL MENTAL HEALTH FUNDERS' CIRCLE	1.	2,500.	0.		
COMMUNICATIONS PROJECT MANAGEMENT-LISTENING TO BLACK CALIFORNIANS	1.	50,490.	0.		
COMMUNICATIONS SUPPORT FOR CALHHS BEHAVIORAL HEALTH INITIATIVES	1.	11,400.	0.		
COMMUNITY BASED ORGANIZATION (CBO) STATEWIDE INVENTORY EXPLORATORY PROJECT	1.	15,000.	0.		
COMMUNITY HEALTH WORKER & PROMOTOR WORKFORCE CBC: EDITING AND COMMUNICATIONS SUPPORT	1.	23,100.	0.		
COMMUNITY HEALTH WORKER & PROMOTORES CAPACITY BUILDING COLLABORATIVE ADMINISTRATIVE LEAD	1.	250,131.	0.		
COMMUNITY HEALTH WORKER STATE PLAN AMENDMENT TECHNICAL ASSISTANCE	1.	450.	0.		

Part III Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
COMPANY PROFILES FOR LONG TERM SERVICES AND SUPPORTS (LTSS) INNOVATION LANDSCAPE	1.	26,200.	0.		
CONSULTATION TO STATEWIDE ANALYSIS OF END-OF-LIFE METRICS AMONG MEDI-CAL DECEDENTS	2.	390.	0.		
CONSULTING SUPPORT RELATED TO BUILDING RELATIONSHIPS AND KNOWLEDGE IN LOS ANGELES	1.	3,965.	0.		
CONTINUOUS COVERAGE UNWINDING IN CALIFORNIA: FEDERAL FLEXIBILITIES AND STATE ACTIONS	1.	36,050.	0.		
EARLY AND PERIODIC SCREENING DIAGNOSIS AND TREATMENT OUTREACH AND EDUCATION TOOLKIT: CONSUMER RESEARCH	1.	188,840.	0.		
ECOSYSTEM DEVELOPMENT TO SUPPORT UNDERREPRESENTED FOUNDERS AND INVESTORS IN HEALTH TECH	1.	8,300.	0.		
ELIGIBILITY AND ENROLLMENT PROJECT MANAGEMENT: 2023	1.	7,290.	0.		
ELIGIBLE BUT NOT INSURED: TECHNICAL ASSISTANCE AND PROJECT DEVELOPMENT	1.	10,268.	0.		
EMERGING OPPORTUNITIES FOR THE ADVANCING PRIMARY CARE BODY OF WORK	1.	95,663.	0.		

Schedule I (Form 990)

Part III Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
ENHANCED CARE MANAGEMENT TRAINING RESOURCES	1.	8,160.	0.		
ENVIRONMENTAL DASHBOARDS, FY21-22	1.	10,325.	0.		
EVALUATION DESIGN FOR THE KAISER POPULATION HEALTH MANAGEMENT INITIATIVE	1.	67,600.	0.		
EVALUATION DESIGN FOR THE UC MULTI-CAMPUS PMHNP POST-MASTERS CERTIFICATE PROGRAM	1.	59,660.	0.		
EXPERT SUPPORT FOR PRIMARY CARE INVESTMENT COORDINATING GROUP	1.	16,500.	0.		
EXPLAINER: MENTAL HEALTH SERVICES ACT (MHSA) BUDGET RESERVES AND UNSPENT BALANCES	1.	15,500.	0.		
EXTERNAL REVIEW AND QUALITY ASSURANCE FOR BENCHMARKING OF PRIMARY CARE SPENDING AND CORRELATION WITH OVERALL COST AND QUALITY PERFORMANCE IN MANAGED MEDI-CAL	1.	1,400.	0.		
FACILITATION SUPPORT FOR HCAI HOSPITAL EQUITY MEASURES ADVISORY COMMITTEE	1.	21,820.	0.		
GENERALIST PALLIATIVE CARE IN PUBLIC HOSPITALS SUSTAINING THE GAINS	3.	42,475.	0.		

Schedule I (Form 990)

Part III Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
HEALTH CARE COSTS 101 ALMANAC, 2022 EDITION AND RELATED PRODUCTS	1.	38,700.	0.		
HEALTH CARE COSTS 101 AND CALIFORNIA HEALTH CARE COSTS	1.	28,313.	0.		
HEALTH INFORMATION TECHNOLOGY: POTENTIAL FUNDING SOURCES AND TECHNICAL ASSISTANCE NEEDS FOR THE DELIVERY SYSTEM	1.	45,000.	0.		
HEALTH PROFESSION ASSOCIATIONS - EXPLORATION	1.	2,700.	0.		
HOMELESSNESS QUICK REFERENCE GUIDE, 2022	1.	4,785.	0.		
IMPROVING MEDI-CAL PRESUMPTIVE ELIGIBILITY AND ADDRESSING DISCONTINUOUS ENROLLMENT: PROJECT MANAGEMENT	1.	73,440.	0.		
IMPROVING USABILITY OF MEDI-CAL ENROLLEE COMMUNICATIONS	1.	43,824.	0.		
INNOVATION FUND SUBJECT MATTER EXPERT AND MENTOR	7.	17,500.	0.		
INNOVATION LANDSCAPE: VIRTUAL TRAINING FOR HEALTH CARE WORKERS	1.	30,000.	0.		

Schedule I (Form 990)

Part III Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
LA COUNTY HEALTH CARE LEADER ROUNDTABLES - PHASE 2	1.	32,421.	0.		
LA COUNTY MANAGED CARE PLAN NEEDS ASSESSMENT SYNTHESIS	1.	24,167.	0.		
LISTENING TO BLACK CALIFORNIANS COMMUNITY COMMUNICATIONS CAMPAIGN	1.	69,000.	0.		
LISTENING TO BLACK CALIFORNIANS PHASE II: ISSUE BRIEFS	1.	18,000.	0.		
MATERNITY CARE IN CALIFORNIA 2023 UPDATE	1.	31,500.	0.		
MEDICAID AND HOMELESSNESS POLICY CONSULTANT	1.	900.	0.		
MEDI-CAL COVERAGE EXPANSION: DEVELOPING IMPACT RESEARCH	1.	8,550.	0.		
MEDI-CAL EXPLAINED: FACT SHEETS	1.	18,000.	0.		
MEDI-CAL PALLIATIVE CARE TARGETED HEALTH PLAN TECHNICAL ASSISTANCE	2.	45,719.	0.		

Part III Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
OPINION PIECE FOR LISTENING TO BLACK CALIFORNIANS	1.	30,375.	0.		
OUTREACH FOR THE DIGNITY IN PREGNANCY AND CHILDBIRTH COURSE BRIEF SUMMARY	1.	34,171.	0.		
PALLIATIVE CARE IN PUBLIC HOSPITALS SUSTAINING THE GAINS	1.	35,289.	0.		
PLANNING AND INITIAL DATA REVIEW: LISTENING TO BLACK CALIFORNIANS DATA ON OLDER ADULTS	1.	14,088.	0.		
PLANNING PHASE: BUILDING CAPACITY OF SAFETY-NET PROVIDERS TO CARE FOR OLDER ADULTS	1.	15,500.	0.		
PLANNING PROJECT: MEDI-CAL TRAINING PROGRAM FOR SACRAMENTO LEGISLATIVE STAFF AND ADVOCATES	1.	24,400.	0.		
PROJECT MANAGEMENT DATA EXCHANGE PORTFOLIO	1.	34,600.	0.		
PROJECT MANAGEMENT FOR CALIFORNIA HEALTH CARE ALMANAC	1.	10,230.	0.		
PROJECT MANAGEMENT FOR LISTENING TO BLACK CALIFORNIANS PHASE II	1.	24,500.	0.		

Part III Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
PROJECT MANAGEMENT SUPPORT	1.	21,200.	0.		
PSYCHIATRIC MENTAL HEALTH NURSE PRACTITIONER VIDEO	1.	23,662.	0.		
REMOTE PATIENT MONITORING PROJECT EXPLORATION AND DEVELOPMENT	1.	7,900.	0.		
RESEARCH & TECHNICAL ASSISTANCE: FINAL PUBLIC CHARGE RULE PHASE 2	1.	3,975.	0.		
SCOPING AND FRAMEWORK FOR AN EVALUATION OF CONTRACT-MODE IN-HOME SUPPORTIVE SERVICES	1.	1,875.	0.		
STRATEGIC AND SUSTAINABILITY PLANNING SUPPORT FOR CALIFORNIANS FOR THE ADVANCEMENT OF MIDWIFERY (CAM)	1.	1,700.	0.		
STRATEGY, PLANNING, AND PROJECT MANAGEMENT SUPPORT FOR PALLIATIVE CARE BODY OF WORK	1.	7,000.	0.		
STREAMLINING REVENUE CYCLE MANAGEMENT FOR ESSENTIAL COMMUNITY PROVIDERS AND COMMUNITY SUPPORT PROVIDERS	1.	88,400.	0.		
SUBJECT MATTER EXPERT STIPEND - CALIFORNIA MEDI-CAL PHMI EVALUATION DESIGN	3.	7,500.	0.		

Schedule I (Form 990)

Part III Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SUPPORT FOR CHCF SEPT 2021 PRM OFFSITE AND FIELD LEARNING ON LEARNING COLLABORATIVES	1.	1,819.	0.		
SUPPORT FOR WPC COUNTIES NAVIGATING THE TRANSITION TO CALAIM	1.	177,306.	0.		
SUPPORTING A WRITER FOR A CHAPTER ON PHILANTHROPY IN THE BOOK "PRACTICAL PLAYBOOK III: WORKING TOGETHER TO IMPROVE MATERNAL HEALTH"	1.	6,505.	0.		
SUPPORTING INDEPENDENT LIVING IN THE COMMUNITY: INNOVATION LANDSCAPE	1.	7,750.	0.		
TELEHEALTH EXPERIENCE INTERVIEWS PUBLICATION WRITING	1.	16,500.	0.		
TELEHEALTH INITIATIVE PROJECT MANAGEMENT	1.	2,700.	0.		
TELEHEALTH VIDEO SERIES	1.	32,862.	0.		
THE WEALTH OF CA HOSPITALS AND HEALTH SYSTEMS: AN EXAMINATION OF AUDITED FINANCIAL STATEMENTS	2.	26,230.	0.		
UNDERSTANDING AUDIENCE NEEDS FOR HEALTH CARE COST TRANSPARENCY DATA	1.	46,850.	0.		

Schedule I (Form 990)

Part IV Supplemental Information

BUDGET FOR THE GRANT TO ENSURE THAT FUNDS ARE EXPENDED FOR THE INTENDED

PURPOSES.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: ALAMEDA HEALTH SYSTEM FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: CONNECTED CARE ACCELERATOR DATA

COLLECTING EXTENSION; CONNECTED CARE ACCELERATOR EQUITY COLLABORATIVE;

EVALUATING AND SUPPORTING SUSTAINABILITY/SPREAD OF

BELOVED BIRTH BLACK CENTERING (BBBC)

NAME OF ORGANIZATION OR GOVERNMENT: AMERICAN INSTITUTES FOR RESEARCH

(H) PURPOSE OF GRANT OR ASSISTANCE: EVALUATION OF THE ADVANCING

BEHAVIORAL HEALTH INTEGRATION AND EQUITY IN PRIMARY CARE LEARNING

COLLABORATIVE

NAME OF ORGANIZATION OR GOVERNMENT: ASIAN HEALTH SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR THE CA AANHPI HEALTH

EQUITY CONVENINGS; 2022 ANNUAL GALA; CONNECTED CARE ACCELERATOR EQUITY

COLLABORATIVE

NAME OF ORGANIZATION OR GOVERNMENT: THE ASPEN INSTITUTE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: ANNUAL ASPEN IDEAS FESTIVAL: HEALTH,

2023; LATINOS AND SOCIETY ADVANCING ECONOMIC MOBILITY CONTENT AND

CREATIVITY EVENT

NAME OF ORGANIZATION OR GOVERNMENT: A THOUSAND JOYS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: INNOVATION FUND ADVISORY COMMITTEE

GRANT, TO SUPPORT ITS WORK TO MAKE LEARNING AND WORKING ENVIRONMENTS MORE

Part IV Supplemental Information

TRAUMA-INFORMED/RESILIENCE-FOCUSED

NAME OF ORGANIZATION OR GOVERNMENT: BAILIT HEALTH PURCHASING, LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: PUBLISHING PRIMARY CARE SPENDING IN

CALIFORNIA'S COMMERCIAL MARKET; ISSUE BRIEF: COST AND UTILIZATION IMPACTS

OF IN-HOME SUPPORTIVE SERVICES CONTRACT MODE AT HEALTH PLAN OF SAN MATEO

NAME OF ORGANIZATION OR GOVERNMENT: BLUEPATH HEALTH, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORTING CALIFORNIA'S TELEHEALTH

COALITIONS 2022; SUPPORTING CALIFORNIA'S TELEHEALTH COALITIONS 2023-2025;

CONSENT MANAGEMENT PROCESSES TO SUPPORT IMPLEMENTATION OF CALIFORNIA'S

DATA EXCHANGE FRAMEWORK

NAME OF ORGANIZATION OR GOVERNMENT: CALIFORNIA PRIMARY CARE ASSOCIATION

(H) PURPOSE OF GRANT OR ASSISTANCE: ANNUAL CONFERENCE, 2022; CONTINUED

SUPPORT FOR THE DESIGN OF APM 2.0 AND CURRICULUM DEVELOPMENT; ALTERNATIVE

PAYMENT METHODOLOGY IMPLEMENTATION SUPPORT CONTINUATION

NAME OF ORGANIZATION OR GOVERNMENT:

CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY

(H) PURPOSE OF GRANT OR ASSISTANCE: CALIFORNIA MENTAL HEALTH SERVICES

AUTHORITY (CALMHSA) INTEROPERABILITY PLANNING COLLABORATIVE

NAME OF ORGANIZATION OR GOVERNMENT: CALIFORNIA BREASTFEEDING COALITION

(H) PURPOSE OF GRANT OR ASSISTANCE: EDUCATION CAMPAIGN ON INFORMAL MILK

SHARING DURING EMERGENCIES; 2023 CALIFORNIA BREASTFEEDING COALITION

SUMMIT

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

CALIFORNIA ASSOCIATION FOR NURSE PRACTITIONERS

(H) PURPOSE OF GRANT OR ASSISTANCE: CALIFORNIA ASSOCIATION FOR NURSE

PRACTITIONERS CONFERENCE, 2023; ADVANCING THE ROLE OF THE CALIFORNIA

ASSOCIATION FOR NURSE PRACTITIONERS; LEGAL SUPPORT: AB 890 REGULATIONS

NAME OF ORGANIZATION OR GOVERNMENT:

CALIFORNIA COLLABORATIVE FOR LONG TERM SERVICES AND SUPPORTS

(H) PURPOSE OF GRANT OR ASSISTANCE: ADDRESSING CHALLENGES AND SHARING

BEST PRACTICES FOR LONG-TERM SERVICES AND SUPPORTS PROVIDERS UNDER CALAIM

NAME OF ORGANIZATION OR GOVERNMENT:

CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: CALIFORNIA HIT LANDSCAPE ASSESSMENT;

CALIFORNIA HEALTH INFORMATION TECHNOLOGY (HIT) LANDSCAPE ASSESSMENT-PHASE

2; FINALIZING ALTERNATIVE PAYMENT METHODOLOGY FOR CALIFORNIA FEDERALLY

QUALIFIED HEALTH CENTERS; DEVELOPING MOU TEMPLATES FOR CROSS SECTOR

COLLABORATION IN THE NEW MANAGED CARE CONTRACT; PROVIDING TECHNICAL

ASSISTANCE TO DHCS TO DEVELOP A COMPREHENSIVE BIRTHING CARE PATHWAY FOR

MEDI-CAL (PHASE 1)

NAME OF ORGANIZATION OR GOVERNMENT:

THE CALIFORNIA HEALTH CARE SAFETY-NET INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: CALIFORNIA ASSOCIATION OF PUBLIC

HOSPITALS/THE SAFETY NET INSTITUTE ANNUAL CONFERENCE, 2022; CONTINUED

SUPPORT FOR PUBLIC HEALTH CARE SYSTEMS: SECURING PRIME AND QIP; ADVANCING

RACIAL EQUITY AWARENESS & ACTION IN CALIFORNIA'S PUBLIC HEALTH CARE

SYSTEM

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

CALIFORNIA HEALTH FOUNDATION AND TRUST

(H) PURPOSE OF GRANT OR ASSISTANCE: CHERISHED FUTURES: SUPPORTING BIRTH

EQUITY IN LA COUNTY VIA HOSPITAL QUALITY IMPROVEMENT AND COMMUNITY

ENGAGEMENT

NAME OF ORGANIZATION OR GOVERNMENT:

CALIFORNIA INSTITUTE FOR BEHAVIORAL HEALTH SOLUTIONS

(H) PURPOSE OF GRANT OR ASSISTANCE: EQUITY & ENGAGEMENT IN SPECIALTY

BEHAVIORAL TELEHEALTH; STIPENDS FOR PARTICIPANT CLINICS & COMMUNITY BASED

ORGANIZATIONS

NAME OF ORGANIZATION OR GOVERNMENT: CALIFORNIA NURSE-MIDWIVES FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORTING PARTICIPATION IN THE

INSTITUTE FOR MEDICAID INNOVATION'S NATIONAL MIDWIFERY COLLABORATIVE

NAME OF ORGANIZATION OR GOVERNMENT: CALIFORNIA PAN-ETHNIC HEALTH NETWORK

(H) PURPOSE OF GRANT OR ASSISTANCE: CPEHN 30TH ANNIVERSARY VOICE FOR

CHANGE CONFERENCE SPONSORSHIP; ADVANCING MENTAL HEALTH EQUITY IN

MEDI-CAL; ADVANCING EQUITY, HEALTH AND SAFETY IN LOCAL COMMUNITIES;

HEALTH EQUITY POLICY LANDSCAPE ASSESSMENT PROJECT; COMMUNITY HEALTH

WORKER AND PROMOTORES POLICY COALITION; SUBJECT MATTER EXPERT STIPEND -

CALIFORNIA MEDI-CAL PHMI EVALUATION DESIGN; ADVANCING MENTAL HEALTH

EQUITY IN MEDI-CAL; RENEWAL; PRIMARY CARE INVESTMENT COORDINATING GROUP

NAME OF ORGANIZATION OR GOVERNMENT:

CAMDEN COALITION OF HEALTHCARE PROVIDERS

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: PUTTING CARE AT THE CENTER 2022

CONFERENCE SPONSORSHIP (AND PRE-CONFERENCE CONVENING); PILOTING COMPLEX

CARE CURRICULUM; NEEDS ASSESSMENT AND PLANNING BUILDING SKILLS FOR

ENHANCED CARE MANAGEMENT PROVIDERS

NAME OF ORGANIZATION OR GOVERNMENT: CAPITAL & MAIN

(H) PURPOSE OF GRANT OR ASSISTANCE: REPORTING PROJECT ON FARMWORKER

HEALTH ACCESS (PLANNING GRANT); FARMWORKER HEALTH ACCESS REPORTING SERIES

NAME OF ORGANIZATION OR GOVERNMENT: THE CENTER FOR COMMON CONCERNS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: HOMEBASE ENHANCING USE OF MEDI-CAL

FUNDING TO SUPPORT CROSS-SECTOR COLLABORATION; HOMELESS AND HOUSING

INCENTIVE PROGRAM TECHNICAL ASSISTANCE

NAME OF ORGANIZATION OR GOVERNMENT: CHANGE MATRIX LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORTING EVALUATOR DIVERSIFICATION

AND THE PRACTICE OF CULTURALLY RESPONSIVE AND EQUITABLE EVALUATION

NAME OF ORGANIZATION OR GOVERNMENT: CHAPMAN CONSULTING, LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: MEDI-CAL EXPLAINED: ALTERNATIVE

PAYMENT MODELS AND CLINICS; EXPLORING MANAGED LONG-TERM SERVICES AND

SUPPORTS IN CALAIM; LISTENING SESSIONS TO SCOPE INSTITUTIONAL LONG-TERM

CARE ACADEMY - PREPARING MEDI-CAL MANAGED CARE PLANS FOR CARVE-IN;

MEDI-CAL EXPLAINED: BUDGET TRENDS AND DATA ON COST DRIVERS

NAME OF ORGANIZATION OR GOVERNMENT:

COALITION FOR COMPASSIONATE CARE OF CALIFORNIA

(H) PURPOSE OF GRANT OR ASSISTANCE: PILOTING THE USE OF CONSENSUS

Part IV Supplemental Information

STANDARDS IN PAYER-PROVIDER CONTRACTS; CONFERENCE SUPPORT: COALITION FOR

COMPASSIONATE CARE OF CALIFORNIA ANNUAL SUMMIT 2023; ESTABLISHING

PARTNERSHIPS AND STANDARDS TO SUPPORT POLST QUALITY, ACCESSIBILITY, AND

SUSTAINABILITY; MEDI-CAL PALLIATIVE CARE SUSTAINABILITY AND GROWTH -

HEALTH PLAN LEARNING COMMUNITY AND PLAN/PROVIDER COLLABORATION ACTIVITIES

NAME OF ORGANIZATION OR GOVERNMENT:

THE COLLEGE FOR BEHAVIORAL HEALTH LEADERSHIP

(H) PURPOSE OF GRANT OR ASSISTANCE: THE COLLEGE FOR BEHAVIORAL HEALTH

LEADERSHIP EQUITY-GROUNDED LEADERSHIP FELLOW PROGRAM

NAME OF ORGANIZATION OR GOVERNMENT:

COMMUNITY CLINIC ASSOCIATION OF LOS ANGELES COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY CLINIC ASSOCIATION OF LOS

ANGELES COUNTYS (CCALAC) HEALTH IT SUMMIT, 2022; 22ND ANNUAL SOUTHERN

CALIFORNIA HEALTH CARE SYMPOSIUM AND POLICY CAF SPONSORSHIPS

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY HEALTH SYSTEMS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: CONNECTED CARE ACCELERATOR -

INFRASTRUCTURE AND SPREAD; PARTICIPATION IN THE TELEHEALTH IMPROVEMENT

COMMUNITY

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY INITIATIVES

(H) PURPOSE OF GRANT OR ASSISTANCE: PRE-HEALTH DREAMERS: ACCESS TO

HIGHER EDUCATION AND HEALTH CARE SPACES FOR UNDOCUMENTED COMMUNITIES IN

CALIFORNIA

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNICARE HEALTH CENTERS

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: COMPREHENSIVE AND HIGH QUALITY

HEALTH CARE; CONNECTED CARE ACCELERATOR DATA COLLECTION EXTENSION

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY CATALYST INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: CO-CREATING PATIENT-CENTERED

EXPERIENCE MEASURES FOR HOME AND COMMUNITY-BASED SERVICES WITH DUALY

ELIGIBLE ENROLLEES FROM COMMUNITIES OF COLOR

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY PARTNERS

(H) PURPOSE OF GRANT OR ASSISTANCE: IDREAM FOR RACIAL HEALTH EQUITY

TABLE SPONSOR, 2023.; PILOT WITH MATERNAL MENTAL HEALTH NOW (MMHN) TO

IMPROVE LOS ANGELES COUNTY'S PERINATAL MENTAL HEALTH COMMUNITY RESOURCE

DIRECTORY; DEVELOPING SOUTHERN CALIFORNIA PARTNERS: BUILDING PROGRAM

OFFICE RESOURCES FOR THE FUTURE; PERINATAL MENTAL HEALTH TRAININGS FOR

LOS ANGELES COUNTY'S SAFETY NET PROVIDERS; IDREAM'S PILOT TO SUPPORT

BLACK MATERNAL HEALTH COMMUNITY MENTORS; IMPROVING QUALITY AND REDUCING

DISPARITIES FOR MEDI-CAL POPULATIONS IN SOUTHERN CALIFORNIA'S HIDDEN

SAFETY NET

NAME OF ORGANIZATION OR GOVERNMENT: CONTRA COSTA COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: CCHS (CONTRA COSTA HEALTH SERVICES)

EHR (ELECTRONIC HEALTH RECORD) INTEGRATION TO SCALE REMOTE PATIENT

MONITORING

NAME OF ORGANIZATION OR GOVERNMENT: CORPORATION FOR SUPPORTIVE HOUSING

(H) PURPOSE OF GRANT OR ASSISTANCE: UNPACKING THE HOUSING BUNDLE OF IN

LIEU OF SERVICES FOR POLICY AND DELIVERY SYSTEM STAKEHOLDERS

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: DIVERSITY SCIENCE

(H) PURPOSE OF GRANT OR ASSISTANCE: TECHNICAL ASSISTANCE SUPPORT TO

PROVIDERS FOR UPTAKE OF SB 464 IMPLICIT BIAS MODULES; REFRESHER

E-LEARNING COURSES FOR SB 464: DIGNITY IN PREGNANCY & CHILDBIRTH

NAME OF ORGANIZATION OR GOVERNMENT: DIVERSITY UPLIFTS INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: BLACK DOULAS DATA PROJECT-- SOUTHERN

CALIFORNIA; CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICE TECHNICAL

ASSISTANCE FOR DOULA STAKEHOLDERS; CONTINUATION DHCS TECHNICAL ASSISTANCE

STIPENDS FOR DOULA STAKEHOLDERS

NAME OF ORGANIZATION OR GOVERNMENT: EISNER HEALTH

(H) PURPOSE OF GRANT OR ASSISTANCE: CONNECTED CARE ACCELERATOR DATA

COLLECTING EXTENSION; PARTICIPATION IN THE TELEHEALTH IMPROVEMENT

COMMUNITY

NAME OF ORGANIZATION OR GOVERNMENT:

EL SOL NEIGHBORHOOD EDUCATIONAL CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: REPORT ON THE EL SOL COMMUNITY

HEALTH WORKER (CHW) AND PROMOTOR TRAINING MODEL; INLAND COLLABORATIVE

CHW/P CAPACITY BUILDING INITIATIVE

NAME OF ORGANIZATION OR GOVERNMENT: EVITARUS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: THE EXPERIENCES OF BLACK

CALIFORNIANS AND RACISM IN THE HEALTH SYSTEM; PLANNING GRANT: CALAIM

ENROLLEE LISTENING; LISTENING TO BLACK CALIFORNIANS PHASE II: ANALYSIS,

PUBLICATION REVIEW, & DISSEMINATION; BIRTHRIGHT PODCAST FOCUS GROUPS:

PLANNING & RESEARCH IN CONNECTION WITH BLACK BIRTHING PEOPLE AND

Part IV Supplemental Information

PERINATAL HEALTH PROVIDERS

NAME OF ORGANIZATION OR GOVERNMENT: FUSE CORPS

(H) PURPOSE OF GRANT OR ASSISTANCE: ONE-YEAR SUPPORT FOR A FUSE

FELLOWSHIP FOCUSED ON HEALTH CARE FINANCIAL HARM IN LOS ANGELES COUNTY

NAME OF ORGANIZATION OR GOVERNMENT: THE GEORGE WASHINGTON UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY BENEFIT IN CALIFORNIA

HOSPITALS; INCORPORATING EQUITY CONSIDERATIONS INTO THE HEALTH WORKFORCE

FUNDING PROCESS

NAME OF ORGANIZATION OR GOVERNMENT:

PRESIDENT AND FELLOWS OF HARVARD COLLEGE

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY HEALTH WORKER STATE PLAN

AMENDMENT TECHNICAL ASSISTANCE; PLANNING GRANT: DETERMINING A PROJECT

APPROACH TO QUANTIFY PRIMARY CARE INVESTMENT IMPACT

NAME OF ORGANIZATION OR GOVERNMENT: HEALTH ACCESS FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: HEALTH ACCESS 35TH ANNIVERSARY

EVENT; PRIMARY CARE INVESTMENT COORDINATING GROUP - HEALTH ACCESS;

PRIMARY CARE INVESTMENT COORDINATING GROUP

NAME OF ORGANIZATION OR GOVERNMENT: HEALTHBEGINS, LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: PROGRAM SUPPORT FOR THE PATH TO

PATH: HEALTHBEGINS; COMMUNITY BASED ORGANIZATION-MANAGED CARE PARTNERSHIP

INTENSIVES IN THE FUTURE OF MEDICAL

NAME OF ORGANIZATION OR GOVERNMENT: HEALTH CARE LA, IPA

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: HEALTH CARE LOS ANGELES, INDEPENDENT

PHYSICIAN ASSOCIATION: DATA EXCHANGE PILOT TO SUPPORT PEOPLE EXPERIENCING

HOMELESSNESS

NAME OF ORGANIZATION OR GOVERNMENT: HEALTH LEADS INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: CHW/PROMOTOR CAPACITY BUILDING

COLLABORATIVE; HEALTH LEADS COMMUNITY REFERRALS FOR HEALTH EQUITY

NAME OF ORGANIZATION OR GOVERNMENT: HEALTH MANAGEMENT ASSOCIATES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENTAL DATA ANALYSIS OF FQHC

CONTRIBUTION TO MEDI-CAL AMBULATORY SERVICES; IMPROVING ACCESS FOR

MEDI-CAL ENROLLEES; RESEARCH SUPPORT; CONTINUED RESEARCH: BENCHMARKING OF

PRIMARY CARE SPENDING AND CORRELATION WITH OVERALL COST AND QUALITY

PERFORMANCE IN MANAGED MEDI-CAL; SAFETY NET MERGERS & ACQUISITIONS ISSUE

BRIEF; PLANNING GRANT: LEARNING FROM EARLY ADOPTERS OF COMMUNITY SUPPORTS

NAME OF ORGANIZATION OR GOVERNMENT: HEALTH RESOURCES IN ACTION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: NATIONAL ASSOCIATION OF COMMUNITY

HEALTH WORKERS UNITY CONFERENCE & ANNUAL MEETING, 2022; NATIONAL

ASSOCIATION OF COMMUNITY HEALTH WORKERS UNITY CONFERENCE & ANNUAL

MEETING, 2023

NAME OF ORGANIZATION OR GOVERNMENT: HURST BROOKS ESPINOSA, LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: STATE LEGISLATIVE HEARINGS COVERAGE;

UPDATE MEMO ON STATE POLICIES TO ADDRESS HOMELESSNESS; SACRAMENTO POLICY

AND POLITICAL TRACKING

NAME OF ORGANIZATION OR GOVERNMENT: INDEPENDENT ARTS & MEDIA

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: NOVEMBER IN MY SOUL: PODCASTS ON MENTAL ILLNESS IN CALIFORNIA; GENERAL OPERATING SUPPORT FOR EL TIMPANO

NAME OF ORGANIZATION OR GOVERNMENT: INFO LINE OF SAN DIEGO COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY INFO EXCHANGE (CIE)-211 SAN DIEGO CALIFORNIA FORUM, 2022; PARTNERSHIPS FOR ACTION PILOT; CIN PARTNER STIPEND - PHASE 8

NAME OF ORGANIZATION OR GOVERNMENT: INSTITUTE FOR MEDICAID INNOVATION INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: EVALUATING THE ADOPTION OF THE MATERNAL MENTAL HEALTH LAW (CA AB 2193) PROVISION BY MEDI-CAL MANAGED CARE PLANS

NAME OF ORGANIZATION OR GOVERNMENT: INSURE THE UNINSURED PROJECT

(H) PURPOSE OF GRANT OR ASSISTANCE: INSURE THE UNINSURED PROJECT (ITUP) GENERAL OPERATING SUPPORT 2023-2025; BROADBAND ROADMAP FOR THE HEALTH CARE SAFETY NET

NAME OF ORGANIZATION OR GOVERNMENT: INTEGRATED HEALTHCARE ASSOCIATION

(H) PURPOSE OF GRANT OR ASSISTANCE: PRIMARY CARE INVESTMENT COORDINATING GROUP - IHA; REFINING ANALYSIS OF PRIMARY CARE SPENDING IN CALIFORNIA'S COMMERCIAL MARKET; PRIMARY CARE INVESTMENT COORDINATING GROUP; CA PROVIDER AFFILIATION MAPPING; SYMPHONY/AMP DATA FEASIBILITY ANALYSIS

NAME OF ORGANIZATION OR GOVERNMENT: INTREPID ASCENT LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: DATA EXCHANGE EXPLAINER SERIES FOR STAKEHOLDER ADVISORY GROUP; CASE STUDY: DATA EXCHANGE IN SANTA CRUZ

Part IV Supplemental Information

COUNTY; HEALTH INFORMATION TECHNOLOGY (HIT) LANDSCAPE ASSESSMENT: DIGEST

AND ALMANAC REPORTS

NAME OF ORGANIZATION OR GOVERNMENT:

JSI RESEARCH & TRAINING INSTITUTE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: DELTA CENTER CALIFORNIA LEARNING LAB

TEAMS; ISSUE BRIEF: CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINICS IN

CALIFORNIA; THE PATH TO PATH

NAME OF ORGANIZATION OR GOVERNMENT:

KAISER FOUNDATION HEALTH PLAN OF WASHINGTON

(H) PURPOSE OF GRANT OR ASSISTANCE: DOCENT-COMMONSPIRIT BIRTH EQUITY

EVALUATION; DELTA CENTER CALIFORNIA EVALUATION; CONNECTED CARE

ACCELERATOR PHASE 2: EVALUATION; CHCF TELEHEALTH LEARNING COLLABORATIVES:

CROSSOVER EVALUATION; CONSULTING FOR EVALUATION OF DIGITAL HEALTH

INTERVENTION FOR PEOPLE EXPERIENCING HOMELESSNESS

NAME OF ORGANIZATION OR GOVERNMENT: HENRY J KAISER FAMILY FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR CALIFORNIA HEALTHLINE,

2021-2022; EMPLOYER HEALTH BENEFITS SURVEY, 2022; CALIFORNIA HEALTHLINE

RENEWAL: 2023-25

NAME OF ORGANIZATION OR GOVERNMENT: LA CLINICA DE LA RAZA

(H) PURPOSE OF GRANT OR ASSISTANCE: MERGER EXPLORATION: LA CLINICA DE LA

RAZA AND TIBURCIO VASQUEZ HEALTH CENTER; 2022 ANNUAL LA CLINICA EVENT

NAME OF ORGANIZATION OR GOVERNMENT:

LEAGUE OF CALIFORNIA COMMUNITY FOUNDATIONS

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR THE CALIFORNIA DISASTER

RELIEF, RECOVERY AND RESILIENCE FUND; COMMUNITY FOUNDATION AND LOCAL

MEDIA STATEWIDE DATABASE AND MAP

NAME OF ORGANIZATION OR GOVERNMENT: LEGAL AID SOCIETY OF SAN MATEO COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTORING TRUST: PUBLIC CHARGE GUIDE

UPDATE AND DISSEMINATION; KEEPYOURBENEFITS WEBSITE AND GUIDE UPDATES AND

MAINTENANCE

NAME OF ORGANIZATION OR GOVERNMENT: LOCAL HEALTH PLANS OF CALIFORNIA

(H) PURPOSE OF GRANT OR ASSISTANCE: RUNNING ENHANCED CARE MANAGEMENT AND

COMMUNITY SUPPORTS LEARNING COLLABORATIVE; SYNTHESIS OF LOCAL PLAN CALAIM

INCENTIVE PAYMENT PROGRAM INVESTMENTS; LHPC CALAIM LEARNING COLLABORATIVE

CONTINUATION

NAME OF ORGANIZATION OR GOVERNMENT: LOS ANGELES CHRISTIAN HEALTH CENTERS

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR LOS ANGELES CHRISTIAN

HEALTH CENTERS AND URBAN ALCHEMY CROSS-SECTOR PARTNERSHIP EFFORTS

NAME OF ORGANIZATION OR GOVERNMENT: MANATT, PHELPS & PHILLIPS, LLP

(H) PURPOSE OF GRANT OR ASSISTANCE: CONNECTING PLANS TO TECH-ENABLED

BEHAVIORAL HEALTH (BH) SOLUTIONS THAT MEET THEIR NEEDS; MEDICAID

CURRICULUM CHAPTERS ON VALUE BASED CARE AND DELEGATION

NAME OF ORGANIZATION OR GOVERNMENT:

MATERNAL MENTAL HEALTH LEADERSHIP ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: MATERNAL MENTAL HEALTH LEADERSHIP

ALLIANCE: SUPPORT FOR FACT SHEETS ON MATERNAL MENTAL HEALTH; DEVELOPING A

Part IV Supplemental Information

COMPREHENSIVE APPROACH FOR SCREENING FOR PERINATAL MENTAL HEALTH

CONDITIONS; MATERNAL MENTAL HEALTH LEADERSHIP ALLIANCE (2023: FACT SHEETS

AND INFRASTRUCTURE SUPPORT)

NAME OF ORGANIZATION OR GOVERNMENT: MATHEMATICA INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: IMPROVING MEDI-CAL PRESUMPTIVE

ELIGIBILITY: CALIFORNIA PROVIDER RESEARCH AND OTHER STATES BEST

PRACTICES; USING EVIDENCE TO INFORM CALIFORNIA HEALTH WORKFORCE POLICY:

PLANNING GRANT; USING EVIDENCE TO INFORM CALIFORNIA HEALTH WORKFORCE

POLICY; CASE STUDIES OF STATE COLLABORATIONS WITH HEALTH WORKFORCE

CENTERS; HEALTH EQUITY & PRIMARY CARE: EVIDENCE AND OPPORTUNITIES FOR

ACTION; STATE-OF-THE-STATE: PRIMARY CARE AND HEALTH EQUITY, CALIFORNIA,

2022; UNDERSTANDING UNIVERSITY OF CALIFORNIA PROGRAMS IN MEDICAL

EDUCATION (PRIME); PRIMARY CARE POLICY TO ADVANCE HEALTH EQUITY:

CALIFORNIA SUMMIT 2023

NAME OF ORGANIZATION OR GOVERNMENT: MIRROR GROUP LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: CHERISHED FUTURES EVALUATION

(EXPENSE REPORTS); CHERISHED FUTURES EVALUATION; CELEBRATING PALLIATIVE

CARE PROGRESS AND CHARTING FUTURE PATHS

NAME OF ORGANIZATION OR GOVERNMENT: MT. AUBURN ASSOCIATES INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: EVALUATION OF THE MEDI-CAL COMMUNITY

BASED ORGANIZATION (CBO) PARTNERSHIP DEVELOPMENT NETWORK; DEVELOPMENTAL

EVALUATION OF PARTNERSHIPS FOR ACTION: CALIFORNIA HEALTH CARE AND

HOMELESSNESS LEARNING COLLABORATIVE

NAME OF ORGANIZATION OR GOVERNMENT: NATIONAL ACADEMY OF SCIENCES

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: NATIONAL ACADEMY OF MEDICINE'S LEADERSHIP CONSORTIUM FOR A VALUE & SCIENCE DRIVEN HEALTH SYSTEM, 2022; ASSESSING MEANINGFUL COMMUNITY ENGAGEMENT; SUPPORTING NATIONAL POLICY ON PRIMARY CARE IMPROVEMENT AND INVESTMENT; ARTIFICIAL INTELLIGENCE CODE OF CONDUCT

NAME OF ORGANIZATION OR GOVERNMENT: NATIONAL HEALTH CARE FOR THE HOMELESS COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: NATIONAL HEALTH CARE FOR THE HOMELESS COUNCIL CONSUMER SUMMIT, 2022; LA RECUPERATIVE CARE LEARNING NETWORK FORUM; NATIONAL HEALTH CARE FOR THE HOMELESS CONFERENCE, 2023; SUPPORTING THE NATIONAL INSTITUTE FOR MEDICAL RESPITE CARE'S CALIFORNIA FOCUS

NAME OF ORGANIZATION OR GOVERNMENT: NATIONAL HEALTH LAW PROGRAM

(H) PURPOSE OF GRANT OR ASSISTANCE: CALIFORNIA COVERAGE FOR DOULA CARE LISTSERV; SUPPORT FOR CALAIM BEHAVIORAL HEALTH WORK; GATHERING EARLY LESSONS FROM CALIFORNIA'S COMMUNITY DOULA EFFORTS; SUPPORT FOR CALIFORNIA BEHAVIORAL HEALTH WORK; IMPROVING MEDI-CAL ELIGIBILITY AND ENROLLMENT

NAME OF ORGANIZATION OR GOVERNMENT: NATIONAL COMMITTEE FOR QUALITY ASSURANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: ADVANCING STANDARDIZED HEALTH EQUITY QUALITY MEASUREMENT; BEHAVIORAL HEALTH QUALITY FRAMEWORK (PHASE 2): ROADMAP FOR CALIFORNIA; PLANNING GRANT: EXPLORING IMPLEMENTATION SUPPORT TO MEDI-CAL MANAGED CARE PLANS RE: DEPRESSION HEDIS E-MEASURES (GENERAL ADULT & MATERNITY-SPECIFIC)

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: NATIONAL OPINION RESEARCH CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TELEHEALTH EXPERIENCE INTERVIEWS;

ADDITIONAL ANALYSIS: CALIFORNIA HEALTH POLICY SURVEY; 2023 CHCF STATEWIDE

HEALTH POLICY SURVEY

NAME OF ORGANIZATION OR GOVERNMENT: NEIGHBORHOOD HEALTHCARE

(H) PURPOSE OF GRANT OR ASSISTANCE: CONNECTED CARE ACCELERATOR DATA

COLLECTING EXTENSION; CONNECTED CARE ACCELERATOR EQUITY COLLABORATIVE

NAME OF ORGANIZATION OR GOVERNMENT: NORTHERN CALIFORNIA GRANTMAKERS

(H) PURPOSE OF GRANT OR ASSISTANCE: JANUARY 2023-DECEMBER 2024

MEMBERSHIP; NORTHERN CALIFORNIA GRANTMAKERS' ANNUAL CONFERENCE

SPONSORSHIP

NAME OF ORGANIZATION OR GOVERNMENT:

OLIVE VIEW-UCLA EDUCATION AND RESEARCH INSTITUTE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GENERALIST PALLIATIVE CARE IN PUBLIC

HEALTH SYSTEMS (OLIVE VIEW-UCLA); FORMATIVE EVALUATION OF LA COUNTY

SOCIAL DETERMINANTS OF HEALTH INTEGRATION PROJECT; CONNECTED CARE

ACCELERATOR DATA COLLECTING EXTENSION

NAME OF ORGANIZATION OR GOVERNMENT: OXS CONSULTING, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: HEALTH CAREERS OPPORTUNITY PROGRAM

(HCOP) PLANNING SUPPORT FOR HEALTH CARE ACCESS AND INFORMATION (HCAI)

NAME OF ORGANIZATION OR GOVERNMENT: PURCHASER BUSINESS GROUP ON HEALTH

(H) PURPOSE OF GRANT OR ASSISTANCE: CALIFORNIA QUALITY COLLABORATIVE:

BUILDING ACTION FOR HEALTH EQUITY; PRIMARY CARE INVESTMENT COORDINATING

Part IV Supplemental Information

GROUP - PBGH; PURCHASER BUSINESS GROUP ON HEALTH (PBFH) & MATERNITY CARE:

CONVENING THE MATERNITY COORDINATING GROUP AND SUPPORTING MIDWIFERY

EXPANSION; ADVANCED PRIMARY CARE MEASURES SET PILOT: DESIGN SUPPORT AND

FEASIBILITY TESTING; PROJECT PLANNING FOR IMPROVING QUALITY AND REDUCING

DISPARITIES FOR MEDI-CAL POPULATIONS IN SOUTHERN CALIFORNIA'S HIDDEN

SAFETY NET; CALIFORNIA BIRTH CENTERS MAPPING PROJECT; ENGAGING VOLUNTARY

SUBMITTERS TO CALIFORNIA'S HEALTH PAYMENTS DATABASE (HPD); PRIMARY CARE

INVESTMENT COORDINATING GROUP; ISSUE BRIEF: ASSESSING TELEHEALTH PATIENT

EXPERIENCE; ADVANCING EQUITY THROUGH PRIMARY CARE PAYMENT MODEL DESIGN

NAME OF ORGANIZATION OR GOVERNMENT:

PALLIATIVE CARE QUALITY COLLABORATIVE NFP

(H) PURPOSE OF GRANT OR ASSISTANCE: INAUGURAL PALLIATIVE CARE QUALITY

COLLABORATIVE QUALITY MATTERS CONFERENCE, 2022; PALLIATIVE CARE QUALITY

COLLABORATIVE: EHR INTEGRATION PLAYBOOK TO SUPPORT PUBLIC HOSPITAL

TRANSITION; PALLIATIVE CARE QUALITY COLLABORATIVE: PLANNING AND

STAKEHOLDER ENGAGEMENT ON IMPROVING COLLECTION AND USE OF EQUITY-FOCUSED

DATA

NAME OF ORGANIZATION OR GOVERNMENT: PASCHAL ROTH PUBLIC AFFAIRS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNICATIONS SUPPORT FOR STATE

POLICY PRIORITIES; COMMUNICATIONS CAMPAIGN FOR PRIMARY CARE NOW;

COMMUNICATIONS SUPPORT FOR STATE HEALTH POLICY PRIORITIES (2022/2023)

NAME OF ORGANIZATION OR GOVERNMENT: PEACH TREE HEALTHCARE

(H) PURPOSE OF GRANT OR ASSISTANCE: PHOTO STIPEND FOR PEACH TREE

HEALTHCARE; CONNECTED CARE ACCELERATOR EQUITY COLLABORATIVE

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

PERINATAL ADVISORY COUNCIL: LEADERSHIP, ADVOCACY, AND CONSULTATION

(H) PURPOSE OF GRANT OR ASSISTANCE: "QUALITY OF LIFE FOR FAMILIES XXV:

ENVIRONMENTAL AND SOCIAL FACTORS IMPACTING PERINATAL AND NEONATAL

OUTCOMES" CONFERENCE

NAME OF ORGANIZATION OR GOVERNMENT: PETALUMA HEALTH CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: CONNECTED CARE ACCELERATOR DATA

COLLECTION EXTENSION; PARTICIPATION IN THE TELEHEALTH IMPROVEMENT

COMMUNITY

NAME OF ORGANIZATION OR GOVERNMENT: PLAYERS PHILANTHROPY FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR PAUSE - INNOVATIVE

SUPPORTS FOR PEOPLE OF COLOR THROUGH SERIOUS ILLNESS, END OF LIFE, AND

GRIEF; REPORTING ON HEALTH CARE INSIDE CALIFORNIA PRISONS AND AFTER

RELEASE

NAME OF ORGANIZATION OR GOVERNMENT: THE PRAXIS PROJECT

(H) PURPOSE OF GRANT OR ASSISTANCE: PERINATAL WORKFORCE EDUCATION

PROJECT; DEVELOPING A NATIONAL BIRTH EQUITY QUALITY FRAMEWORK: PHASE I

NAME OF ORGANIZATION OR GOVERNMENT:

PROJECT HOPE - THE PEOPLE-TO-PEOPLE HEALTH FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: HEALTH AFFAIRS PERINATAL MENTAL

HEALTH FULL THEME ISSUE; HEALTH AFFAIRS THEMATIC ISSUE: RESEARCH AND

POLICY INSIGHTS ON HOUSING AND HEALTH

NAME OF ORGANIZATION OR GOVERNMENT: PUBLIC HEALTH INSTITUTE

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: THE CALIFORNIA ALLIANCE OF SCHOOLS
 AND PROGRAMS OF PUBLIC HEALTH; SALUD CON TECH DIGITAL HEALTH EQUITY
 CONFERENCE; SUPPORTING CALIFORNIA'S TELEHEALTH POLICY COALITION, 2022;
 SPREADING ALAMEDA COUNTY CARE ALLIANCE MODEL FOR SUPPORTING BLACK
 CALIFORNIANS WITH SERIOUS ILLNESS; SUPPORTING CALIFORNIA'S TELEHEALTH
 COALITIONS 2023-2024

NAME OF ORGANIZATION OR GOVERNMENT: PUBLIC POLICY INSTITUTE OF CALIFORNIA
 (H) PURPOSE OF GRANT OR ASSISTANCE: PUBLIC POLICY INSTITUTE OF
 CALIFORNIA SPEAKER SERIES ON CALIFORNIAS FUTURE (2023); ASSESSING AND
 IMPROVING THE IDENTIFICATION OF PEOPLE EXPERIENCING HOMELESSNESS IN
 EMERGENCY DEPARTMENT AND PATIENT DISCHARGE DATA

NAME OF ORGANIZATION OR GOVERNMENT: RACE FOR EQUITY LLC
 (H) PURPOSE OF GRANT OR ASSISTANCE: TECHNICAL ASSISTANCE/FACILITATOR
 SUPPORT FOR DEPARTMENT OF HEALTH CARE SERVICES (DHCS) DOULA STAKEHOLDER
 WORKGROUP; CONTINUATION OF TECHNICAL ASSISTANCE/FACILITATOR SUPPORT FOR
 DEPARTMENT OF HEALTH CARE SERVICES (DHCS) DOULA STAKEHOLDER WORKGROUP

NAME OF ORGANIZATION OR GOVERNMENT: RALLY
 (H) PURPOSE OF GRANT OR ASSISTANCE: LISTENING TO BLACK CALIFORNIANS
 DECISIONMAKERS COMMUNICATIONS CAMPAIGN; COMMUNITY HEALTH WORKER &
 PROMOTOR WORKFORCE CAPACITY-BUILDING COLLABORATIVE - PHASE 1

NAME OF ORGANIZATION OR GOVERNMENT: RAND CORPORATION
 (H) PURPOSE OF GRANT OR ASSISTANCE: MEDI-CAL PAYMENT REFORM AND
 BEHAVIORAL HEALTH CARE; PRIMARY CARE INVESTMENT COORDINATING GROUP -
 RAND; CONNECTED CARE ACCELERATOR DATA COLLECTION EXTENSION; IMPACT OF

Part IV Supplemental Information

RACISM ON PATIENT SAFETY: THE PROVIDERS' ROLE; CARE MODALITIES IN
 BEHAVIORAL HEALTH: SECRET SHOPPER PILOT; DISSEMINATION SUPPORT FOR THE
 BIRTH-CENTERED OUTCOMES RESEARCH ENGAGEMENT IN MEDI-CAL PROJECT;
 PREPARING FOR MEDICARE MEDI-CAL PLANS UNDER CALAIM: UNDERSTANDING
 MEDICARE AND MEDI-CAL PROVIDER NETWORK OVERLAP; METHODS & TOOLS TO
 EVALUATE HEALTH EQUITY IN PATIENT SAFETY; MONITORING TELEHEALTH ACCESS IN
 THE POST PANDEMIC SAFETY NET; ACCESS TO DIFFERENT CARE MODALITIES FOR
 BEHAVIORAL HEALTH SERVICES: A SECRET SHOPPER STUDY

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF CALIFORNIA, LOS ANGELES
 (H) PURPOSE OF GRANT OR ASSISTANCE: ACTING TO REDUCE VARIATION IN
 UTILIZATION; EVALUATING CROSS-SECTOR IMPACTS OF THE DRUG MEDI-CAL
 ORGANIZED DELIVERY SYSTEM WAIVER IN LOS ANGELES COUNTY; CALIFORNIA HEALTH
 EQUITY CHALLENGE, II; CALHOPE PHASE 1 EVALUATION OF WEBSITE USE;
 STATEWIDE ANALYSIS OF END-OF-LIFE METRICS AMONG MEDI-CAL DECEDENTS;
 MEASURING DISPARITIES IN USE OF TELEHEALTH FOR CHRONIC CARE MANAGEMENT
 DUE TO COVID-19; TRACKING COVERAGE, ACCESS, AND HEALTH: CALIFORNIA
 HEALTH INTERVIEW SURVEY, 2021-2022; CALIFORNIA HEALTH INTERVIEW SURVEY,
 2023-2024

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF CALIFORNIA, IRVINE
 (H) PURPOSE OF GRANT OR ASSISTANCE: GENERALIST PALLIATIVE CARE IN PUBLIC
 HEALTH SYSTEMS (UC IRVINE); UC IRVINE HEALTH CARE FORECAST CONFERENCE,
 2023; CONNECTED CARE ACCELERATOR - INFRASTRUCTURE AND SPREAD

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF MINNESOTA
 (H) PURPOSE OF GRANT OR ASSISTANCE: ON-DEMAND DATA ANALYSIS AND LEARNING
 FROM OTHER STATES: STATE HEALTH ACCESS ASSISTANCE CENTER (SHADAC)

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: REYES SCHOLARSHIP FUND, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: EMPOWERING UNDERREPRESENTED FUTURE

LEADERS (HEALTH WORKFORCE) IN CALIFORNIA'S CENTRAL VALLEY

NAME OF ORGANIZATION OR GOVERNMENT: ROCK HEALTH FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: ROCK HEALTH SUMMIT, 2022; ROCK

HEALTH CEO SUMMIT, 2023; SUPPORTING LATINO/A/X HEALTH TECH ENTREPRENEURS

NAME OF ORGANIZATION OR GOVERNMENT: SALUD PARA LA GENTE

(H) PURPOSE OF GRANT OR ASSISTANCE: CONNECTED CARE ACCELERATOR DATA

COLLECTION EXTENSION; CONNECTED CARE ACCELERATOR EQUITY COLLABORATIVE

NAME OF ORGANIZATION OR GOVERNMENT:

SAN FRANCISCO GENERAL HOSPITAL FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: INNOVATION FUND ADVISORY COMMITTEE

GRANT: GENERAL SUPPORT; ZUCKERBERG SAN FRANCISCO GENERAL HOSPITAL AND

TRAUMA CENTER'S 150TH ANNIVERSARY

NAME OF ORGANIZATION OR GOVERNMENT: SHATTERPROOF A NON-PROFIT CORPORATION

(H) PURPOSE OF GRANT OR ASSISTANCE: ADDICTION TREATMENT LOCATER,

ASSESSMENT AND STANDARDS (ATLAS) IN THE CALIFORNIA PUBLICLY-FUNDED SYSTEM

NAME OF ORGANIZATION OR GOVERNMENT: SIGNAL KEY CONSULTING

(H) PURPOSE OF GRANT OR ASSISTANCE: PROGRAM SUPPORT PLANNING SERVICES:

DEVELOPING A TECHNICAL ASSISTANCE PROVIDERS' /QI HUB FORUM; LEARNING

NETWORK PLAN FOR CHCFS TECHNICAL ASSISTANCE PROVIDER-PARTNERS; SOURCING

ORGANIZATIONS TO LEAD EQUITY PROGRAMMING FOR TA NETWORK

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: SOCIAL GOOD FUND, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SPONSORSHIP OF THE NOCTURNISTS

PODCAST; DEVELOPING A SUSTAINABLE SOCIAL PRESCRIBING MODEL IN A COUNTY

HEALTH SYSTEM

NAME OF ORGANIZATION OR GOVERNMENT: SOUTHERN CALIFORNIA GRANTMAKERS

(H) PURPOSE OF GRANT OR ASSISTANCE: JANUARY 2023-DECEMBER 2024

MEMBERSHIP; SUPPORT FOR THE BLACK EQUITY COLLECTIVE; SOUTHERN CALIFORNIA

GRANTMAKERS POLICY CONFERENCE, 2023

NAME OF ORGANIZATION OR GOVERNMENT:

THE BOARD OF TRUSTEES OF THE LELAND STANFORD JUNIOR UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: COST SHIFTING; CONCEPTS, EVIDENCE,

AND UNANSWERED QUESTIONS; TO SUPPORT THE PRESENCE PROGRAM AT STANFORD

MEDICINE, WITH A FOCUS ON RACIAL JUSTICE AND REDUCING HEALTHCARE INEQUITY

INITIATIVES; BEME ENGAGEMENT AND EARLY OUTCOMES EVALUATION

NAME OF ORGANIZATION OR GOVERNMENT:

TECHNICAL ASSISTANCE COLLABORATIVE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: MENTAL HEALTH AND SUD EMERGENCY

RESPONSE THROUGH NEW MEDICAID AND OTHER AMERICAN RESCUE PLAN PROVISIONS

NAME OF ORGANIZATION OR GOVERNMENT: TIDES CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: LATINX HEALTH POLICY SUMMIT, 2022;

CONSUMER ADVOCATE: CORE SUPPORT FOR LATINO COALITION FOR A HEALTHY

CALIFORNIA THROUGH 2024; SUPPORT FOR THE CALIFORNIA COALITION FOR

REPRODUCTIVE FREEDOM; 25TH ANNIVERSARY EVENT; ADVANCING BEHAVIORAL HEALTH

Part IV Supplemental Information

EQUITY IN PRIMARY CARE LEARNING COLLABORATIVE; CONNECTED CARE ACCELERATOR

TRANSITION & NEXT PHASE PREPARATION; TECH HUBS 2022; PLANNING FOR A BAY

AREA HEALTHCARE AND HOUSING CONVENING SERIES; TECH HUBS 2023

NAME OF ORGANIZATION OR GOVERNMENT: TRELLA WALKER CONSULTING

(H) PURPOSE OF GRANT OR ASSISTANCE: DETERMINING A PROGRAM AND BUSINESS

STRATEGIC PLANNING DIRECTION FOR THE NATIONAL INSTITUTE FOR MEDICAL

RESPITE CARE

NAME OF ORGANIZATION OR GOVERNMENT:

UCSF BENIOFF CHILDREN'S HOSPITALS FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: INNOVATION FUND ADVISORY COMMITTEE

GRANT: SUPPORT FOR STUDY ON PSILOCYBIN THERAPY FOR THE TREATMENT OF YOUNG

ADULTS WITH TREATMENT-REFRACTORY ANOREXIA NERVOSA

NAME OF ORGANIZATION OR GOVERNMENT:

UNIVERSITY OF CALIFORNIA, SAN FRANCISCO FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: HEALTH EQUITY THROUGH

INTERPROFESSIONAL COLLABORATION: INTERPROFESSIONAL CURRICULUM ON

CULTURALLY RESPONSIVE, COMMUNITY-CENTERED HEALTHCARE FEATURING A PLACE TO

BREATHE; CA NURSE-MIDWIFERY DIVERSIFICATION FUND; WORKSHOP ON THE IMPACT

AND CONTROL OF VALLEY FEVER

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF SOUTHERN CALIFORNIA

(H) PURPOSE OF GRANT OR ASSISTANCE: USC HEALTH DATA JOURNALISM

FELLOWSHIP TRAINING; SUPPORT FOR THOSE WITH LIVED EXPERIENCE TO

PARTICIPATE IN THE UNIVERSITY OF SOUTHERN CALIFORNIA'S HOMELESS POLICY

RESEARCH INSTITUTE; ACCURATE PORTRAYAL OF ADDICTION AND MENTAL HEALTH;

Part IV Supplemental Information

WORKING WITH HOLLYWOOD TO SUPPORT BLACK BIRTH EQUITY AND PERINATAL MENTAL

HEALTH; IMPACT OF CARE MANAGER TRAINING ON COVID VACCINATION RATES IN

MEDICALLY FRAGILE ADULTS IN LOS ANGELES COUNTY; STREET MEDICINE

LANDSCAPE; USC HEALTH DATA JOURNALISM FELLOWSHIP TRAINING; PSYCHIATRIC

ADVANCED DIRECTIVES FOR INDIVIDUALS OF CHILD-BEARING AGE: EXPLORATORY

WORK; NARRATIVE CHANGE: ACCURATE DEPICTIONS OF SYSTEMIC RACISM AND ITS

EFFECT ON BLACK PATIENTS AND PROVIDERS; ETHNIC MEDIA HEALTH REPORTING

COLLABORATIVE

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF WASHINGTON

(H) PURPOSE OF GRANT OR ASSISTANCE: IMPLEMENTING COLLABORATIVE CARE TO

ADDRESS PERINATAL MENTAL HEALTH IN LA COUNTY COMMUNITY CLINICS;

IMPLEMENTING COLLABORATIVE CARE TO SUPPORT MATERNAL MENTAL HEALTH IN LA

COMMUNITY CLINICS (YEARS 2-5)

NAME OF ORGANIZATION OR GOVERNMENT: THE URBAN INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: UNDERSTANDING PROGRAMS TO DEVELOP

AND RETAIN BLACK HEALTH PROFESSIONALS; UNDERSTANDING TRAINING AND

WORKFORCE PATHWAYS TO DEVELOP AND RETAIN BLACK MATERNAL HEALTH CLINICIANS

IN CALIFORNIA; CHILLING EFFECTS AND BARRIERS TO SAFETY NET PROGRAMS FOR

ADULTS IN CALIFORNIA IMMIGRANT FAMILIES; UNEQUAL TREATMENT AT 20:

ACCELERATING PROGRESS TOWARD HEALTHCARE EQUITY

NAME OF ORGANIZATION OR GOVERNMENT: VISTA COMMUNITY CLINIC

(H) PURPOSE OF GRANT OR ASSISTANCE: CONNECTED CARE ACCELERATOR -

INFRASTRUCTURE AND SPREAD; CONNECTED CARE ACCELERATOR EQUITY

COLLABORATIVE

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: WAXMAN STRATEGIES

(H) PURPOSE OF GRANT OR ASSISTANCE: IMPLICATIONS OF MEDICAID CHANGES FOR

PEOPLE WHO ARE INCARCERATED; HEALTH AND REENTRY PROJECT (HARP) CALIFORNIA

WAIVER EXPLAINER

NAME OF ORGANIZATION OR GOVERNMENT: WONDER: STRATEGIES FOR GOOD LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: INNOVATION FUND DIVERSITY

COMMUNICATIONS IMPLEMENTATION; COMMUNICATIONS STRATEGY AND SUPPORT FOR

THE HOMELESSNESS & HEALTH CARE BODY OF WORK

NAME OF ORGANIZATION OR GOVERNMENT:

YOUNG MEN'S CHRISTIAN ASSOCIATION OF SAN FRANCISCO

(H) PURPOSE OF GRANT OR ASSISTANCE: INNOVATION FUND ADVISORY COMMITTEE

GRANT: YOUTH AND FAMILY ACCESS, AND ANNUAL CAMPAIGN FOR HEALTH

INITIATIVES

NAME OF ORGANIZATION OR GOVERNMENT:

CENTER FOR HEALTH CARE STRATEGIES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: CALAIM POLICY TRACKING AND

ANALYSIS; CALAIM EVALUATION FRAMEWORK; PREPARING FOR APM 2.0: AN

IMPLEMENTATION GUIDE FOR CALIFORNIA'S HEALTH CENTERS; LEARNING FROM THE

EVIDENCE TO INFORM CALAIM IMPLEMENTATION IMPACTING SENIORS AND PEOPLE

WITH DISABILITIES; CALIFORNIA MATERNITY CARE POLICY UPDATES: CALIFORNIA

ADVANCING AND INNOVATING MEDI-CAL (CALAIM) AND THE 2021-2022 STATE

BUDGET; UNDERSTANDING COMMUNITY BASED ORGANIZATIONS NETWORKS: LESSONS

FOR CALIFORNIA; ENHANCED CARE MANAGEMENT: ENVIRONMENTAL SCAN FOR

SUPPORTING OVERSIGHT AND ACCOUNTABILITY; SCAN OF STATE MEDICAID EFFORTS

TO COVER DOULA SERVICES; ENVIRONMENTAL SCAN: IMPLICATIONS OF USING

Part IV Supplemental Information

COST/UTILIZATION TO IDENTIFY POPULATIONS OF FOCUS; MEDI-CAL ENROLLEE

ADVISORY COMMITTEE: RESEARCH AND DESIGN; EARLY IMPLEMENTATION OF ECM

AND CS FOR ADULTS WITH BEHAVIORAL HEALTH CONDITIONS; INSTITUTIONAL

LONG-TERM CARE CARVE-IN EARLY IMPLEMENTATION: MEDI-CAL MANAGED CARE

PLAN LEARNING COLLABORATIVE; INCORPORATING COMMUNITY-BASED

ORGANIZATIONS IN MEDICAID INITIATIVES THAT ADDRESS HEALTH-RELATED

SOCIAL NEEDS: EARLY STATE APPROACHES; CALAIM POLICY AND IMPLEMENTATION

SYNTHESIS AND ADVISORY BOARD; HEALTH AND RE-ENTRY 101 BRIEF FOR HEALTH

CARE STAKEHOLDERS

NAME OF ORGANIZATION OR GOVERNMENT:

UNIVERSITY OF CALIFORNIA, SAN FRANCISCO

(H) PURPOSE OF GRANT OR ASSISTANCE: BRIDGING ADMISSIONS HOPE

FELLOWSHIP; PRIORITY (PREGNANCY CORONAVIRUS OUTCOMES REGISTRY) VOICE

(VISIONING OPPORTUNITIES TO IMPROVE HEALTHCARE AND EQUITY) STUDY;

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH (CDPH) BLACK MATERNAL AND INFANT

HEALTH REPORT: SUPPORT TO UCSF CENTER FOR HEALTH EQUITY TO COMPLETE

REMAINING CRITICAL ACTIVITIES; A STATEWIDE SURVEY OF PEOPLE

EXPERIENCING HOMELESSNESS; ASSESSING DIGITAL HEALTH COMPANY EXPERIENCES

WITH EHR APIS; CALIFORNIA IMPROVEMENT NETWORK PHASE 8 REDESIGN PLANNING

GRANT; CONNECTED CARE ACCELERATOR DATA COLLECTING EXTENSION; STATE OF

PRE-MEDICAL SCHOOL ADVISING IN CALIFORNIA'S PUBLIC INSTITUTIONS; RURAL

HEALTH LEADERSHIP DEVELOPMENT PLANNING WORK; TOWARDS A MORE DIVERSE

NURSE-MIDWIFERY WORKFORCE: SUPPORT FOR THE MENTORING & BELONGING

PROGRAM AT CALIFORNIA'S SCHOOLS OF NURSE-MIDWIFERY; CHCF HEALTH CARE

LEADERSHIP PROGRAM: RENEWAL FOR COHORTS 22-23; CONNECTED CARE

ACCELERATOR EQUITY COLLABORATIVE; STRATEGIC PLAN FOR A WORKFORCE

DEVELOPMENT DIVISION OF THE DEPARTMENT OF HEALTH CARE ACCESS AND

Part IV Supplemental Information

INFORMATION (HCAI), PART I; DIRECT CARE WORKFORCE FACT SHEETS;

EVALUATING PREGNANCY POP-UP VILLAGE; CALIFORNIA IMPROVEMENT NETWORK

PHASES 8 AND 9 - PROGRAM OFFICE; EVALUATING EMBRACE; TELEHEALTH

EVIDENCE REVIEW; NURSING ADVISING RESOURCES; DEVELOPING RESPECTFUL

MATERNITY CARE AND PERINATAL MENTAL HEALTH QUESTIONS FOR THE MATERNAL

INFANT HEALTH ASSESSMENT SURVEY; PATIENTS FOR PRIMARY CARE; CALIFORNIA

HEALTH WORKFORCE DATA GAPS

Multiple horizontal lines for supplemental information input.

**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 CALIFORNIA HEALTHCARE FOUNDATION	Employer identification number 95-4523231
---	---

Part I Questions Regarding Compensation

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Schedule J (Form 990) 2022

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) HERNANDEZ, SANDRA PRESIDENT & C.E.O	(i)	700,802.	0.	1,065.	55,100.	50,253.	807,220.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ZIEGLER, CRAIG VP FIN-ADM-INV/SEC&TRS(TILL 5/16/22)	(i)	200,148.	0.	305,062.	38,364.	21,454.	565,028.	264,482.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) CARTER, KARA SR VP PGRMS & SEC.(SEC. EFF 5/16/22)	(i)	421,792.	0.	1,365.	47,885.	27,273.	498,315.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) BUCKLEY, MELISSA PROGRAM DIRECTOR OF INNOVATIONS	(i)	306,346.	0.	1,065.	55,100.	47,690.	410,201.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) PERRONE, CHRISTOPHER PROGRAM DIRECTOR OF IMPROVING ACCESS	(i)	294,579.	0.	2,216.	54,167.	19,270.	370,232.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) SCHNEIDERMAN, MICHELLE PRG DIR-ADVANCING PEOPLE CNTR'D CARE	(i)	300,186.	0.	2,715.	55,100.	4,937.	362,938.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) SHEWRY, SANDRA VP OF EXTERNAL ENGAGEMENT	(i)	181,138.	0.	134,405.	34,327.	3,147.	353,017.	111,829.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) READER, CHARLES CHIEF TALENT OFFICER	(i)	288,694.	0.	1,365.	33,678.	12,401.	336,138.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) KIM, TIE VP FIN-ADM-INV/TREAS (EFF. 5/16/22)	(i)	256,913.	0.	800.	36,650.	27,037.	321,400.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART II COLUMN (B)(III), OTHER REPORTABLE COMPENSATION:

THERE ARE FOUR ITEMS REPORTED IN THIS COLUMN:

1. PAYMENTS TO 9 EMPLOYEES FOR CELL PHONES ALLOWANCE (\$8,170).

2. PAYMENTS TO 3 EMPLOYEES FOR PARTICIPATION IN THE FOUNDATION'S

WELLNESS PROGRAM (\$1,050).

3. EXCESS SECTION 415 RETIREMENT CONTRIBUTIONS PAID IN CASH TO 2

EMPLOYEES (\$3,351).

4. MEDICAL WAIVER TO 2 EMPLOYEES (\$1,850).

5. 457(B) PLAN DISTRIBUTIONS TO 2 EMPLOYEES (\$435,637).

PART II COLUMN (C), RETIREMENT AND OTHER DEFERRED COMPENSATION:

THE FOUNDATION HOSTS A 401(K) RETIREMENT PLAN FOR ALL EMPLOYEES WHICH

HAS BASE EMPLOYER CONTRIBUTIONS, AN EMPLOYER MATCHING COMPONENT, AND

EMPLOYEE CONTRIBUTIONS.

FIGURES REPORTED IN THIS COLUMN ARE THE 401(K) MATCH AND EMPLOYER

CONTRIBUTIONS ONLY.

Part III Supplemental Information

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

PART II COLUMN (D), NONTAXABLE BENEFITS:

FIGURES REPORTED IN THIS COLUMN INCLUDE HEALTH AND WELFARE BENEFITS.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization CALIFORNIA HEALTHCARE FOUNDATION	Employer identification number 95-4523231
---	---

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

INTERRUPT RACISM, BUILD TRANSPARENCY AND ACCOUNTABILITY AROUND
EQUITABLE CARE, AND DIVERSIFY THE HEALTH CARE WORKFORCE.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

WITH LOW INCOMES.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

CALIFORNIA'S HEALTH CARE PROFESSIONALS AND STATE POLICY PARTNERS, AS
WELL AS TO SUPPORT LEARNING OPPORTUNITIES FOR ORGANIZATIONS IMPROVING
CARE DELIVERY IN THE SAFETY NET. 4) BRIDGING THE INNOVATION GAP: CHCF
AIMS TO DEVELOP INFORMATION, NETWORKS, AND COMMUNICATION PLATFORMS THAT
ENABLE SAFETY-NET PROVIDERS AND HEALTH PLANS TO WORK WITH ENTREPRENEURS
ON DELIVERY SYSTEM IMPROVEMENT.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

ACROSS OUR THREE PRIMARY GOALS, CHCF ALSO USES A VARIETY OF TOOLS TO
INCREASE THE IMPACT OF OUR GRANT MAKING. OUR EXTERNAL ENGAGEMENT WORK
USES POLICY CONVENINGS, RESEARCH AND ANALYSIS, AND STRATEGIC
COMMUNICATIONS TO SUPPORT THE PROGRAMMATIC WORK OF THE FOUNDATION. 1)
CONVENING: WE BRING STAKEHOLDERS TOGETHER TO FIND SOLUTIONS, SPREAD
KNOWLEDGE, AND CREATE THE IMPETUS FOR CHANGE. 2) RESEARCH: WE CREATE A
DATA AND POLICY ANALYSIS AGENDA THAT HELPS DECISIONMAKERS MAKE INFORMED
CHOICES. 3) ENGAGEMENT: WE USE OUR VOICE AND RELATIONSHIPS TO ADDRESS
HEALTH CARE PROBLEMS AND FIND SOLUTIONS.

EXPENSES \$ 9,073,894. INCL GRANTS OF \$ 1,500,000. REVENUE \$ 556,420.

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

Schedule O (Form 990) 2022

232211 10-28-22

Name of the organization CALIFORNIA HEALTHCARE FOUNDATION	Employer identification number 95-4523231
--	--

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

THE FORM 990 IS PREPARED BY THE STAFF OF THE FOUNDATION IN COORDINATION WITH A PUBLIC ACCOUNTING FIRM. PRIOR TO FILING THE RETURN, IT IS REVIEWED IN DETAIL BY THE BOARD'S AUDIT COMMITTEE AND THEN REVIEWED WITH AND APPROVED BY THE FULL BOARD OF DIRECTORS.

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

ALL DIRECTORS, OFFICERS & KEY EMPLOYEES ARE REQUIRED TO DISCLOSE POTENTIAL CONFLICTS ANNUALLY. POTENTIAL CONFLICT INFORMATION IS COMPILED, REVIEWED BY THE VICE PRESIDENT OF FINANCE, ADMINISTRATION & INVESTMENTS, AND THEN REPORTED TO THE FULL BOARD OF DIRECTORS FOR THEIR ACKNOWLEDGMENT AND CONFIRMATION. THROUGHOUT THE YEAR AS TRANSACTIONS ARE ENTERED INTO, STAFF AND BOARD MEMBERS ARE ALSO REQUIRED TO SELF-REPORT POTENTIAL CONFLICTS OF INTEREST WHETHER OR NOT THE CONFLICT WAS ORIGINALLY IDENTIFIED ON THE ANNUAL LISTING. NEW VENDOR AND GRANTEE ACTIVITY IS ALSO MONITORED AGAINST THE CONFLICT OF INTEREST LISTING. WHEN A CONFLICT IS IDENTIFIED, THE PERSON WITH THAT CONFLICT IS REQUIRED TO RECUSE THEMSELVES FROM ANY DECISION MAKING WITH RESPECT TO THE TRANSACTION OR ACTIVITY GIVING RISE TO THE POTENTIAL CONFLICT. IN ADDITION, CHCF'S CONFLICT OF INTEREST POLICY HAS A SPECIFIC PROHIBITION AGAINST PRIVATE INUREMENT AND EXCESS BENEFIT TRANSACTIONS WITH RESPECT TO ANY TRANSACTION IN WHICH CHCF PARTICIPATES.

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

THE FOUNDATION HAS A DOCUMENTED COMPENSATION PROGRAM, INCLUDING A COMPENSATION PHILOSOPHY AND POLICIES AND PROCEDURES. AS PART OF THOSE POLICIES AND PROCEDURES, THE FOUNDATION ENGAGES INDEPENDENT COMPENSATION CONSULTANTS TO DEVELOP MARKET COMPARABLES, SURVEY THE MARKET BASED ON THOSE

Name of the organization CALIFORNIA HEALTHCARE FOUNDATION	Employer identification number 95-4523231
--	--

MARKET COMPARABLES, AND BENCHMARK THE FOUNDATION'S SALARIES AND TOTAL
 COMPENSATION TO MARKET DATA. THE FOUNDATION'S COMPENSATION PROGRAM, AS WELL
 AS CEO AND CFO TOTAL COMPENSATION LEVELS, ARE REVIEWED AND APPROVED BY THE
 FOUNDATION'S BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION C, LINE 19:
 THE FOUNDATION MAKES ITS FINANCIAL STATEMENTS AND FORM 990 AVAILABLE ON ITS
 WEBSITE, WWW.CHCF.ORG. FOR 3 YEARS AS SET FORTH IN SEC. 6104(D). GOVERNING
 DOCUMENTS AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.

FORM 990, PART VII, SECTION A:
 COMPENSATION OF OFFICERS, DIRECTORS, TRUSTEES, KEY EMPLOYEES, ETC.:
 PLEASE REFER TO SCHEDULE J FOR ADDITIONAL DETAIL REGARDING
 COMPENSATION.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:
 RETURNED GRANTS 173,290.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization <p align="center">CALIFORNIA HEALTHCARE FOUNDATION</p>	Employer identification number <p align="center">95-4523231</p>
--	--

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
OAC PROPERTIES, LLC 1438 WEBSTER STREET, SUITE 400 OAKLAND, CA 94612	RENTAL PROPERTY	CALIFORNIA	785,158.	49,371,798.	CALIFORNIA HEALTHCARE FOUNDATION

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

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

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	X	
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)	X	
s Other transfer of cash or property from related organization(s)	X	

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) MAKENA FIXED INCOME FUND, LP	A	1,688,149.	K-1 PARTNER ALLOCATION
(2) MAKENA FIXED INCOME FUND, LP	S	52,900,000.	CASH
(3) MAKENA FIXED INCOME FUND, LP	R	96,643,654.	CASH
(4) OAC PROPERTIES, LLC	S	2,000,000.	CASH
(5)			
(6)			

