

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.



<u>A</u> F	or the	e 2022 calendar year, or tax year beginning and	ending		
B Cl ap	heck if plicable	e: C Name of organization		D Employer identifie	cation number
X	Addres	TIDES CENTER			
	Name			94-32131	00
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final return/	1012 TORNEY AVENUE		(415) 56	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	327,108,721.
X	Ameno return	SAN FRANCISCO, CA 94129		H(a) Is this a group re	eturn
	Applic tion	F Name and address of principal officer. OANTECE EVAND TAGE		for subordinates	? Yes 🔀 No
	pendin	⁹ SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
ΙT	ax-exe	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 527	If "No," attach a	list. See instructions
	/ebsit			H(c) Group exemptio	
		organization: X Corporation Trust Association Other	L Year	of formation: 1994 N	A State of legal domicile: CA
Pa	rt I	Summary			
a		Briefly describe the organization's mission or most significant activities:			
ů.		PACE OF SOCIAL CHANGE, WORKING WITH INNOV			
Governance		Check this box if the organization discontinued its operations or dispos	sed of more		
Š					8
୍ ଅ		Number of independent voting members of the governing body (Part VI, line 1b)		8	
ies		Total number of individuals employed in calendar year 2022 (Part V, line 2a)		864	
Activities &		Total number of volunteers (estimate if necessary)			810
Act		Total unrelated business revenue from Part VIII, column (C), line 12			0.
\rightarrow	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u> </u>		Current Year
	•	Contributions and grants (Dout) (III line 1b)	5	01,815,757.	240,178,205.
an		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		14,391,645.	37,628,314.
Revenue		Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		29,562.	3,382,268.
Be		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		336,880.	285,985.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		16,573,844.	281,474,772.
-		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		79,981,825.	205,996,418.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
<i>"</i>		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		91,429,314.	94,394,656.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		120,335.	293,157.
per		Total fundraising expenses (Part IX, column (D), line 25) 18, 481, 69			
Щ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		61,631,779.	115,212,823.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	0	33,163,253.	415,897,054.
	19	Revenue less expenses. Subtract line 18 from line 12		83,410,591.	-134,422,282.
or				ginning of Current Year	End of Year
sets alanc	20	Total assets (Part X, line 16)	5	38,607,810.	431,562,198.
tAs	21	Total liabilities (Part X, line 26)		32,385,686.	69,687,000.
ER ER		Net assets or fund balances. Subtract line 21 from line 20	5	06,222,124.	361,875,198.
Pa	rt 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	Signature of officer			D	Date			
Here	JAMES LUM, CFO/TREASURER							
	Type or print name and title							
	Print/Type preparer's name	Preparer's signature	1 1 0 01 11	Date	Check	PTIN		
Paid	JOCELYNE MILLER		Jourge C. Mille	2/13/24	if self-employed	P00634378		
Preparer	Firm's name DELOITTE TAX LLP			F	irm's EIN 86	-1065772		
Use Only	Use Only Firm's address 12830 EL CAMINO REAL, SUITE 600							
	SAN DIEGO, CA 92130 Phone no. (619) 232-6500							
May the IRS discuss this return with the preparer shown above? See instructions X Yes No								
232001 12-1	3-22 LHA For Paperwork Reduction Act Notic	ce, see the separate	e instructions.			Form 990 (2022)		
~								

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

(Rev. January 2022)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

Elle	wata awaliaatiaw	. fou o o la ustrum
File a sepa	rate application	n for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type o	r Name of exempt organization or other filer, see inst	tructions.		Taxpayer identification number (
print	TIDES CENTER			94-3213100			
File by the due date filing your	Number, street, and room or suite no. If a P.O. box	, see instruct	tions.				
return. Se instruction		a foreign add	ress, see instructions.				
Enter th	ne Return Code for the return that this application is for ((file a separa	te application for each return)				
Applica	ation	Return	Application			Return	
ls For		Code	Is For			Code	
Form 9	90 or Form 990-EZ	01	Form 1041-A			08	
Form 4	720 (individual)	03	Form 4720 (other than individual)			09	
Form 9	Form 990-PF 04 Form 5227					10	
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 9	Form 990-T (trust other than above) 06 Form 8870					12	
Form 9	90-T (corporation) HOLDEN LEE	07					
 If the If the box > 1 1 t t 2 If 	request an automatic 6-month extension of time until he organization named above. The extension is for the o ▶ I calendar year 2022 or ▶ I tax year beginning I the tax year entered in line 1 is for less than 12 months I change in accounting period	it Group Exe and atta NOVEI rganization's , an , check reaso	mption Number (GEN), . ach a list with the names and TINs of MBER 15, 2023 , to file return for: ad ending on: Initial return	If this is fo all membe	r the whole of ers the extern npt organizat	group, check this	
	f this application is for Forms 990-PF, 990-T, 4720, or 60 iny nonrefundable credits. See instructions.	69, enter the	tentative tax, less	3a	\$	0.	
	f this application is for Forms 990-PF, 990-T, 4720, or 60 estimated tax payments made. Include any prior year over	-		3b	\$	0.	
сE	Salance due. Subtract line 3b from line 3a. Include your	payment witl	h this form, if required, by				
u	ising EFTPS (Electronic Federal Tax Payment System). S	See instructio	ns.	3c	\$	0.	
Cautio instruct	n: If you are going to make an electronic funds withdraw tions.	/al (direct det	bit) with this Form 8868, see Form 84	453-TE and	d Form 8879	-TE for payment	
LHA	For Privacy Act and Paperwork Reduction Act Notic	e. see instru	ictions.		Form 8	3868 (Rev. 1-2022)	

223841 04-01-22

Form	<u>990 (2022)</u> TIDES CENTER 94-3213100 Page 2
Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: TIDES CENTER ACCELERATES THE PACE OF SOCIAL CHANGE, WORKING WITH
	INNOVATIVE PARTNERS TO SOLVE SOCIETY'S TOUGHEST PROBLEMS.
2	Did the organization undertake any significant program services during the year which were not listed on the
2	prior Form 990 or 990-EZ?
•	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
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. (Code:) (Expenses \$
4a	(Code:) (Expenses \$306,394,331. including grants of \$181,030,703.) (Revenue \$31,238,929.) EQUITY: WITHIN OUR LARGEST AREA OF IMPACT, TIDES PROJECTS WORK
	MULTILATERALLY TO CREATE MORE EQUAL OPPORTUNITY AND EQUITABLE TREATMENT
	FOR ALL. PROJECTS FOCUS ON ETHNIC AND RACIAL EQUITY, ECONOMIC
	OPPORTUNITY, HUMAN RIGHTS POLICIES, REPRODUCTIVE JUSTICE, REFUGEE AID,
	AND INCREASED CIVIC ENGAGEMENT. SEVERAL PROGRAMS WORKED TO END HOMELESSNESS BY PROVIDING TRANSITIONAL HOUSING AND SOCIAL SERVICES.
	OTHERS ADVOCATED FOR ISSUES SUCH AS THE SOCIAL AND ECONOMIC EMPOWERMENT
	OF WOMEN AND GIRLS, ACCESS TO QUALITY HEALTH CARE, AND CRIMINAL JUSTICE
	REFORM
4b	(Code:) (Expenses \$ 56,200,445. including grants of \$ 23,969,276.) (Revenue \$ 6,227,999.) EDUCATION: IN 2022, TIDES PROJECTS ENRICHED THE EDUCATION OF YOUTH AND
	ADULTS LIVING IN LOCAL, UNDER-SERVED COMMUNITIES, FOCUSING ON AREAS
	SUCH AS LEADERSHIP DEVELOPMENT, ARTS EDUCATION, HEALTH AND NUTRITION,
	FAMILY SELF-SUFFICIENCY, AND STEM. INTERNATIONALLY, TIDES PROJECTS
	PROVIDED TRAINING IN PUBLIC HEALTH PRACTICES FOR HEALTHCARE PROVIDERS
	AND IN EFFECTIVE CONDOM USAGE TO PREVENT THE SPREAD OF HIV/AIDS. OTHER
	TIDES PROJECTS INSTITUTED A VARIETY OF PROGRAMS THAT RANGED FROM
	ADVOCATING AGAINST DOMESTIC VIOLENCE, TO SUPPORTING QUALIFIED CANDIDATES SEARCHING FOR CAREERS IN HIGHER EDUCATION, TO EXPLORING THE
	INTERSECTION OF THE ARTS AND SOCIAL JUSTICE.
4c	
	ENVIRONMENT: IN 2022, TIDES PROJECTS WORKED IN THE AREAS OF
	ENVIRONMENTAL SUSTAINABILITY, CLIMATE CHANGE, AND SUSTAINABLE
	AGRICULTURE PRACTICES. PROGRAMS WORKED AT THE LOCAL LEVEL TO ADDRESS ENVIRONMENTAL ISSUES FACING LOW-INCOME, MARGINALIZED COMMUNITIES, AS
	WELL AS THE NATIONAL AND INTERNATIONAL LEVELS TO SPEARHEAD CAMPAIGNS
	FOR THE PRESERVATION OF OUR NATURAL ENVIRONMENT AND ANIMAL WELFARE.
	TIDES PROJECTS ADVOCATED FOR A MORE JUST, CLEAN, AND SUSTAINABLE WORLD
	FROM A VARIETY OF PERSPECTIVES, FROM REDUCING ENVIRONMENTAL MERCURY
	EXPOSURE TO DEVELOPING REGIONAL FOOD SYSTEMS AND ENHANCING FOOD
	SECURITY TO SUPPORTING THE FARM TO SCHOOL FOOD MOVEMENT.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	
	Form 990 (2022)

232002 12-13-22

3 2022.05030 TIDES CENTER

Form	990	(2022)
	330	(2022)

Form 990 (2022) TIDES CENTER
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? /f "Yes,"			
	complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	X	
232003	3 12-13-22	⊦orm	33U ((2022)

232003 12-13-22

2022.05030 TIDES CENTER

4

Form	990	(2022)
1 01111	000	

Z Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), line 27 (* Yes, * complete Schoold (*, <i>Part J</i> and U) Za Did the organization answer 'Yes' to Part VII, Saction A, line 3, 4, or 6, about compensation of the organization's current and forme officers, thustose, key employee, and highwat compensated employees? If 'Yes, * complete Schoold (*, 170, *) or for iter 28 Za Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If 'Yes, * answet ines 264 through 264 and complete Schoold (*, 170, *) or for iter ascerow account the than a returning secrow at any time during the year (* 144 Za Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Zed Did the organization mixest any noreal of the secret any time during the year? Zed Did the organization mixest any noreal of tax-exempt bonds exception? Zed Did the organization mixest any noreal of the secret any time during the year? Zed Did the organization mixest any noreal of the organizations. Dul the organization angle in an excess benefit transaction has not been reported on any of the organization with a disqualified period in a prive year. The organization avain and the organization is prior year, and that the transaction has not been reported on any of the organization commet member, or to 35% controlled schedule L, Part I Zed Zed	Form	990 (2022) TIDES CENTER 94-3213	100	Р	age 4
22 Did the organization report more than \$5,000 of grafts or other assistance to a for domestic individuals on Part K, column (A), line 27 (# Yes,* complete Schedule I, Parts I and III) 22 X 23 Did the organization answer "Yes" to Part VII, Suction A, line 3, a, o 5, about compensation of the organization's current and former officer, directors, fructees, key employees, and highest compensation of the organization's current and former officer, directors, fructees, key employees, and highest compensation of the organization's current and former officer, directors, fructees, key employees, and highest compensation of the organization's current sust and proceeds of tax exempt bords buyod a temporary period exception? 2a 240 Did the organization matchin an escrow account other than a refunding escrow at any time during the year to delease any tax exempt bords 50 (C)(3), 501(c)(4), 601(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a doqualified person during the year? 2d 253 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 in a piror year, and that the transaction with a disqualified person during the year? 2d X 254 Did the organization reported on any of the organization engage in an excess benefit transaction with a disqualified person in a piror year, and that the transaction with a disqualified person in a piror year, and that the transaction with a of the organization engage in an excess benefit transaction with a disqualified person in a piror year, and that the organization reprove any any and that be transaction with one of the o	Par	t IV Checklist of Required Schedules (continued)			
Part IX, column (A), Ine 27, If "Yes," complete Schedule I, Parts I and II. 22 X 23 Did the organization nave: "I's 'De NTU, Science A, Ile 34, or 5, shout compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, Vi's, 'De NTU, Science A, Vi's, 'De NTU, 'DE NT				Yes	No
23 Det the organization answer "Ver" to Part VII. Section A, Ine 3.4, or 5, about compensation of the organization's current and former officers, directors, trustees, wey employees, and highest compensated employees? III "Yes," complete Schedule J. 23 X 24 Det the organization have a tax-essempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the yes, it at was used after December 31,2002? III "Yes," answer lines 24b through 24d and complete Schedule I, Part II was site of the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? 24e 24e 25 Bection S01(c)(3), S01(c)(4), and S01(c)(20) organizations. Did the organization argues in a neccess Benefit transaction with a disqualified person uning the year? 24d 25a 25 Det the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction any of these persons 71 (If Yes, ' complete Schedule L, Part I) 25a X 26 Dot the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction any of these persons 71 (If Yes, ' complete Schedule L, Part I) 25b X 26 Dot the organization provide agrint or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of neutrendy of themese persons 71 (If Yes, ' complete Schedule	22				
and forms offices, directors, fusites, key employees, and highest compensated employees? If "Yes," complete Schedule J. 23 X. 24 bit the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule J. Wes," or prince Schedule J. Wes, " answer lines 24b through 24d and complete Schedule J. Wes," answer lines 24b through 24d and complete Schedule J. Wes," answer lines 24b through 24d and complete Schedule J. Wes, " answer lines 24b through 24d and complete Schedule J. Wes," answer lines 24b through 24d and complete Schedule J. Part J. 25a Schedule Schedule J. Part J. 25a Schedule Schedule J. Part J. 25a Schedule J. Part J. 25b Schedule J. Par			22	X	<u> </u>
Schedul J 23 X 24a Dd 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, 2027 if "Yes," answer lines 24b through 24d and complete Schedule K If No." go to line 25a 24a X 24b Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b X 24b Dd the organization maintain an escrow account other than a refunding serow at any time during the year' 0. 24b X 25c Section 50(c)(3), 50(c)(4), and 50(c)(2) organizations. Dut be organization negage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a 25c Section 50(c)(3), 50(c)(4), and 50(c)(2) organizations. During 900 or 90E-277. If "Yes," complete Schedule L, Part I 25a 25 Dd the organization protof any amount on Part X, line 5 or 22, for receivables from or payable to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled ently (including an employee thereol) or annily member of any of the enganization sport Forse Schedule L, Part II 25a 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, a grant selection committee member, to ta 35% controlled ently (including an employee) thereol or annihy member of any of the enganization receive thereol or family member of any of these persons? If "Yes," complete Schedule L, Part II 25a 28 Was the organization previde ta grant or other assistance to any c	23				
24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes, 'answer lines 24a functomplete Schedule L / No.* go of the 25a. 24a X 2 bit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24a X 2 bit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d X 2 bit the organization invest any proceeds of tax-exempt bonds outstanding at any time during the year? 24d 24d 2 bit the organization and as an 'on behal of 'issuer for bonds outstanding at any time during the year? 24d 24d 2 bit the organization aware that the regarding and excess benefit transaction with a disqualified person during the year? 14d 25a X 2 bit the organization aware that the organization's prior Forms 980 or 990-E27 II "res," complete Schedule L, Part I 25a X 2 bit the organization aware third person or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? II "res," complete Schedule L, Part II 26a X 2 bit the organization apple thereof or family member of any of these persons? II "res," complete Schedule L, Part II 26a X 2 bit the organization apple bit person in a prioreperson in a prior person in a priorepers, in a secons			0.00	v	
at day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete 24a X Schedule K, If 'No,'' go to line 25a 24a X D D the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24a 24a C D the organization maintian an escrow account other than a refunding eacrow at any time during the year? 24d 24d D D the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year? 24d 24d D be the organization act as an 'on behalf of 'issuer for bonds outstanding at any time during the year? 24d 25a Schotton 50(c)(3), 50(c)(4), And 50(c)(2) gorganizations. Dub the organization engage in an excess benefit transaction with a disqualified person than the transaction with a disqualified person to any of the organization's prior Forms 580 or 590-E27. If 'Yes,'' complete Schedule L, Part I 25b X D D the organization approximation. Dub these persons? If 'Yes,' complete Schedule L, Part II 25b X 27 D D the organization provide a grant or of the assistance to any current or forme officer, director, trustee, key employee, creator or founder, substantial contributor or any apple sectore of or applicable line theoring, and yof these persons? If 'Yes,'' complete Schedule L, Part II 26b X 27 D D the organization report any amount on Part X, line 6 or 22, tor receivables from or payables to a softwoer to a softwoer or founder, substantial contributor? If 'Yes,' complete Schedule L, Part II 27b <t< td=""><td>24 2</td><td></td><td>23</td><td></td><td><u> </u></td></t<>	24 2		23		<u> </u>
Schedule K, If 'No;' to bite 25a 24a X b Did the organization invest any proceeds of tax-exempt bords beyond a temporary period exception? 24b 24b c Did the organization ministan an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bords? 24c 24c 25a Section 501(c)(3), 501(c)(2) organizations. Did the organization engage 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 pror Forms 900 or 990-E27. If 'Ves,' complete Schedule L, Part I 25a 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 former officer, director, truste, key employee, creator or forunder, orustanianton di	240				
b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an ascrow account other than a refunding ascrow at any time during the year to delease any tax exempt bonds? 24d d Did the organization act as an "on behalf of" issues for bonds outstanding at any time during the year? 24d 25a Sacction 501(c)(a), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prory year, and that the transaction has not been reported on any of the organization prior Forms 990 or 990-E2? If "kes," complete Schedule L, Part I 25a 250 Did the organization propint 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 including an employee thereof, a grant selection committee member, or to a 35% controlled entity including an employee thereof on trans, and exceptions): 26 X 27 X Was the organization provide thereof or trans, and exceptions): 275 X 28 DA time immeder any individual described in line 28a' If Yes, 'complete Schedule L, Part II 28a X 28 X Did the organization provide wore than \$25,000 in non-cash contributions? If Yes, 'complete Schedule L, Part IV 28a X 28 X Did the or			24a		x
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? 24c 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 in a prior year, and that the transaction has not been reported on any of the organization sympage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustes, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? // */es, * complete Schedule L, Part II 26a X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustes, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? // */es, * complete Schedule L, Part II 26 X 28 Was the organization provide thereof) or family member of any of these persons? // */es, * complete Schedule L, Part II 27 X 29 Was the organization provide thereof) or family member of any of these persons? // */es, * complete Schedule L, Part II 28a X 20 A current or former officer, director, trustes, key employee, creator or founder, or substantial contributor? // 28a X 20 A tarnity member of any of these persons? // */es, * complete Schedule L, Pa	b				
any tax-exempt bonds? 24c 25a Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage 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 E2? if 'Yes,' complete Schedule L, Part I 25a X 25D Did the organization aveause benefit transaction with a disqualified person in a prory year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 E2? if 'Yes,' complete Schedule L, Part I 25b X 27D Did the organization apert of these persons? If 'Yes,' complete Schedule L, Part II 26 X 27D Did the organization apert of these persons? If 'Yes,' complete Schedule L, Part II 26 X 28 Was the organization apert of these persons? If 'Yes,' complete Schedule L, Part II 26 X 28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part II.) 27 X 28 Did the organization receive more individual adscribed in line 28a? If 'Yes,' complete Schedule L, Part II. 28a X 29 Did the organization receive more individual and/or organizations described in line 28a or 28b? If ''Yes,' complete Schedule L, Part IV. 28a X 29 Did the organization liquidual described in line 28a? If 'Yes,					
d Did the organization act as an 'on behalf of "issuer for bonds outstanding at any time during the year? 244 25a Section 601(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? II 'Yes,' complete Schedule L, Part I 25a X b Is 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 33% controlled entity or family member of any of these persons? II 'Yes,' complete Schedule L, Part II 26 X 27 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or folcer, director, trustee, key employee, creator or founder, substantial contributor or any current or former officer, director, trustee, key employee, creator any current or more rofficer, director, trustee, key employee, treator any current or former officer, director, trustee, key employee, treator any current or founder, substantial contributor or employee thereol, agrant selection committee member, or to a 35% controlled entity of nome officer, director, trustee, key employee, creator or founder, or substantial contributor? II 27 X 28 Was the organization receive more than 252,000 in non-cash contributions? II 'Yes,' complete Schedule L, Part IV 28a X 29 Did the organization receive contributions and ecceptions? II 'Yes,' complete Schedule L, Part IV 29 X 29 Did the organization receive more than 255,000 in non-cash contributions? II 'Ye			24c		
transaction with a disqualified person during the year? // *Yes,* complete Schedule L, Part // 25a 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 aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction 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? // *Yes,* complete Schedule L, Part // 26 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 or family member of any of these persons? // *Yes,* complete Schedule L, Part I// 27 X 28 Was the organization proved thereshols, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // *Yes,* complete Schedule L, Part I// 28a X 29 Did the organization receive controllations of an organization sectored in line 28a? // *Yes,* complete Schedule L, Part I// 28a X 29 Did the organization receive controllations of an instoriation sectores? // *Yes,* complete Schedule L, Part I// 28a X 29 Did the organization receive controll	d		24d		
b Is the organization aware that it engaged in an excess benefit transaction with a disquilified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 // "Yes," complete Schedule L, Part I 26 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 of numly member of any of these persons? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization aparty to a business transaction with or of the following parties (see the Schedule L, Part II) 26 X 28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part IV) instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X 28 DA family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive contributions of at, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 29a X 30 Did the organization negutiet, terminater, or disolve and cease operations? If "Yes," complete Schedule N, Part I 31 X	25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X 27 X Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part II 27 X 28 Was the organization applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets; or qualified conservation contributions? If "Yes," complete Schedule N, Part I 31 X 31 Did the organiz		transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
Schedule L, Part I 25b X 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or founcer, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 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 thered, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV. 26 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? If "?s," complete Schedule L, Part IV. 28a X 29 Did the organization neceive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 X 30 Did the organization neceive contributions of art, historical treasures, or dualified conservation contributions? If "Yes," complete Schedule M. 30 X 31 Did the organization neceive contributions of art, historical treasures, or challed schedule M, Part I. 31 X 32 Did the organization neceive complete Schedule	b				
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 of naminy member of any of these persons? If "Yes," complete Schedule L, Part II 26 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, a grant selection committee member, or to a 35% controlled entity (including an employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 X 28 Was the organization receive more train 225,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 30 X 30 Did the organization receive more than 225,000 in non-cash contributions? If "Yes," complete Schedule N, Part I 31 X 31		that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 28 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III. 27 X 28 Was the organization party to a business transaction with one of the following parties (see the Schedule L, Part III. 28 X 29 Vas the organization party to a business transaction with one of the following parties (see the Schedule L, Part III. 28 X 20 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. 28a X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 20 X 30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I 31 X 31 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization necleve more thanse \$25,000 in non-cash contributions? If "Y		,	25b		X
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 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, agrant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III. 27 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? If "Yes," complete Schedule L, Part IV. 28a X b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 28b X 29 Did the organization receive more than \$25,000 in on-cash contributions? If "Yes," complete Schedule M. 20 X 31 Did the organization iseli, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. 31 X 32 X 30 X 33 X 33 Did the organization neelity disergarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.37 If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1 <td>26</td> <td></td> <td></td> <td></td> <td></td>	26				
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee) thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV. 27 X 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV. 28 X 29 X acurent or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more individual sand/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 20 X 30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I 30 X 31 X 31 X 32 Did the organization seli, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 33 33 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?					v
creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III. Z7 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? If "yes," complete Schedule L, Part IV. Z8a X b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. Z8b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV. Z8c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M, Part I 20 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part I 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 33 X 32 Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Sched	07		26		<u> </u>
entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 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? If "Yes," complete Schedule L, Part IV 28a X b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 31 X 31 Did the organization neelie Schedule A Part I 31 31 X 32 Did the organization receive contributions? If "Yes," complete Schedule R, Part I 31 31 X 33 Did the organization neeling to dissolve and cease operations? If "Yes," complete Schedule R, Part I 31	21				
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. 28a X b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 28b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV. 28c X 30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 X 31 Did the organization selie, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization seli, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X 33 X X X X X 34 Was the organization receive more than \$25, complete Schedule R, Part I, III, or IV, and Part V, Iine 1 33 X 35a Did the organization new town tows of an entity disregarded as separate from the organization under Regulations sections 512(b)(13)? If "Yes," complete Schedule R, Part I, IIII, or IV, and Part V, Iine 1 3			27		x
instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV Z8a X b A tamily member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV Z8b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV Z8c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization injuidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 32 X 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1 33 X 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X <td< td=""><td>28</td><td></td><td></td><td></td><td></td></td<>	28				
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // 28a X b A family member of any individual described in line 28a? // // 28b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? // 28b X 28a X 28b X 28b X 28b X 29b X 30 X 28b X 30 X 30 X 30 X 31 X 30 X 30 X 32 Did the organizatio	20				
"Yes," complete Schedule L, Part IV 28a X b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X 28b X 28b X 28c X 28c X 28c	а				
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33 X 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 35a 35 If "Yes," complete Schedule R, Part V, line 2 36 X 35b X 36 X 35a X 35a X 35a X 36 Y "Yes," complete Schedule R, Part V, line 2 36 X 35b X 37 Y			28a		х
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? //f 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? //f "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? //f "Yes," complete Schedule M 30 X 31 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? //f "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? //f "Yes," complete Schedule N, Part I 31 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? /f "Yes," complete Schedule R, Part I 33 X 34 Was the organization neated to any tax-exempt or taxable entity? //f "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization complete Schedule R, Part V, line 2 36 X <td< td=""><td>b</td><td></td><td>28b</td><td></td><td>X</td></td<>	b		28b		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 29 X 30 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 30 X 31 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule N, Part I</i> 31 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 I</i> 31 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> 33 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> 35a X 35a Did the organization. have a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> 35a X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization complete Schedule R, Part V, line 2 36 X 38 Did the organization complete Sc					
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i> 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i> 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete Schedule N, Part I</i> 32 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</i> "Yes," <i>complete Schedule R, Part I</i> 33 X 34 Was the organization related to any tax-exempt or taxable entity? <i>If</i> "Yes," <i>complete Schedule R, Part II, III, or IV, and Part V, line 1</i> 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization complete Schedule R, Part V, line 2 36 X 38 Did the organization complete Schedule Q and provide explanations on Schedule O for Part VI, lines 11b and 19? 37 X 36 X X X X X		"Yes," complete Schedule L, Part IV	28c		X
contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 33 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 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? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X b If "Yes," complete Schedule R, Part V, line 2 35b X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 37 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X <td>29</td> <td>Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M</td> <td>29</td> <td>X</td> <td><u> </u></td>	29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	<u> </u>
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i> . 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete Schedule N, Part I</i> . 32 X 33 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete Schedule N, Part I</i> . 32 X 34 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</i> "Yes," <i>complete Schedule R, Part I</i> . 33 X 34 Was the organization related to any tax-exempt or taxable entity? <i>If</i> "Yes," <i>complete Schedule R, Part II</i> . <i>III, or IV, and Part V, line 1</i> 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? <i>Section 501(c)(3) organization celve any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i> 36 X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> 36 X 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <td< i=""></td<></i>	30				
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? /f "Yes," complete 32 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? /f "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? /f "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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)? 35a X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 X Other of Schedule O contains a response or note to any line in this Part V					
Schedule N, Part II 32 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? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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)? If "Yes," complete Schedule R, Part V, line 2 35b X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 X 90 Her organization of the IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 38 X <td></td> <td></td> <td>31</td> <td></td> <td><u> </u></td>			31		<u> </u>
 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</i> "Yes," <i>complete Schedule R, Part I</i>. 34 Was the organization related to any tax-exempt or taxable entity? <i>If</i> "Yes," <i>complete Schedule R, Part II, III, or IV, and Part V, line 1</i>. 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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</i> "Yes," <i>complete Schedule R, Part V, line 2</i>. 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization <i>If</i> "Yes," <i>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</i> "Yes," <i>complete Schedule R, Part VI</i>. 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 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 	32				v
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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)? If "Yes," complete Schedule R, Part V, line 2 35b X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 X 39 Did the organization got filers are required to complete Schedule O 38 X 37 30 Did the organization complete Schedule O 38 X 37 X 30 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	00		32		<u> </u>
 34 Was the organization related to any tax-exempt or taxable entity? <i>If</i> "Yes," <i>complete Schedule R, Part II, III, or IV, and</i> 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	33		22	x	
Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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)? If "Yes," complete Schedule R, Part V, line 2 35b X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance 38 X	24		33	- 23	<u> </u>
 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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>	04		34	х	1
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI and the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance 38 X	35a				
within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>					
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 36 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 X 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			35b	х	
 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>	36				
and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>		If "Yes," complete Schedule R, Part V, line 2	36		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance 38 X Check if Schedule O contains a response or note to any line in this Part V Image: Check if Schedule O contains a response or note to any line in this Part V Image: Check if Schedule O contains a response or note to any line in this Part V	37				
Note: All Form 990 filers are required to complete Schedule 0 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
Check if Schedule O contains a response or note to any line in this Part V	38				
Check if Schedule O contains a response or note to any line in this Part V	Dar	Note: All Form 990 filers are required to complete Schedule O	38	Х	Ĺ
	Par	Obselvit Cabadula O cantains a vacananas av nata ta anu lina in this Davi V			
		UTIECK IT SCHEDULE U CONTAINS A RESPONSE OF NOTE TO ANY LINE IN THIS Part V			
	4 -	Enter the number reported in box 2 of Form 1000. Enter 0, if not employed in the $ A_1 $ 1 6 5 1		Yes	No
			-		
 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?	G		10	х	
232004 12-13-22 Form 990 (2022)	232004				(2022)

⁵ 2022.05030 TIDES CENTER

Form	<u>990 (2022)</u> TIDES CENTER 94-3213	100	P	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 864			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
Ua		6a		х
h	•	00		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ch		
7	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		Х	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	~	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		v
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	A
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?N/A	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the yearN/A 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?N/A	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
с	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
-	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953? N/A	17		
	If "Yes," complete Form 6069.			
232005	12-13-22	Form	990	(2022)
				· _/

18250125 149058 94-3213100

	rt VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.		Sepon	
				X
Sec	Check if Schedule O contains a response or note to any line in this Part VI			
	Alon A. doverning body and management		Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year 1a 8		162	
Ia	If there are material differences in voting rights among members of the governing body at the end of the tax year Ia	-		
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.			
h	Enter the number of voting members included on line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	-		
2		2	х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	2	- 23	
Ŭ	of officers, directors, trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		x
6	Did the organization become aware during the year of a significant diversion of the organization's assets?	6	х	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or		- 23	
1 a		7a	х	
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	10	- 23	
D		7b	х	
8	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		23	
		8a	х	
	The governing body? Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		- 23	
9		9		x
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		- 23
	(This Section B requests information about policies not required by the internal Revenue Code.)		Yes	No
10-	Did the organization have local chapters, branches, or affiliates?	10a	163	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
D.		10b		
112	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	11a	- 23	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
		12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	120	- 23	
C		12c	х	
10	on Schedule O how this was done	13	X	
13 14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	14	X	
14 15	Did the process for determining compensation of the following persons include a review and approval by independent	14	- 23	
15				
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15.0		x
	The organization's CEO, Executive Director, or top management official	15a		X
D	Other officers or key employees of the organization	15b		
16-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
108	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16-		x
Ŀ.	taxable entity during the year?	<u>16a</u>		
D	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	104		
Sar	exempt status with respect to such arrangements?	16b		
	List the states with which a copy of this Form 990 is required to be filedAL, AK, AR, CA, CO, CT, DC, FL, GA	υт	TT.	vc
17				
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)	avallar	oie
	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	a tinano	cial	
~~	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			
	JAMES LUM - (415) 561-6300 1012 TORNEY AVENUE, SAN FRANCISCO, CA 94129			
	TUTZ TUKNET AVENUE, SAN EKANCISCU, CA 94179			
	6 12-13-22 SEE SCHEDULE O FOR FULL LIST OF STATES	-	990	1000

Form 990 (2022) TIDES CENTER	94-3213100	Page 7					
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Con	npensated						
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 w List all of the organization's current officers, directors, trustees (whether individuals or organizations), regard 	•						

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-NEĆ) 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)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do	not cł		ition		ne	Reportable	Reportable	Estimated
	hours per	box,	, unles	ss per	rson i	s both	n an	compensation	compensation	amount of
	week		Jer an	uau	recio	r/trus	lee)	from	from related	other
	(list any hours for	ndividual trustee or director						the	organizations	compensation from the
	related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	organization
	organizations	ruste	ll trus		/ee	mpen		1099-NEC)	1033-1120)	and related
	below	dual t	n stitutional trustee	5	ƙey employee	est col	er			organizations
	line)	Indivi	Instit	Officer	Key e	Highest compensated employee	Former			C C
(1) JANIECE EVANS-PAGE	10.00									
CEO	45.00			х				0.	745,962.	18,841.
(2) HOLDEN LEE	15.00									
TREASURER/CFO	40.00			Х				0.	454,564.	33,204.
(3) SUNEELA JAIN	4.00									
SEC./CHIEF LEGAL & ETHICS OFFICER	51.00			Х				0.	353,956.	37,743.
(4) MARK SMOLINSKI	40.00									
DIR. GLOBAL HEALTH THREATS - ENDING	0.00					Х		374,393.	0.	27,406.
(5) TOMIQUIA MOSS	40.00									
FOUNDER/CHIEF EXEC - ALL HOME	0.00					Х		358,862.	0.	26,939.
(6) SARAH CALDERON	40.00									
EXEC. DIR CREATIVE REBUILD NY	0.00					X		301,038.	0.	51,549.
(7) KELLY FITZSIMMONS	40.00									
FOUNDER & MNG'G DIR, CHIEF NETWORK &	0.00					X		313,030.	0.	41,758.
(8) TALIA MILGROM-ELCOTT	40.00									
EXEC. DIR THE STARFISH INSTITUTE	0.00					X		295,190.	0.	40,760.
(9) JENNIFER MARIE LANDIG	1.00									
ASST. SECRETARY - THRU 4/2022	39.00			Х				0.	124,570.	8,630.
(10) MICHAEL FERNANDEZ	2.00									
DIRECTOR, CHAIR	2.00	Х		Х				0.	0.	0.
(11) ANTOINETTE KLATZKY	2.00									-
DIRECTOR	2.00	Х						0.	0.	0.
(12) CHERYL D. ALSTON	2.00									-
DIRECTOR	2.00	Х						0.	0.	0.
(13) DYLAN ORR	2.00									-
DIRECTOR	2.00	Х						0.	0.	0.
(14) EDWARD G. LLOYD	2.00									-
DIRECTOR	2.00	Х						0.	0.	0.
(15) MARC DIAZ	2.00									•
DIRECTOR	2.00	Х						0.	0.	0.
(16) REGINA JACKSON	2.00								•	<u>^</u>
DIRECTOR	2.00	Х						0.	0.	0.
(17) TIM WANG	2.00								•	<u>^</u>
DIRECTOR	2.00	Х						0.	0.	0 .

232007 12-13-22

8

Form 990 (2022) TIDES CEN										213100 Page 8
Part VII Section A. Officers, Directors, Trus		oloy	ees,			ghes	t C		, ,	
	(B) Average			(C Posi		ľ		(D)	(E)	(F)
Name and title	hours per		not cł	heck i	more	than o s both		Reportable compensation	Reportable compensation	
	week					r/trust		from	from related	
	(list any	director						the	organization	
	hours for related	e or di	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MIS 1099-NEC)	
	organizations	truste	al trus		yee	ompen		1099-NEC)	1000 NEO	and related
	below	Individual trustee or	In stitutional trustee	cer	Key employee	Highest compensated employee	ner			organizations
	line)	Indi	Inst	Officer	Key	High	Former			
								1 640 510	1 670 0	<u> </u>
1b Subtotal c Total from continuation sheets to Part VI								1,642,513.	1,0/9, 0	<u>52.</u> 286,830. 0. 0.
d Total (add lines 1b and 1c)								1,642,513.	1.679.0	
2 Total number of individuals (including but n										
compensation from the organization					,	,				213
										Yes No
3 Did the organization list any former officer,	director, truste	ee, k	ey e	mpl	oyee	e, or	hig	hest compensated emp	loyee on	
line 1a? If "Yes," complete Schedule J for s										<u>3 X</u>
4 For any individual listed on line 1a, is the su										
and related organizations greater than \$1505 Did any person listed on line 1a receive or a	,		•							4 X
rendered to the organization? If "Yes." com										5 X
Section B. Independent Contractors		2010	JI SU		50130	011 .				
1 Complete this table for your five highest co	mpensated ind	ере	nder	nt co	ontra	actor	s th	nat received more than \$	100,000 of com	pensation from
the organization. Report compensation for t	he calendar ye	ear e	ndin	ıg w	ith c	or wit	hin	the organization's tax y	ear.	
(A)								(B)		(C)
Name and business		_	~=				_	Description of s	ervices	Compensation
STEADY PLATFORM INC., 101		A	ST	•]	NW					12 442 000
SUITE 2500, ATLANTA, GA 3 COMMUNITY FINANCIAL RESOU		10	0					CONSULTING		13,442,000.
REDWOOD ROAD 20A-433, OAK	-			61	9			CONSULTING		2,205,914.
RAISE FOR GOOD LLC, 2261								001100212110		
UNIT 4260, SAN FRANCISCO,								CONSULTING		1,570,448.
BAY AREA COMMUNITY SERVIC	ES INC.									
390 40TH STREET, OAKLAND,	CA 946	09					_	CONSULTING		857,774.
VCHIEF, LLC		~	_	~ -		~				<i>C</i> 4
2041 EAST STREET PMB 7, C								CONSULTING		614,598.
 Total number of independent contractors (ir \$100,000 of compensation from the organiz 	-	ot lin	nited	to t	thos 60		ed	above) who received me	ore than	
	auon				50	,				

232008 12-13-22

Form 990 (2022)

9 2022.05030 TIDES CENTER

		Check if Schedule O	oonic		100		(A)	(B)	(C)	(D)
							Total revenue	Related or exempt		Revenue exclude from tax under sections 512 - 51
ts	1 a	Federated campaigns		1a						
and Other Similar Amounts	b	Membership dues		1b						
Ĭ	с	Fundraising events		1c		1,007,718.				
ar /		Related organizations				11,881,163.				
Ē		Government grants (contr				31,185,817.				
3	f	All other contributions, gifts,	grant	s, and						
the		similar amounts not included	l abov	e 1f		196,103,507.				
0	g	Noncash contributions included in	lines 1	a-1f 1g \$		298,686.				
aŭ	h	Total. Add lines 1a-1f					240178205.			
						Business Code				
	2 a	CONTRACT FEES				541900	27,991,998.	27991998.		
Ð	b	GOVERNMENT CONTRACT				541900	4,610,050.	4,610,050.		
nue	с	MEMBERSHIP REVENUES				900099	2,085,257.	2,085,257.		
eve	d	RENTAL INCOME - NP (ORGA	NIZATION		531120	1,424,902.	1,424,902.		
Kevenue	е	CONFERENCE/EVENT REV	VENU	E		900099	1,156,405.	1,156,405.		
	f	All other program service	rever	nue		900099	359,702.	359,702.		
	g	Total. Add lines 2a-2f					37,628,314.			
	3	Investment income (includ	ding o	dividends, in	tere	st, and				
		other similar amounts)					3,362,400.			336240
	4	Income from investment of	of tax	-exempt bor	nd p	roceeds				
	5	Royalties			<u></u>		861.	861.		
				(i) Real		(ii) Personal				
	6 a	Gross rents	6a							
	b	Less: rental expenses	6b							
	с	Rental income or (loss)	6c							
		Net rental income or (loss)	<i></i>						
	7 a	Gross amount from sales of		(i) Securiti	es	(ii) Other				
		assets other than inventory	7a			44713152.				
	b	Less: cost or other basis				44600004				
		and sales expenses				44693284.				
		Gain or (loss)				19,868.	10.000	10.000		
		Net gain or (loss)			·····		19,868.	19,868.		
	8 a	Gross income from fundraisi								
		including \$ 1,								
		contributions reported on				206 647				
		Part IV, line 18			<u>8a</u>	296,647. 940,665.				
		Less: direct expenses			8b	940,005.	-644,018.			-644,01
		Net income or (loss) from		0	ts l		-044,010.			-044,01
	9 a	Gross income from gamin	-							
	L	Part IV, line 19			9a					
		Less: direct expenses			9b					
			-	-	<u> </u>					
	iu a	Gross sales of inventory, I and allowances			10a					
					10a					
		Less: cost of goods sold				1				
		Not income or (loss) from		orniveritor	у	Business Code				
		Net income or (loss) from	ouloc							
	с	Net income or (loss) from	Juice			Business sour				
	<u>с</u> 11 а	Net income or (loss) from								
	<u>с</u> 11 а b	Net income or (loss) from			_					
	<u>с</u> 11 а b с					900099	929 142			929 14
	<u>c</u> 11 a b c d	Net income or (loss) from All other revenue Total. Add lines 11a-11d				900099	929,142. 929,142.			929,14

232009 12-13-22

Form 990 (2022) TIDES CENTER
Part VIII Statement of Revenue

Form **990** (2022)

94-3213100 Page 9

 Form 990 (2022)
 TIDES
 CENTER

 Part IX
 Statement of Functional Expenses

X

Section 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must coi	mplete column (A).	
Check if Schedule O contains a respor	nse 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	(C) Management and	

	Check if Schedule O contains a respo				X
	not include amounts reported on lines 6b, 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	201,090,154.	201,090,154.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	39,833.	39,833.		
3	Grants and other assistance to foreign				
_	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	4,866,431.	4,866,431.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
5	-				
~	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
	persons described in section 4958(c)(3)(B)			0 000 500	10 (70 051
7	Other salaries and wages	75,956,768.	55,184,924.	8,092,593.	12,679,251.
8	Pension plan accruals and contributions (include		1 606 040	005 510	
	section 401(k) and 403(b) employer contributions)	2,210,564.	1,606,043.	235,518.	369,003.
9	Other employee benefits	10,507,370.		1,119,477.	1,753,966.
10	Payroll taxes	5,719,954.	4,155,722.	609,416.	954,816.
11	Fees for services (nonemployees):				
а	Management				
b	Legal	814,393.		814,393.	
с	Accounting	88,079.		88,079.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	293,157.			293,157.
f	Investment management fees	130,921.	130,921.		
g	Other. (If line 11g amount exceeds 10% of line 25,				
•	column (A), amount, list line 11g expenses on Sch O.)	53,551,324.	53,055,106.		496,218.
12	Advertising and promotion	1,033,469.			53,459.
13	Office expenses	2,025,773.		215,830.	338,157.
14	Information technology	1,696,841.	1,672,854.		23,987.
15	Royalties				
16	Occupancy	6,404,493.	6,304,867.		99,626.
17		5,784,159.	4,202,369.	616,256.	965,534.
	Travel Payments of travel or entertainment expenses	5,104,155.	4,202,305.	010,230.	
18	for any federal, state, or local public officials				
40		2,010,767.	2,010,767.		
19	Conferences, conventions, and meetings	809.	809.		
20	Interest	009.	009.		·
21	Payments to affiliates	558,082.			
22	Depreciation, depletion, and amortization	935,457.	558,082. 935,421.		36.
23	Insurance	935,457.	935,421.		30.
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.)	400 070	496 000		1 000
a	LICENSES	488,079.	486,090.		1,989.
b	BANKING FEES	158,818.	148,389.	10 000	10,429.
С	BOARD EXPENSES	13,763.		13,763.	
d				01 050 001	440.005
е	All other expenses	39,517,596.		21,252,804.	442,065.
25	Total functional expenses. Add lines 1 through 24e	415,897,054.	364,357,232.	33,058,129.	18,481,693.
26	$\ensuremath{\textbf{Joint costs}}$. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
232010) 12-13-22				Form 990 (2022)
		11			

18250125 149058 94-3213100

		Check if Schedule O contains a response or not	e to an	v line in this Part X				
				,	(A)		(B)	
					Beginning of year		End of year	
	1	Cash - non-interest-bearing			175,930,527.	1	172,052,488.	
	2	Savings and temporary cash investments				2		
	3	Pledges and grants receivable, net			216,014,133.	з	88,485,531.	
	4	Accounts receivable, net			2,680,111.	4	4,002,037.	
	5	Loans and other receivables from any current or						
		trustee, key employee, creator or founder, subst	antial o	contributor, or 35%				
		controlled entity or family member of any of thes	e pers	ons		5		
	6	Loans and other receivables from other disqualit	ied pe	rsons (as defined				
		under section 4958(f)(1)), and persons described	l in sec	tion 4958(c)(3)(B)		6		
s	7	Notes and loans receivable, net				7		
Assets	8	Inventories for sale or use				8		
Ä	9	B			498,627.	9	325,607.	
	10a	Land, buildings, and equipment: cost or other						
		basis. Complete Part VI of Schedule D	10a	16,454,493.				
	b	Less: accumulated depreciation	10b	986,000.	15,872,549.	10c	15,468,493.	
	11	Investments - publicly traded securities			124,596,793.	11	141,904,440.	
	12	Investments - other securities. See Part IV, line 1	1			12		
	13	Investments - program-related. See Part IV, line	11			13		
	14	Intangible assets			3,015,070.	14	9,323,602.	
	15	Other assets. See Part IV, line 11	Other assets. See Part IV, line 11					
	16	Total assets. Add lines 1 through 15 (must equa	538,607,810.	16	431,562,198.			
	17	Accounts payable and accrued expenses			20,012,523.	17	48,489,921.	
	18	Grants payable			680,844.	18	7,490,298.	
	19	Deferred revenue			631,810.	19	300,452.	
	20	Tax-exempt bond liabilities				20		
	21	Escrow or custodial account liability. Complete I	Part IV	of Schedule D	45,000.	21	0.	
Se	22	Loans and other payables to any current or form	er offic	cer, director,				
Liabilities		trustee, key employee, creator or founder, subst						
iab		controlled entity or family member of any of thes				22		
	23	Secured mortgages and notes payable to unrela				23		
	24	Unsecured notes and loans payable to unrelated				24		
	25	Other liabilities (including federal income tax, pa						
		parties, and other liabilities not included on lines	17-24). Complete Part X			12 400 200	
		of Schedule D			11,015,509.		<u>13,406,329</u> . 69,687,000.	
	26		<u></u>		32,385,686.	26	09,007,000.	
ŝ		Organizations that follow FASB ASC 958, che	ck her	e 🔼				
nce	07	and complete lines 27, 28, 32, and 33.			157,216,613.	07	95,635,141.	
ala	27				349,005,511.	27 28	266,240,057.	
dВ	28	Net assets with donor restrictions Organizations that do not follow FASB ASC 9			J49,005,JII.	28	200,240,037.	
'n		and complete lines 29 through 33.	56, CH					
۲ ک	29	Capital stock or trust principal, or current funds				29		
ets	30	Paid-in or capital surplus, or land, building, or ec				30		
Assi	31	Retained earnings, endowment, accumulated in		and a the set of second a		31		
Net Assets or Fund Balances	32	Total net assets or fund balances			506,222,124.	32	361,875,198.	
Ż	33	Total liabilities and net assets/fund balances			538,607,810.	33	431,562,198.	
							Form 990 (2022)	

Form 990 (2022)
Part X Balance Sheet

TIDES CENTER

	90 (2022) TIDES CENTER	94-	-3213	100	Pa	_{ge} 12
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1 T	otal revenue (must equal Part VIII, column (A), line 12)	1		,47		
2 T	otal expenses (must equal Part IX, column (A), line 25)	2		,89'		
3 F	Revenue less expenses. Subtract line 2 from line 1	3	-134			
4 N	let assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		,22		
5 N	let unrealized gains (losses) on investments	5	-10	, 39	0,0	48.
6 [Donated services and use of facilities	6				
	nvestment expenses	7				
	rior period adjustments	8				
9 (Other changes in net assets or fund balances (explain on Schedule O)	9		46	5,4	04.
10 N	let assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	olumn (B))	10	361	,87	5,1	<u>98.</u>
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1 A	ccounting method used to prepare the Form 990: 📃 Cash 🛛 🖾 Accrual 📃 Other					
lt	the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.				
2 a V	Vere the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
lt	"Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
s	eparate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b٧	Vere the organization's financial statements audited by an independent accountant?			2b	Х	
lt	"Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
c	onsolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
c li	"Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
r	eview, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
lt	the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule C).			
3a A	s a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					1
ι	Iniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a	Х	
b lf	"Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed auc	it			1
0	r audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	X	

Form **990** (2022)

232012 12-13-22

Department of the Treasury

(Form 990)

Total

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047
2022
Open to Public Inspection

Interr	al Reve	enue Service		Go to www.irs.gov/	/Form990 for instruction	ns and the	e latest inf	ormation.		Inspection
Nar	ne of	the organizati								identification number
		Decem		S CENTER					9	4-3213100
Pa	nrt I	Reason	for Public (Charity Status.	(All organizations must c	omplete tl	nis part.) S	ee instruction	ıs.	
	orgar		•		For lines 1 through 12, c		,			
1		-			on of churches described		on 170(b)(⁻	1)(A)(i).		
2					(Attach Schedule E (Forn					
3		•	•		anization described in so			•		
4			-	ation operated in co	njunction with a hospital	described	in sectio	on 170(b)(1)(A	.)(iii). Enter	the hospital's name,
_		city, and stat	-							
5					llege or university owned	or operat	ed by a go	overnmental L	Init describe	ea in
6				Complete Part II.)	nantal unit described in	ocotion 1	70/6//4//4/	(.)		
6	X				nental unit described in Intial part of its support fi				ha gaparal i	aublic described in
'	21	•		complete Part II.)	initial part of its support if	on a gove	ennentai		ne general j	
8					(1)(A)(vi). (Complete Par	+ 11)				
9	\square	-			in section 170(b)(1)(A)	-	ed in coniu	inction with a	land-grant	college
5					culture (see instructions).					
		university:		grant conego er agne			name, eny	, and otato of	the conege	
10			on that norma	ally receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersł	nip fees, and	d gross receipts from
		0			ct to certain exceptions; a			-	•	•
					(less section 511 tax) fro					-
				mplete Part III.)						
11		An organizati	on organized a	and operated exclus	ively to test for public sa	fety. See	section 50	09(a)(4).		
12		An organizati	on organized a	and operated exclus	ively for the benefit of, to	perform t	he functio	ns of, or to ca	arry out the	purposes of one or
		more publicly	/ supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section	509(a)(3). 🤇	Check the box on
	_	_	-	• •	of supporting organization		-		-	
a		_ Type I. A s	upporting orga	anization operated, s	supervised, or controlled	by its sup	oorted org	anization(s), t	ypically by	giving
			-		gularly appoint or elect a	majority o	of the direc	ctors or truste	es of the su	upporting
	_			complete Part IV, Se						
k				-	d or controlled in connect			-		-
			•		anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	ported
	_			st complete Part IV,						-1 24-
c			-		ng organization operated				lly integrate	a with,
					b). You must complete l porting organization oper				rtod organi-	ration(a)
c		_ ,,	-		zation generally must sat				0	()
			-		mplete Part IV, Sections	-		-		7611655
e			-	-	written determination fro				II. Type III	
	·		•		nally integrated supporti			, , , , , , , , , , , , , , , , , , , ,	n, 19po m	
f	Ent	er the number	0 ,			0 0				
				n about the supporte						
		(i) Name of supp	orted	(ii) EIN	(iii) Type of organization		anization listed ing document?	(v) Amount c	-	(vi) Amount of other
		organizatior	ו		(described on lines 1-10 above (see instructions))	Yes	No	support (see i	nstructions)	support (see instructions
							1			

Schedule A	Form	990	202
Schedule A	FOILIT	990	12024

TIDES CENTER

JE JELJEVU Faue	9	4 –	3	2	1	3	1	0	0	Page 2
-----------------	---	-----	---	---	---	---	---	---	---	--------

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	137116829	171030552	250396656	507668796	239022118	1305234951.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	137116829	171030552	250396656	507668796	239022118	1305234951.
	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						118090421
6	Public support. Subtract line 5 from line 4.						1187144530.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
		137116829	171030552	250396656	507668796		1305234951.
8	Gross income from interest,						
Ŭ	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1722664.	2113792.	4457722.	2267967.		10562145.
9	Net income from unrelated business	17220010		11377220	22079071		103021130
9	activities, whether or not the						
	business is regularly carried on			13,375.			13,375.
10	Other income. Do not include gain			13,313.			13,313.
10	· ·						
	or loss from the sale of capital	162,840.				853 004	1015844.
44	assets (Explain in Part VI.) Total support. Add lines 7 through 10	102,040.				000,0040	1316826315.
	Gross receipts from related activities,		200			12 97	,950,126.
	First 5 years. If the Form 990 is for th		,	fourth or fifth tax y			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
13	organization, check this box and stop						
Sec	ction C. Computation of Publi		centage				
	Public support percentage for 2022 (I			column (f))		14	90.15 %
	Public support percentage from 2021					15	88.28 %
100	16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization X						
h	stop here. The organization qualifies as a publicly supported organization LA b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
N	and stop here. The organization qualifies as a publicly supported organization						
17-	10% -facts-and-circumstances test		• •				
170							
	and if the organization meets the fact			-	-	-	
Ŀ	meets the facts-and-circumstances te	-				7a and line 15 is 1	
D D	10% -facts-and-circumstances test						070 01
	more, and if the organization meets the						
10	organization meets the facts-and-circu						
18	Private foundation. If the organization	n did not check a		a, 100, 17a, 0r 170	, check this box a		(Eorm 990) 2022

Schedule A (Form 990) 2022

232022 12-09-22

	Schedule A (Form 990) 202
--	--------------	----------	-------

TIDES CENTER

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
•	the organization without charge						
	Total. Add lines 1 through 5						<u> </u>
/a	Amounts included on lines 1, 2, and 3 received from disgualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support					_	
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	0			•		
	check this box and stop here	- 0					
	ction C. Computation of Publi						
	Public support percentage for 2022 (I			column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inves					1 1	
	Investment income percentage for 20			ine 13, column (f))		17	%
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2022. If the						ine 17 is not
	more than 33 1/3%, check this box ar	-	•		•••		
b	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	u box on line 14, 19	a, or 19b, check t	his box and see ins		L
23202	3 12-09-22					Scheo	dule A (Form 990) 2022

16 2022.05030 TIDES CENTER

Yes No

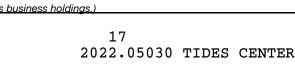
Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

232024 12-09-22



1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

Schedule A (Form 990) 2022

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s)</i> effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised or controlled the supporting organization	2		1

supervised	or controlled the supporting organization.	
Section C. Ty	vpe II Supporting Organizations	

 Yes
 No

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed
 Image: Control or management of the support organization (s)
 Image: Control or management of the support organization (s)
 Image: Control or management of the support organization (s)
 Image: Control or management or managed
 Image: Control or management or managed
 Image: Control or management or ma

Section D	. All Type	e III Supporting	Organizations	
				-

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

Section E. Type III Functionally Integrated Supporting Organizations

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

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

с	The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instructions).
C	The organization supported a governmental entity.	Describe in Fait VI now you supported a governmental entity (see instruction <u>s).</u>

- 2 Activities Test. Answer lines 2a and 2b below.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*

 Yes
 No

 2a
 ...

 2a
 ...

 2b
 ...

 3a
 ...

 3b
 ...

Schedule A (Form 990) 2022

V. N

232025 12-09-22

18 2022.05030 TIDES CENTER

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on N	ov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
All other Type III non-functionally integrated supporting organizations must	st complete S	ections A through E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional	ally integrated	I Type III supporting orga	nization (see

TIDES CENTER

instructions).

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

94-3213100 Page 6

232026 12-09-22

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

20

2022.05030 TIDES CENTER

(i)

Excess Distributions

TIDES CENTER

Amounts paid to perform activity that directly furthers exempt purposes of supported

5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)

Administrative expenses paid to accomplish exempt purposes of supported organizations

Distributions to attentive supported organizations to which the organization is responsive

1 Amounts paid to supported organizations to accomplish exempt purposes

organizations, in excess of income from activity

Other distributions (describe in Part VI). See instructions.

Total annual distributions. Add lines 1 through 6.

Distributable amount for 2022 from Section C, line 6

Amounts paid to acquire exempt-use assets

(provide details in Part VI). See instructions.

Section E - Distribution Allocations (see instructions)

Line 8 amount divided by line 9 amount

Schedule A (Form 990) 2022

Section D - Distributions

2

3

4

6

7

8

9

10

94-3213100 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

1

2

3 4

5

6

7

8 9

10

(ii)

Underdistributions

Current Year

(iii)

Distributable

Schedule A (Form 990) 2022

TIDES CENTER

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

REIMBURSEMENTS 2018 AMOUNT: \$ 162,840. 853,004. 2022 AMOUNT: \$ Schedule A (Form 990) 2022 232028 12-09-22

18250125 149058 94-3213100

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2022

Employer identification number

94-3213100

Schedule	В
(Form 990)	

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

TIDES CENTER

η

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

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

General Rule

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

Special Rules

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

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

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

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

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

Schedule B (Form 990) (2022)

Name of or	Employer identification number		
TIDES	94-3213100		
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Type of contribution
1		\$ <u>16,920,2</u>	250. Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Dns Type of contribution
2		\$ <u>13,978,8</u>	300. Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Type of contribution
3		\$ <u>12,761,4</u>	Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ons Type of contribution
4		\$ 11,283,6	515. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Type of contribution
5		\$9,833,5	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Dns Type of contribution
6		\$8,020,0	000. Person X Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (202

Schedule B (Form 990) (2022)

94-32131

Schedule B (Form 990) (2022)

Page 2

Name of or	rganization	Employer identification number		
TIDES	94-3213100			
Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution	
7		\$6,730,0	Person X Payroll Image: Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution	
8		\$5,508,9	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution	
9		\$5,000,0	00. (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution	
		\$5,000,0	00. (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution	
		\$	Person Payroll Payroll (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution	
		\$	Person Payroll On Complete Part II for noncash contributions.)	

Schedule B (Form 990) (2022)

94-32131

223452 11-15-22

Schedule B (Form 990) (2022)

25 2022.04030 TIDES CENTER

	3 (Form 990) (2022)		Page
Name of or	ganization		Employer identification number
TIDES	CENTER		94-3213100
Part II	Noncash Property (see instructions). Use duplicate copies of Part	t II if additional space is needed	I.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions)	
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions)	
		s	

223453 11-15-22

26 2022.05030 TIDES CENTER

Schedule B (Form 990) (2022)

Schedule E	B (Form 990) (2022)		Page
Name of or	rganization		Employer identification number
TIDES	CENTER		94-3213100
Part III) through (e) and the following line entry charitable, etc., contributions of \$1,000 or le	ction 501(c)(7), (8), or (10) that total more than \$1,000 for the year y. For organizations
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	L
-	Transferee's name, address, a	Ind ZIP + 4	Relationship of transferor to transferee
(-) No			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	t
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Ī		(e) Transfer of gift	t i
-	Transferee's name, address, a	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	<u> </u> t
-	Transferee's name, address, a	Ind ZIP + 4	Relationship of transferor to transferee

18250125 149058 94-3213100

Schedule B (Form 990) (2022)

(For Org	anizations Exempt From Incor	me Tax Under section	501(c) and section 527	
Department of the Treasury	Complete	if the organization is describe	d below. Attach to F	Form 990 or Form 990-EZ	Open to Public
nternal Revenue Service	Ge	o to www.irs.gov/Form990 for	instructions and the la	atest information.	Inspection
f the organization a	nswered "Yes," or	n Form 990, Part IV, line 3, or F	orm 990-EZ, Part V, li	ne 46 (Political Campaign	Activities), then
 Section 501(c)(3) 	organizations: Corr	plete Parts I-A and B. Do not co	omplete Part I-C.		
		01(c)(3)) organizations: Complete	Parts I-A and C below	. Do not complete Part I-B.	
 Section 527 orga 	•				
		Form 990, Part IV, line 4, or F			
	•	have filed Form 5768 (election u		•	•
	•	have NOT filed Form 5768 (elect			•
r the organization a [ax] (See separate i		n Form 990, Part IV, line 5 (Pro	xy Tax) (See separate	Instructions) or Form 990	-EZ, Part V, line 35c (Proxy
		tions: Complete Part III.			
Name of organization				Em	oloyer identification number
	TIDES C	ENTER			94-3213100
Part I-A Com	plete if the org	anization is exempt und	er section 501(c)	or is a section 527 o	rganization.
1 Provide a descri	ption of the organiz	ation's direct and indirect polition	cal campaign activities	in Part IV.	
2 Political campaig	gn activity expendit	ures			\$
3 Volunteer hours	for political campai	gn activities			
David D. Carry	alata if the ave		an eastion E01(a)	(0)	
	• •	anization is exempt und			•
		incurred by the organization und			\$
		incurred by organization manag			
		n 4955 tax, did it file Form 4720			
b If "Yes," describ					
		anization is exempt und	er section 501(c),	except section 501(c)(3).
1 Enter the amour	nt directly expended	by the filing organization for se	ction 527 exempt func	tion activities	\$
		ization's funds contributed to of			·
exempt function					\$
3 Total exempt fui		. Add lines 1 and 2. Enter here a			
line 17b					\$
4 Did the filing org	anization file Form	1120-POL for this year?			Yes No
made payments	. For each organiza	nployer identification number (El tion listed, enter the amount pai	d from the filing organi	zation's funds. Also enter th	ne amount of political
	•	omptly and directly delivered to			te segregated fund or a
		additional space is needed, prov			
(a) Na	ame	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

Political Campaign and Lobbying Activities

SCHEDULE C

(Form 990)

232041 11-08-22

LHA

OMB No. 1545-0047

	TIDES CENT				3213100 Page 2
Part II-A Complete if the org section 501(h)).	anization is exe	empt under sectio	n 501(c)(3) and file	d Form 5768 (el	ection under
	tion belongs to an a	ffiliated group (and list i	n Part IV each affiliated g	group member's nam	ne, address, EIN,
	e of excess lobbying		·		
		and "limited control" pr	ovisions apply.		
Limi	ts on Lobbying Exp	·		(a) Filing organization's	(b) Affiliated group totals
			,	totals	
1a Total lobbying expenditures to influ					
b Total lobbying expenditures to influ					
c Total lobbying expenditures (add li					
d Other exempt purpose expenditure			F		
e Total exempt purpose expenditure					
f Lobbying nontaxable amount. Enter					
If the amount on line 1e, column (a) o		bbying nontaxable an			
Not over \$500,000		of the amount on line 1e			
Over \$500,000 but not over \$1,000	· · · · · · · · · · · · · · · · · · ·	000 plus 15% of the exc			
Over \$1,000,000 but not over \$1,5		000 plus 10% of the exc			
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.		ess over \$1,500,000.		
Over \$17,000,000	\$1,00	J,000.			
i Subtract line 1f from line 1c. If zero j If there is an amount other than ze reporting section 4911 tax for this (Some organizations the	ro on either line 1h o year? 4-Year A	r line 1i, did the organiz	ation file Form 4720 r Section 501(h)		Yes No
	•	arate instructions for li			
	Lobbying Exp	enditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					
				School	lula C (Earm 990) 2022

Schedule C (Form 990) 2022

232042 11-08-22

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

r each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description (a)		a)	(b)	
of the lobbying activity.	Yes	No	Amo	unt
1 During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?	X			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		-	
c Media advertisements?	X			<u>,538.</u>
d Mailings to members, legislators, or the public?	X		4	<u>,275.</u>
e Publications, or published or broadcast statements?	X		0.4.1	575.
f Grants to other organizations for lobbying purposes?	X			<u>,686.</u>
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X			<u>,358.</u>
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X			<u>,396.</u>
i Other activities?	X			,032.
j Total. Add lines 1c through 1i		v	1,045	<u>,860.</u>
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section	$\frac{1}{00501(c)}$	5) or sec	tion	
501(c)(6).		<i>bj</i> , or see		
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 				
 Bid the organization make only influese lobbying expenditures of \$2,000 of less? Bid the organization agree to carry over lobbying and political campaign activity expenditures from the second s				
Part III-B Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5). or sec	tion	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				3. is
answered "Yes."		. ,		
1 Dues, assessments and similar amounts from members		1		
 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polit 				
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year				
c Total				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
expenditures next year?		4		
5 Taxable amount of lobbying and political expenditures. See instructions		5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	o list); Part II	A, lines 1 a	nd 2 (See	
instructions); and Part II-B, line 1. Also, complete this part for any additional information.				
PART II-B, LINE 1, LOBBYING ACTIVITIES:				
TIDES CENTER, THROUGH ITS FISCALLY SPONSORED PROJECTS	, ENGAC	GES IN		
LOBBYING ACTIVITIES IN SUPPORT OF A WIDE VARIETY OF I	SSUES A	AND CA	USES	
TO ADVANCE TIDES' MISSION TO ACCELERATE THE PACE OF SO	DCIAL (CHANGE	,	
INCLUDING IN THE AREAS OF EDUCATION, ENVIRONMENT, AND	EOUITY	ζ.		

232043 11-08-22

Schedule C (Form 990) 2022

232051 09-01-22

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.



Department Internal Rev

		90 for instructions and the latest information.		Inspection
Nam	e of the organization TIDES CENTER		Emp	ployer identification number $94 - 3213100$
Pa	t I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, li		coun	Its. Complete if the
		(a) Donor advised funds	(b) Fun	ds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fund	ds	
	are the organization's property, subject to the organization's	s exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor	advisors in writing that grant funds can be used o	nly	
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose conferr	ing	
_				
Pa	t II Conservation Easements. Complete if the o	rganization answered "Yes" on Form 990, Part IV	line 7.	
1	Purpose(s) of conservation easements held by the organizat	tion (check all that appl <u>y).</u>		
	Preservation of land for public use (for example, recre	ation or education)	orically	important land area
	Protection of natural habitat	Preservation of a cert	fied his	storic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qual	lified conservation contribution in the form of a co	nserva	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b			2b	
С	Number of conservation easements on a certified historic st		2c	
d	Number of conservation easements included in (c) acquired			
	historic structure listed in the National Register		2d	<u> </u>
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the organ	zation	during the tax
	year			
4	Number of states where property subject to conservation ea			
5	Does the organization have a written policy regarding the pe			
-	violations, and enforcement of the conservation easements			
6	Staff and volunteer hours devoted to monitoring, inspecting	i, handling of violations, and enforcing conservation	n ease	ments during the year
7	Amount of expenses incurred in monitoring, inspecting, han	ndling of violations, and enforcing conservation ea	sement	s during the year
8	Does each conservation easement reported on line 2(d) abo and section 170(h)(4)(B)(ii)?	• • • • • • • • • • • • • • • • • • • •		YesNo
9	In Part XIII, describe how the organization reports conservat			d
	balance sheet and include if applicable the text of the foot			

balan	ce sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the
orgar	ization's accounting for conservation easements.
Part III	Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance shee	t works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of pu	blic service,
	provide the following amounts relating to these items:	
	(i) Revenue included on Form 990, Part VIII, line 1	\$

LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule D (Form 990) 2022
b	Assets included in Form 990, Part X	\$
а	Revenue included on Form 990, Part VIII, line 1	\$
	the following amounts required to be reported under FASB ASC 958 relating to these items:	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provid	e
	(ii) Assets included in Form 990, Part X	\$

31 2022.05030 TIDES CENTER

Sche	dule D (Form 990) 2022 TIDES C								213100		ige 2	
Par	t III Organizations Maintaining C	ollections of Ar	t, Hist	orical Tre	asures, o	r Othe	r Simila	r Asset	s (contin	ued)		
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the f	ollowing that	t make si	gnificant ı	use of its				
	collection items (check all that apply):											
а	Public exhibition	d			hange progra							
b	Scholarly research	e		Other								
с												
4												
5	During the year, did the organization solicit of								_		1	
Dar	to be sold to raise funds rather than to be maintained as part of the organization's collection?											
Fai	reported an amount on Form 990, Pa		ete if the	organizatio	n answered	"Yes" on	Form 990	, Part IV	line 9, or			
10	· · ·		ion for	ontribution	or other and	ooto poti	included					
Id	Is the organization an agent, trustee, custod							Г	Yes	x	No	
h	on Form 990, Part X?							∟	165	- 23		
5		and complete the lot	lowing t	able.					Amount	t		
с	Beginning balance						1c					
	Additions during the year											
	Distributions during the year											
	Ending balance											
	Did the organization include an amount on F								X Yes		No	
	If "Yes," explain the arrangement in Part XIII.									X]	
Par	t V Endowment Funds. Complete	if the organization an	swered	"Yes" on Fo	rm 990, Part	IV, line	10.		_			
		(a) Current year	(b) F	rior year	(c) Two yea	rs back	(d) Three y	/ears back	(e) Four	years I	back	
1a	Beginning of year balance											
b	Contributions											
С	Net investment earnings, gains, and losses								_			
d	Grants or scholarships											
е	Other expenditures for facilities											
	and programs											
	Administrative expenses								_			
g	End of year balance											
2	Provide the estimated percentage of the curr			g, column (a))) held as:							
a	Board designated or quasi-endowment		_%									
b	Permanent endowment	%										
С	Term endowment	<u>%</u>										
20	Are there endowment funds not in the posse	-	tion tha	t are hold ar	nd administa	rod for th						
Ja	organization by:	ssion of the organiza		i ale neiù ai					ſ	Yes	No	
	(i) Unrelated organizations								3a(i)			
	(ii) Related organizations											
b	If "Yes" on line 3a(ii), are the related organization											
4	Describe in Part XIII the intended uses of the											
Par	t VI Land, Buildings, and Equipm											
	Complete if the organization answere	d "Yes" on Form 990), Part IV	/, line 11a. S	ee Form 990), Part X,	line 10.					
	Description of property	(a) Cost or o basis (investr			or other (other)		ccumulate preciation		(d) Bool	< value	;	
1a	Land											
	Buildings				2,180.		57 4, 1		L5,32'			
	Leasehold improvements				6,403.		186,4),00		
d	Equipment			27	5,910.		225,4	03.	50),50)7.	
e	Other											
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colun	nn (B), line 1	0c.)				L5,468	3,49	93.	

Schedule D (Form 990) 2022

18250125 149058 94-3213100

Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-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	e 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.	15.)		l
Complete if the organization answered "Yes"	on Form 990. Part IV line	e 11e or 11f. See Form 990. Part X. line 25	
(a) Description of liability			(b) Book value
(1) Federal income taxes			
(1) Federal Income taxes (2) SECURITY DEPOSITS			203,226.
(3) DUE TO RELATED ORGANIZATIO	NS		11,776,913
(4) 457 RETIREMENT PLAN	/11.0		835,756
(5) LEASE LIABILITY			590,434
			,434
(6)			
(7)			
(8)			
(9)			13,406,329.
Total. (Column (b) must equal Form 990, Part X, col. (B) line	<u>, 25.)</u>		L T2,400,329.

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

Schedule D (Form 990) 2022

232053 09-01-22

Sche	dule D (Form 990) 2022 TIDES CENTER		94-3213100 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Sta	tements With Reven	ue per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	ne 12a.	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
с	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.	<u>)</u>	
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	-	nses per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	ne 12a.	
1			1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	
а	Donated services and use of facilities	<u>2</u> a	
b	Prior year adjustments		
с	Other losses		
d			
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	4b	
С			
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8.)	
Pa	rt 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 IV, LINE 2B:

DURING 2021, THE ORGANIZATION HELD FUNDS IN AN AGENCY CAPACITY (ON BEHALF							
OF THE THOMAS J. LONG FOUNDATION, WHICH IS WINDING DOWN OPERATIONS) FOR							
THE ULTIMATE BENEFIT OF LINCOLN ELEMENTARY SCHOOL IN THE WEST CONTRA COSTA							
UNIFIED SCHOOL DISTRICT. TIDES CENTER HAS NO VARIANCE POWER IN DETERMINING							
THE GRANTEE, AND THUS RECORDED AN ASSET (CASH) AS WELL AS A CORRESPONDING							
LIABILITY UPON RECEIPT OF THE PASS-THROUGH FUNDS; ITEMS ARE NOT RECORDED							
WITHIN REVENUES OR EXPENSES IN REGARDS TO THIS ARRANGEMENT.							

PART X, LINE 2:

MANAGEMENT EVALUATED TIDES ORGANIZATIONS' TAX POSITIONS AND CONCLUDED THAT

THEY HAD MAINTAINED THEIR TAX EXEMPT STATUS AND HAD TAKEN NO UNCERTAIN TAX
232054 09-01-22
34
Schedule D (Form 990) 2022

	Schedule D (Form 990) 2022	TIDES	CENTER
--	----------------------	--------	-------	--------

Part XIII Supplemental Information (continued)

POSITIONS THAT REQUIRE ADJUSTMENT TO THE CONSOLIDATED FINANCIAL

STATEMENTS. THEREFORE, NO PROVISION OR LIABILITY FOR INCOME TAXES HAS BEEN

INCLUDED IN THE CONSOLIDATED FINANCIAL STATEMENTS.

Schedule D (Form 990) 2022

232055 09-01-22

SCHEDULE F	Stateme	Statement of Activities Outside the United States					
(Form 990)		Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.					
	·	Attach to Form 990.					
Department of the Treasury Internal Revenue Service	Go to w	ww.irs.gov/Forn	1990 for instructions and the latest in	nformation.	Open to Public Inspection		
Name of the organization	1				Employer id	entification number	
TIDES CENTER					94-321		
Part I General	Information on A	ctivities Out	side the United States. Comple	ete if the organ	ization answer	ed "Yes" on	
Form 990, F	Part IV, line 14b.						
-	-		ds to substantiate the amount of its gra the selection criteria used to award the			X Yes No	
2 For grantmakers. United States.	Describe in Part V the	e organization's	procedures for monitoring the use of its	grants and ot	her assistance	outside the	
3 Activities per Regio	on. (The following Parl	t I, line 3 table ca	an be duplicated if additional space is n	eeded.)			
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	vity listed in (d) gram service, e specific type (s) in the regior	expenditures for and investments	
EAST ASIA AND THE PACIFIC	0	0	GRANT-MAKING			699,323.	
						,	
EUROPE (INCLUDING							
ICELAND & GREENLAND	0) 0	0	GRANT-MAKING			433,931.	
MIDDLE EAST AND NORTH AFRICA	0	0	GRANT-MAKING			710,007.	
RUSSIA AND NEIGHBORING STATES	0	0	GRANT-MAKING			735,574.	
SOUTH AMERICA	0	0	GRANT-MAKING			319,248.	
SOUTH ASIA	0	0	GRANT-MAKING			194,570.	
SUB-SAHARAN AFRICA	0	0	GRANT-MAKING			1,202,490.	
SUB-SANAKAN AFRICA	0	0	GRANI-MARING			1,202,490.	
NORTH AMERICA	0	0	GRANT-MAKING			332,031.	
3 a Subtotal	0	0				4,627,174.	
b Total from continua							
sheets to Part I \dots	0	0				152,507.	
c Totals (add lines 3	a						

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

0

0

Schedule F (Form 990) 2022

OMB No. 1545-0047

232071 10-17-22

and 3b)

4,779,681.

Schedule F (Form 990)	TIDES CE	NTER		94-321310	0 Page 1			
Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	 (e) If activity listed in (d) is a program service, describe specific type of service(s) in region 	(f) Total expenditures for region			
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANT-MAKING		152,507.			
Totals	•				152,507.			

232181 04-01-22

Part II

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
					ELECTRONIC			
		CENTRAL AMERICA	HEALTHY INDIVIDUALS		FUND/WIRE			
		AND THE CARIBBEAN	AND COMMUNITIES	112,507.	TRANSFER	Ο.		
					ELECTRONIC			
		CENTRAL AMERICA			FUND/WIRE			
		AND THE CARIBBEAN	QUALITY EDUCATION	20,000.	TRANSFER	Ο.		
					ELECTRONIC			
		CENTRAL AMERICA	SUSTAINABLE		FUND/WIRE			
		AND THE CARIBBEAN	ENVIRONMENT	20,000.	TRANSFER	0.		
			EQUITY, HUMAN RIGHTS,		ELECTRONIC			
		EAST ASIA AND THE	AND ECONOMIC		FUND/WIRE			
		PACIFIC	EMPOWERMENT	660,307.	TRANSFER	Ο.		
					ELECTRONIC			
		EAST ASIA AND THE	HEALTHY INDIVIDUALS		FUND/WIRE			
		PACIFIC	AND COMMUNITIES	39 017	TRANSFER	Ο.		
						••		
		EUROPE (INCLUDING	EQUITY, HUMAN RIGHTS,		ELECTRONIC			
		ICELAND AND	AND ECONOMIC		FUND/WIRE			
		GREENLAND)	EMPOWERMENT	433,931.	TRANSFER	Ο.		
					ELECTRONIC			
		MIDDLE EAST &	HEALTHY INDIVIDUALS		FUND/WIRE			
		NORTH AFRICA	AND COMMUNITIES	711,120.	TRANSFER	Ο.		
			EQUITY, HUMAN RIGHTS,		ELECTRONIC			
			AND ECONOMIC		FUND/WIRE			
		NORTH AMERICA	EMPOWERMENT		TRANSFER	0.		
			ecognized as charities by the		-	•		11
	other organizations of		or counsel has provided a sect	ion 501(c)(3) equ	uivalency letter	🟲 .		<u>⊥</u>

Schedule F (Form 990) 2022

Page 2

Schedule F (Form 990)		CENTER			94-32		<u></u>	Page
Part II Continuation of 1 (a) Name of organization	(b) IRS code section and EIN (if applicable) (c) Region		(d) Purpose of grant			90), Part II, line 1 (g) Amount of non-cash assistance) (h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		NORTH AMERICA	HEALTHY INDIVIDUALS AND COMMUNITIES	5,754.	ELECTRONIC FUND/WIRE TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT	664,834.	ELECTRONIC FUND/WIRE TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	HEALTHY INDIVIDUALS AND COMMUNITIES	70,740.	ELECTRONIC FUND/WIRE TRANSFER	0.		
		SOUTH AMERICA	HEALTHY INDIVIDUALS AND COMMUNITIES	319,248.	ELECTRONIC FUND/WIRE TRANSFER	0.		
		SOUTH ASIA	EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT	227,922.	ELECTRONIC FUND/WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT	576,373.	ELECTRONIC FUND/WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	HEALTHY INDIVIDUALS AND COMMUNITIES	626,116.	ELECTRONIC FUND/WIRE TRANSFER	0.		

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part III can be duplicated if additional space is needed.

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If "Yes,"</i> the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign <i>Corporation</i> (see Instructions for Form 926)	Yes	X 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	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>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)</i>	Yes	X 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? <i>If</i> "Yes," <i>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)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," <i>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)</i>	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see</i> <i>Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2022 TIDES CENTER

 Part V
 Supplemental Information

 Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of

investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

TIDES CONDUCTS AN INDEPENDENT REVIEW AND DUE DILIGENCE IN ADVANCE OF FUNDING TO ESTABLISH AND CONFIRM THAT SUPPORT FOR A GRANTEE WILL FURTHER TIDES' MISSION AND VIEWS AND THAT THE GRANTEE IS APPROPRIATELY STRUCTURED TO RECEIVE THE GRANT. POTENTIAL RECIPIENTS ARE REQUIRED TO PROVIDE PROOF OF TAX STATUS AND/OR REGISTRATION DOCUMENTS AND THEIR ORGANIZATIONAL DOCUMENTS. ALL GRANTEES ARE NOTIFIED OF THE TERMS AND CONDITIONS OF EACH

GRANT SHOULD IT BE AWARDED. ALL INTERNATIONAL GRANTS ARE RESTRICTED FOR

USE IN FURTHERANCE OF ONE OR MORE CLEARLY CHARITABLE OR EDUCATIONAL

PURPOSES CONSISTENT WITH TIDES' MISSION AND ITS TAX-EXEMPT STATUS.

GRANTEES ARE REQURIED TO CONFIRM THAT THE FUNDS WERE USED EXCLUSIVELY FOR

SUCH ACTIVITIES CONDUCTED OUTSIDE OF THE UNITED STATES.

PART I, LINE 3:

THE ORGANIZATION UTILIZES THE ACCRUAL METHOD TO ACCOUNT FOR EXPENDITURES

ON SCHEDULE F, PART I, LINE 3.

232075 10-17-22

(Form 990)		e organization answered "Yes" o organization entered more than \$				r 19, or if the		2022
Department of the Treasury		Attach to Form 990					C	Open to Public
Internal Revenue Service	Got	o www.irs.gov/Form990 for instr	ructions	and tl	he latest information	n.		nspection
Name of the organization						Employer	r iden	tification number
	TIDES C	ENTER				94-32	131	.00
Part I Fundraising		Complete if the organization answ t.	wered "Y	'es" or	n Form 990, Part IV, I	ine 17. Form 99	0-EZ f	ïlers are not
· · ·	· · ·	ed funds through any of the follow	ving activ	vities.	Check all that apply.			
a X Mail solicitation	-		-		overnment grants			
b X Internet and em	ail solicitations			-	nment grants			
c X Phone solicitati	ons	g X Spec		-	-			
d X In-person solicit	ations			-				
2 a Did the organization h	nave a written o	or oral agreement with any individu	al (incluc	ling of	ficers, directors, trus	tees, or		
key employees listed	in Form 990, P	art VII) or entity in connection with	professi	onal fi	undraising services?	X	Yes	No
b If "Yes," list the 10 hig	ghest paid indiv	viduals or entities (fundraisers) pure	suant to	agreei	ments under which th	ne fundraiser is t	to be	
compensated at least	\$5,000 by the	organization.						
(i) Name and address of or entity (fundrais		(ii) Activity	(iii) fundr have c or cor contrib	ustody ntrol of	(iv) Gross receipts from activity	(v) Amount pa to (or retained fundraiser listed in col.	by)	(vi) Amount paid to (or retained by) organization
	NG 421							
WAGNER LANE PRODUCTIO		CONGUL TING	Yes	No	22 477	22.4		0.
SOUTH DEARBORN ST, CH LEAD WITH LOVE, INC.		CONSULTING		X	23,477.	23,4	<i>''</i> .	0.
ALANDELE AVE, LOS ANG		CONSULTING		x	12,500.	12,5	0.0	0.
SHEELA SHANKAR - 1419	,				12,500.	12,5		0.
STREET, BERKELEY, CA		CONSULTING		x	12,300.	12,3	00.	0.
TANYA JEAN LOZANO - 2					,	,-		
SOUTH DAMEN AVE, CHIC		MEDIA COMMUNICATIONS		x	12,000.	12,0	00.	0.
AMBRELL GAMBRELL - 49					,	,		
KAMERLING AVE, CHICAG	O, IL	MEDIA COMMUNICATIONS		x	10,000.	10,0	00.	0.
HADAS DIMENTSTEIN - 1	820 ECHO							
PARK AVE APT 5, LOS A	NGELES,	CONSULTING		x	10,000.	10,0	00.	0.
EVERYTHING AUDIO VISU	AL CORP							
- 1498 CARROLL AVE, S	AN	MEDIA COMMUNICATIONS		x	8,665.	8,6	65.	0.
MEDIATANK PRODUCTIONS	, LLC -							
372 9TH STREET, UNIT	5F,	MEDIA COMMUNICATIONS		x	8,215.	8,2	15.	0.
CYNTHIA TAYLOR - 2335								
BROWNING STREET, BERK		MEDIA COMMUNICATIONS		x	5,000.	5,0	00.	0.
MCCAPLAN CONSULTING G								
21781 VENTURA BLVD UN	IT 1099,	MEDIA COMMUNICATIONS		X	5,000.	5,0	00.	0.
					1		1	
Total					107,157.	107,1	57.	

AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS Schedule G (Form 990) 2022

232081 10-27-22

TIDES CENTER

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

- 1			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			LIGHT IN THE	10тн		
			GROVE	ANNIVERSARY	1	(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
nue						
Peverine	1	Gross receipts	412,070.	220,428.	671,867.	1,304,365
	2	Less: Contributions	409,434.	220,428.	377,856.	1,007,718
	3	Gross income (line 1 minus line 2)	2,636.		294,011.	296,647
	4	Cash prizes				
	5	Noncash prizes				
benser	6	Rent/facility costs	99,462.		19,440.	118,902
UIrect Expenses	7	Food and beverages	1,084.		74,287.	75,371
키	8	Entertainment				
		Other direct expenses		13,969.	649,400.	746,392
		Direct expense summary. Add lines 4 throug	-			940,665
		Net income summary. Subtract line 10 from				-644,018
0000			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (ad col. (a) through col. (
Ē	1	Gross revenue				
Ses	2	Cash prizes				
	3	Noncash prizes				
DIFECT EXPENSES	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	└── Yes %	Yes %	
	6	Volunteer labor	Νο	No	Νο	
- 1	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)			
		5				
		Net gaming income summary. Subtract line				
	8		7 from line 1, column (d)			
	8 Ent	Net gaming income summary. Subtract line	7 from line 1, column (d) ucts gaming activities:			Yes N
а	8 Ent	Net gaming income summary. Subtract line er the state(s) in which the organization cond	7 from line 1, column (d) ucts gaming activities: uctivities in each of these s	states?		Yes N
a b	8 Ent Is t If "I	Net gaming income summary. Subtract line ter the state(s) in which the organization cond he organization licensed to conduct gaming a No," explain:	7 from line 1, column (d) ucts gaming activities: activities in each of these s evoked, suspended, or te	states?		
a b)a	8 Ent Is t If "I	Net gaming income summary. Subtract line ter the state(s) in which the organization cond he organization licensed to conduct gaming a No," explain:	7 from line 1, column (d) ucts gaming activities: activities in each of these s evoked, suspended, or te	states?		
a b	8 Ent Is t If "I	Net gaming income summary. Subtract line ter the state(s) in which the organization cond he organization licensed to conduct gaming a No," explain:	7 from line 1, column (d) ucts gaming activities: activities in each of these s evoked, suspended, or te	states?		

Schedule G (Form 990) 20	22 TIDES CENTER	94-3213100 Page 3
	conduct gaming activities with nonmembers?	
-	prantor, beneficiary or trustee of a trust, or a member of a partnership or other e	
	le gaming?	Yes No
	ge of gaming activity conducted in:	13a
	ility	
	ddress of the person who prepares the organization's gaming/special events be	·····
Name		
Address		
15a Does the organization	have a contract with a third party from whom the organization receives gaming	g revenue? Yes No
b If "Yes," enter the am	ount of gaming revenue received by the organization \$	and the amount
	ained by the third party \$	
c If "Yes," enter name a	nd address of the third party:	
Name		
Address		
16 Gaming manager info	rmation:	
Name		
Gaming manager con	npensation \$	
Description of service	s provided	
retain the state gamir b Enter the amount of c organization's own e	uired under state law to make charitable distributions from the gaming procee	ations or spent in the
	and 17b, as applicable. Also provide any additional information. See instruction	
SCHEDULE G, PA	ART I, LINE 2B, LIST OF TEN HIGHEST PAID	FUNDRAISERS:
(I) NAME OF F	JNDRAISER: WAGNER LANE PRODUCTIONS	
(I) ADDRESS O	F FUNDRAISER: 431 SOUTH DEARBORN ST, CHI	ICAGO, IL 60605
(I) NAME OF F	JNDRAISER: LEAD WITH LOVE, INC.	
	F FUNDRAISER: 923 ALANDELE AVE, LOS ANGE	ELES, CA 90036
<u>(1) 66971007 (1)</u>	TOMOMATOLICE 725 ALANDELE AVE, 105 ANGE	1115, CA 90030
· · ·	JNDRAISER: TANYA JEAN LOZANO	
232083 10-27-22	45	Schedule G (Form 990) 202
50125 149058 9		ENTER 94-32

TIDES CENTER

Part IV Supplemental Information (continued)

(I) ADDRESS OF FUNDRAISER: 2242 SOUTH DAMEN AVE, CHICAGO, IL 60608

(I) NAME OF FUNDRAISER: AMBRELL GAMBRELL

(I) ADDRESS OF FUNDRAISER: 4954 WEST KAMERLING AVE, CHICAGO, IL 60651

(I) NAME OF FUNDRAISER: HADAS DIMENTSTEIN

(I) ADDRESS OF FUNDRAISER: 1820 ECHO PARK AVE APT 5, LOS ANGELES, CA 90026

(I) NAME OF FUNDRAISER: EVERYTHING AUDIO VISUAL CORP

(I) ADDRESS OF FUNDRAISER: 1498 CARROLL AVE, SAN FRANCISCO, CA 94124

(I) NAME OF FUNDRAISER: MEDIATANK PRODUCTIONS, LLC

(I) ADDRESS OF FUNDRAISER: 372 9TH STREET, UNIT 5F, JERSEY CITY, NJ 07302

(I) NAME OF FUNDRAISER: CYNTHIA TAYLOR

(I) ADDRESS OF FUNDRAISER: 2335 BROWNING STREET, BERKELEY, CA 94702

(I) NAME OF FUNDRAISER: MCCAPLAN CONSULTING GROUP

(I) ADDRESS OF FUNDRAISER:

21781 VENTURA BLVD UNIT 1099, WOODLAND HILLS, CA 91364

Schedule G (Form 990)

232084 04-01-22

SCHEDULE I (Form 990)	Go	irants and Oth vernments, ar ete if the organizatio	nd Individual	s in the Ŭni	ted States		OMB No. 1545-0047
Department of the Treasury	•••••		Attach to Form		,		Open to Public
Internal Revenue Service		Go to www.irs	s.gov/Form990 for	the latest information	ation.		Inspection
Name of the organization TIDES CEN	ΓER						Employer identification number $94 - 3213100$
Part I General Information on Grants an	nd Assistance						
1 Does the organization maintain records to criteria used to award the grants or assis	tance?				-		
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to I recipient that received more than \$	•				anization answered "Y	es" on Form 990, Part	IV, line 21, for any
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
401 STATE STREET WBU LLC PO BOX 29907 SAN FRANCISCO, CA 94129	87-3642596		1,950,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
91 PLACE INCORPORATED PO BOX 11505 INDIANAPOLIS, IN 46201	85-1370558		15,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
A BETTER BALANCE 5 COLUMBUS CIRCLE, 11TH FLOOR NEW YORK, NY 10019	20-3664771	501(C)(3)	30,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ACORN CENTER FOR RESTORATION AND FREEDOM INC - 10699 HIGHWAY 36 - COVINGTON, GA 30014	84-4166710	501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
ACT TO CHANGE PO BOX 23112 WASHINGTON, DC 20026	83-2287633	501(C)(3)	75,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ADIRONDACK CENTER FOR WRITING INC P.O. BOX 956 SARANAC LAKE, NY 12983	01-0562418		113,200.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT 330.
2 Enter total number of section 501(c)(3) ar3 Enter total number of other organizations		tabla					257.

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

Schedule I (Form 990)	TIDES	CENTER
-----------------------	-------	--------

Schedule I (Form 990) TIDES CEN Part II Continuation of Grants and Other A		mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa		4-3213100 Page
(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
AGITARTE							
P.O. BOX 391791 CAMBRIDGE, MA 02139	04-3420465	501(C)(3)	35,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
AKWESASNE BOYS GIRLS CLUB ST REGIS MOHAWK TRIBE - 37 ROOSEVELTOWN ROAD - AKWESASNE, NY 13655	16-1607731	501(C)(3)	932,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
ALEPH ALLIANCE FOR JEWISH RENEWAL P.O. BOX 35118 PHILADELPHIA, PA 19128	23-2081703	501(C)(3)	51,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
ALIANZA AMERICAS P.O. BOX 23491 CHICAGO, IL 60623	34-2066826	501(C)(3)	150,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ALIANZA CENTER 11602 LAKE UNDERHILL ROAD, SUITE 10 ORLANDO, FL 32825	83-2227824	501(C)(3)	20,025.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
ALIANZA NACIONAL DE CAMPESINAS INC P.O. BOX 20033 OXNARD, CA 93034	47-3486630	501(C)(3)	190,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ALLIANCE FOR GLOBAL JUSTICE 225 E. 26TH STREET TUCSON, AZ 85713	52-2094677	501(C)(3)	115,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ALLIANCE FOR SAFETY AND JUSTICE 1624 FRANKLIN STREET OAKLAND, CA 94612	85-3209787	501(C)(3)	7,283,647.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ALLIED MEDIA PROJECTS INC 4126 THIRD STREET DETROIT, MI 48201	01-0559608	501(C)(3)	365,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

Schedule	e I (Form 990)	TIDES	CENTER	
Part II	Continuation of	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
AMALGAMATED CHARITABLE FOUNDATION							
INC - 1825 K STREET NW -							HEALTHY INDIVIDUALS AND
WASHINGTON, DC 20006	82-1517696	501(C)(3)	200,000.	0.			COMMUNITIES
AMANDLA							
3525 I ST.							EQUITY, HUMAN RIGHTS, AND
PHILADELPHIA, PA 19134	83-3821353		25,000.	0.			ECONOMIC EMPOWERMENT
AMERICAN ACADEMY OF PEDIATRICS INC							
345 PARK BOULEVARD							HEALTHY INDIVIDUALS AND
ITASCA, IL 60143	36-2275597	501(C)(3)	25,000.	0.			COMMUNITIES
AMERICAN ASSOCIATION OF STATE							
COLLEGES AND UNIVERSITIES - 1717							
RHODE ISLAND AVENUE NW, SUITE 700							
- WASHINGTON, DC 20036	52-0747578	501(C)(3)	80,000.	0.			QUALITY EDUCATION
WEDTANN ATUTL LIDEDWING UNION OF							
AMERICAN CIVIL LIBERTIES UNION OF							
KENTUCKY FOUNDATION INC - 325 W.	61-6058569	F(1/2)/2	10 000	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MAIN STREET - LOUISVILLE, KY 40202	01-0038303	501(C)(3)	10,000.	0.			ECONOMIC EMPOWERMENT
AMIGOS DEL M A R INC							
CALLE MALLORCA 710							
SAN JUAN, PR 00907	66-0864878		33,000.	0.			SUSTAINABLE ENVIRONMENT
			,				
AMMUD THE JOC TORAH ACADEMY INC							
201 WEST 74TH STREET, 8-D							
NEW YORK, NY 10023	86-1489756		38,500.	0.			QUALITY EDUCATION
ARKYS WORLD							
330 NORTH BROADWAY							EQUITY, HUMAN RIGHTS, AND
BLYTHEVILLE, AR 72315	47-3586511		25,000.	0.			ECONOMIC EMPOWERMENT
ARTHUR AVILES TYPICAL THEATRE							
2474 WESTCHESTER AVENUE				-			EQUITY, HUMAN RIGHTS, ANI
BRONX, NY 10461	13-3997265	501(C)(3)	35,000.	Ο.	1	1	ECONOMIC EMPOWERMENT

Schedule I (Form 990) TIDES CENTER 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
ARTISTS ALLIANCE INC							
107 SUFFOLK ST 411							EQUITY, HUMAN RIGHTS, AND
NEW YORK, NY 10002	13-4058830		6,850.	0.			ECONOMIC EMPOWERMENT
ASIAN AND PACIFIC ISLANDER	15 1050050		0,000.	••			
AMERICAN VOTE INC - 1612 K.							
STREET, NW, SUITE 510 -							EQUITY, HUMAN RIGHTS, AND
WASHINGTON, DC 20006	03-0575412	501(C)(3)	60,000.	0.			ECONOMIC EMPOWERMENT
ASIAN PACIFIC SELF DEVELOPMENT AND				••			
RESIDENTIAL ASSOCIATION - 3830							
ALVARADO AVENUE - STOCKTON, CA							HEALTHY INDIVIDUALS AND
95204	68-0224100	501(C)(3)	10,000.	0.			COMMUNITIES
ASOCIACION DE COMMUNIDADES UNIDAS							
TOMANDO ACCION SOLIDARIA INC - PO							HEALTHY INDIVIDUALS AND
BOX 52 - TOA BAJA, PR 00951	66-0911147	501(C)(3)	40,000.	0.			COMMUNITIES
ASSOCIATED JEWISH COMMUNITY			, -				
FEDERATION OF BALTIMORE INC - 101							
WEST MOUNT ROYAL AVENUE -							HEALTHY INDIVIDUALS AND
BALTIMORE, MD 21201	52-0607957		65,000.	0.			COMMUNITIES
ASSOCIATION OF BLACK FOUNDATION							
EXECUTIVES - 55 EXCHANGE PLACE,							HEALTHY INDIVIDUALS AND
, SUITE 401 - NEW YORK, NY 10005	23-7156531		10,000.	0.			COMMUNITIES
			,				
ATLANTA JEWS OF COLOR COUNCIL							
P.O BOX 468271							EQUITY, HUMAN RIGHTS, ANI
ATLANTA, GA 31146	86-2134580	501(C)(3)	11,500.	0.			ECONOMIC EMPOWERMENT
,			,				
AVODAH THE JEWISH SERVICE CORPS							
INC - 4125 MAIDEN LANE, 8B - NEW							HEALTHY INDIVIDUALS AND
YORK, NY 10038	13-3914342	501(C)(3)	20,875.	0.			COMMUNITIES
		· · ·	, , , , , , , , , , , , , , , , , , , ,				
AYUDA LEGAL PUERTO RICO INC							
PO BOX 195321							EQUITY, HUMAN RIGHTS, AND
SAN JUAN, PR 00919-5321	66-0890750	501(C)(3)	30,000.	0.			ECONOMIC EMPOWERMENT

Schedule I (Form 990)	TIDES	CENTER
-----------------------	-------	--------

Schedule I (Form 990) TIDES CEN Part II Continuation of Grants and Other I		nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa		
(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
BABYLON CITIZENS COUNCIL ON THE ARTS INC - 47 WEST MAIN ST. SUITE 4 - BABYLON, NY 11702	11-2396836		37,500.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
BALANCED LIVING MENTORSHIP PROGRAM 2021 SW PROVIDENCE PLACE PORT SAINT LUCIE, FL 34953	47-4574059		25,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
BANGLADESH INSTITUTE OF PERFORMING ARTS INC - 40-25 68TH STREET - WOODSIDE, NY 11377	11-3249055		55,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
BEAUTY UNITED 119 E UNION STREET SUITE B PASADENA, CA 91103	88-3011184	501(C)(3)	212,251.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
BERNALILLO PUBLIC SCHOOLS 560 S. CAMINO DEL PUEBLO BERNALILLO, NM 87004	85-6000791		30,000.	0.			QUALITY EDUCATION
BIG THOUGHT 1409 BOTHAM JEAN BOULEVARD DALLAS, TX 75215	75-2170035		15,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
BILL & MELINDA GATES FOUNDATION PO BOX 23350 SEATTLE, WA 98102	56-2618866		1,168,428.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
BLACK ALLIANCE FOR JUST IMMIGRATION - 1360 FULTON STREET - BROOKLYN, NY 11216	27-1911378	501(C)(3)	60,642.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
BLACK FARMER FUND INC 2161 PROSPECT AVENUE BRONX, NY 10457	84-2310349	501(C)(3)	200,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

Schedule I (Form 990) TIDES CEN							4-3213100 Page
Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	s and Domestic Go	vernments (Scho	edule I (Form 990), Pa I	rt II.) T	
(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
BLACK WOMEN RISING							
4882 SILVER OAK STREET							EQUITY, HUMAN RIGHTS, ANI
DAYTON, OH 45424	83-1904410		60,000.	0.			ECONOMIC EMPOWERMENT
BLUE GREEN ALLIANCE FOUNDATION							
2701 UNIVERSITY AVENUE							EQUITY, HUMAN RIGHTS, ANI
MINNEAPOLIS, MN 55414	20-3477309	501(C)(3)	100,000.	0.			ECONOMIC EMPOWERMENT
BOAT PEOPLE SOS ATLANTA							
6107 OAKBROOK PARKWAY							EQUITY, HUMAN RIGHTS, ANI
NORCROSS, GA 30093-1771	30-0737900	501(C)(3)	40,000.	0.			ECONOMIC EMPOWERMENT
BOLDIN COMMUNITY IMPACT INC							
170 S. BARFIELD HIGHWAY							EQUITY, HUMAN RIGHTS, ANI
PAHOKEE, FL 33476	83-0997148		25,000.	0.			ECONOMIC EMPOWERMENT
BORINQUEN DANCE THEATRE INC							
121 N FITZHUGH STREET							EQUITY, HUMAN RIGHTS, AND
ROCHESTER, NY 14614	56-2302064		37,500.	0.			ECONOMIC EMPOWERMENT
BOYS TO MEN TUCSON INC							
5925 E BROADWAY BLVD., SUITE 125 TUCSON, AZ 85711	80-0432852		20,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
BRILLIANT BROWN BOYS BOOK CLUB							
944 W. 71ST							EQUITY, HUMAN RIGHTS, ANI
CHICAGO, IL 60621	84-5053934		15,000.	0.			ECONOMIC EMPOWERMENT
BROADWAY ADVOCACY COALITION INC							
250 WEST 99TH STREET, 6A							HEALTHY INDIVIDUALS AND
NEW YORK, NY 10025	82-3374845	501(C)(3)	20,000.	0.			COMMUNITIES
BRONX COMMUNITY CABLE PROGRAMMING							
CORPORATION - LEHMAN COLLEGE -							EQUITY, HUMAN RIGHTS, AND
BRONX, NY 10468	13-3545233		927,000.	0.			ECONOMIC EMPOWERMENT

Schedule I (Form 990) $ t TID$	ES CENTER
--------------------------------	-----------

Schedule I (Form 990) TIDES CEN							94-3213100 Page
Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa I	rt II.) T	
(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
BRONX RIVER ALLIANCE INC							
1490 SHERIDAN BOULEVARD							EQUITY, HUMAN RIGHTS, AND
BRONX, NY 10459	75-3001587		118,200.	0.			ECONOMIC EMPOWERMENT
DRONA, NI 10433	/5 5001507		110,200.				ECONOMIC EMPOWERMENT
BUFFALO ARTS STUDIO							
TRI-MAIN CENTER							EQUITY, HUMAN RIGHTS, AND
BUFFALO, NY 14214	16-1475736		56,600.	0.			ECONOMIC EMPOWERMENT
,			, ,				
BUILD UP INC							
5 COMMERCE ROAD							EQUITY, HUMAN RIGHTS, AND
NEWTOWN, CT 06470	81-3539714		8,529.	0.			ECONOMIC EMPOWERMENT
BULLITT COUNTY BOARD OF EDUCATION							
1040 HIGHWAY 44 EAST							
SHEPHERDSVILLE, KY 40165	61-6001357	GOVERNMENT	10,000.	0.			QUALITY EDUCATION
BUSHWICK WORKSHOP SPACE INC							
176 ST. NICHOLAS AVENUE	15 1041460		40.000				EQUITY, HUMAN RIGHTS, AND
BROOKLYN, NY 11237	47-1841469		40,000.	0.			ECONOMIC EMPOWERMENT
BVM CAPACITY BUILDING INSTITUTE							
INC - 3645 MARKETPLACE BOULEVARD -							EQUITY, HUMAN RIGHTS, AND
EAST POINT, GA 30344	82-3835203	501(C)(3)	200,000.	0.			ECONOMIC EMPOWERMENT
,							
CAHABA RIVERKEEPER							
4650 OLD LOONEY MILL ROAD							
BIRMINGHAM, AL 35243	26-2623785	501(C)(3)	65,000.	0.			SUSTAINABLE ENVIRONMENT
CAIR FLORIDA INC							
8076 N 56TH STREET							EQUITY, HUMAN RIGHTS, AND
TAMPA, FL 33617	65-1110616		35,000.	0.			ECONOMIC EMPOWERMENT
CALLEODNES INDIAN ENVIRONMENTS							
CALIFORNIA INDIAN ENVIRONMENTAL							
ALLIANCE - PO BOX 2128 - BERKELEY,	27 0961202	E(1/a)/2)	100 000	^			EQUITY, HUMAN RIGHTS, AND
CA 94702	27-0861293	DUT(C)(3)	100,000.	0.			ECONOMIC EMPOWERMENT

(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 SCIENCE CENTER							
FOUNDATION - 700 EXPOSITION PARK							
DRIVE - LOS ANGELES, CA 90037	95-2210527	501(C)(3)	10,000.	0.			QUALITY EDUCATION
CAMPESINAS UNIDAS DEL VALLE DE SAN							
JOAQUIN - P.O. BOX 3081 - POPLAR,							HEALTHY INDIVIDUALS AND
CA 93258	26-0332237	501(C)(3)	20,000.	0.			COMMUNITIES
CARIBBEAN COMMUNITY SERVICE CENTER							
111E EAST KIRBY STREET							FOULTRY HUMAN DECHIC AND
	82-1816468		30,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
DETROIT, MI 48202 CARLOS LEZAMA ARCHIVES AND	02-1010400		30,000.	0.			ECONOMIC EMPOWERMENT
CARIBBEAN CULTURAL CENTER - 1028							
ST. JOHNS PLACE - BROOKLYN, NY							FOULTRY HUMAN DICUME AND
11213	02-0749266		70,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
	02-0749200		70,000.	0.			ECONOMIC EMPOWERMENT
CASA PROTEGIDA JULIA DE BURGOS INC							
PO BOX 362433							HEALTHY INDIVIDUALS AND
SAN JUAN, PR 00936	66-0387659		40,000.	0.			COMMUNITIES
CATHOLIC COUNCIL FOR THE SPANISH	00-0307033		40,000.	0.			COMMONITIES
SPEAKING OF THE DIOCESE OF							
STOCKTON - 445 N. SAN JOAQUIN							HEALTHY INDIVIDUALS AND
STREET - STOCKTON, CA 95202	94-1677202	501(0)(3)	20,000.	0.			COMMUNITIES
CENTER FOR APPLIED RESEARCH AND	54 1077202	501(0)(3)	20,000.				
EVALUATION - 35 E. HORIZON RIDGE							
PARKWAY, SUITE 110-201 -							HEALTHY INDIVIDUALS AND
HENDERSON, NV 89002	84-2887713		50,000.	0.			COMMUNITIES
HENDERSON, NV 89002	04-2007715		50,000.	0.			COMMONITIES
CENTER FOR DEATH PENALTY							
LITIGATION - 123 WEST MAIN STREET							EQUITY, HUMAN RIGHTS, ANI
- DURHAM, NC 27701	56-1939274		10,000.	0.			ECONOMIC EMPOWERMENT
CENTER FOR EXPLORATORY AND							
PERCEPTUAL ARTS INC - 617 MAIN							EQUITY, HUMAN RIGHTS, AND
STREET - BUFFALO, NY 14203	23-7442268		35,000.	0.			ECONOMIC EMPOWERMENT

DEVELOPMENT - 832 FOLSOM STREET, SUITE 700 - SAN FRANCISCO, CA 94107	94-3227681	501(C)(3)	13,520.	0.		HEALTHY IN COMMUNITIE
CENTRAL CONSOLIDATED SCHOOLS						
P.O. BOX 1199 SHIPROCK, NM 87420	85-6000095		30,000.	0.		QUALITY ED
CENTRAL VALLEY PARTNERSHIP						
3485 WEST SHAW 102						HEALTHY IN
FRESNO, CA 93711	81-3125919	501(C)(3)	68,000.	0.		COMMUNITIE
CENTRAL VALLEY WORKER CENTER						
3485 W SHAW AVENUE						HEALTHY IN
FRESNO, CA 93711	83-1708059	501(C)(3)	75,000.	0.		COMMUNITIE
CENTRO BINACIONAL PARA EL						
DESARROLLO INDIGENA OAXAQUENO -						
2911 TULARE STREET - GREENFIELD,						HEALTHY IN
CA 93927	77-0337939	501(C)(3)	75,000.	0.		COMMUNITIE
CENTRO DE APOYO MUTUO BUCARABONES						

TIDES 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.)

(b) EIN

36-4541988

52-1501082 501(C)(3)

(c) IRC section

if applicable

(a) Name and address of

organization or government

INTERNATIONAL STUDIES INC - 1616

CENTER FOR SUSTAINABLE ECONOMY

CENTER FOR STRATEGIC AND

RHODE ISLAND AVENUE, NW -

WASHINGTON, DC 20006

1322 WASHINGTON STREET

PORT TOWNSEND, WA 98368

CENTER FOR YOUNG WOMENS

PO BOX 760 ITHACA, NY 14851

MARIAS, PR 00670

(h) Purpose of grant

or assistance

HEALTHY INDIVIDUALS AND

EQUITY, HUMAN RIGHTS, AND

ECONOMIC EMPOWERMENT

COMMUNITIES

(e) Amount of

noncash

assistance

0.

0.

(f) Method of

valuation

(book, FMV,

appraisal, other)

(g) Description of

non-cash assistance

(d) Amount of

cash grant

45,000

200,000

Schedule I (Form 9	990)	TIDES	CENTER
--------------------	------	-------	--------

Schedule I (Form 990) TIDES CEN							74-3213100 Page
Part II Continuation of Grants and Other	Assistance to Doi	nestic Organizations	s and Domestic Go	vernments (Scho	edule I (Form 990), Pa I	rt II.) T	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 non-cash assistance	(h) Purpose of grant or assistance
CENTRO DE ECONOMIA CREATIVA INC PO BOX 13041 SAN JUAN, PR 00908	66-0943858		50,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CENTRO DE PERIODISMO INVESTIGATIVO INC - P.O. BOX 6834 - SAN JUAN, PR 00914-6834	66-0705065	501(C)(3)	40,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CENTRO PARA LA RECONSTRUCCION DEL HABITAR - CALLE TAFT 169 - SAN JUAN, PR 00918	66-0895294	501(C)(3)	50,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CHAMPS MALE MENTORING PROGRAM CHIRISE - PO BOX 19584 - CHICAGO, IL 60619	81-2992600		30,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
CHI RISE 5427 S. MICHIGAN AVE., UNIT 1 CHICAGO, IL 60615	81-3096737		15,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
CHICAGO COMMUNITY BOND FUND 601 S. CALIFORNIA CHICAGO, IL 60612	47-5015710	501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CHILDFUND INTERNATIONAL USA 2821 EMERYWOOD PARKWAY RICHMOND, VA 23294	54-0536100	501(C)(3)	325,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CHILDRENS HOSPITAL CORPORATION 300 LONGWOOD AVE BOSTON, MA 02115	04-2774441	501(C)(3)	87,167.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CHINESE FOR AFFIRMATIVE ACTION 17 WALTER U. LUM PLACE SAN FRANCISCO, CA 94108	94-2161304	501(C)(3)	67,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT

Schedule I (Form 990)	TIDES	CENTER
-----------------------	-------	--------

Part II Continuation of Grants and Other A		mostic Organizations	and Domostic Co	vornmonte (Sch	edule I (Form 990) Pa		74-3213100 Page
(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
CHINESE PROGRESSIVE ASSOCIATION 1042 GRANT AVENUE SAN FRANCISCO, CA 94133	23-7404756	501(C)(3)	75,000.	0.			EQUITY, HUMAN RIGHTS, AN ECONOMIC EMPOWERMENT
CIRCLE OF BROTHERHOOD 4055 NW 17TH AVE MIAMI, FL 33142	47-2382636	501(C)(3)	100,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
CITY OF ATLANTIC CITY ATTN: COMPTROLLER ATLANTIC CITY, NJ 08401	21-6000040		20,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
CITY OF ELK GROVE ATTN: CARRIE WHITLOCK ELK GROVE, CA 95758	94-3366854		20,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
CITY OF HARTFORD HARTFORD PUBLIC SCHOOLS - FINANCE DEPARTMENT - HARTFORD, CT 06114	06-6001870	GOVERNMENT	50,000.	0.			QUALITY EDUCATION
CITY OF PRESTON 70 WEST ONEIDA PRESTON, ID 83263	82-6000246		20,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
CITY OF RICHMOND CITY MANAGERS OFFICE RICHMOND, CA 94804	94-6000403	501(C)(3)	50,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CITY OF SAN JOSE 200 E. SANTA CLARA STREET, 12TH FLO SAN JOSE, CA 95113	94-6000419	501(C)(3)	500,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CITY OF STOCKTON PUBLIC WORKS - FISCAL DIVISION STOCKTON, CA 95202	94-6000436	government	50,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

chedule I (Form 990)	TIDES	CENTER
----------------------	-------	--------

Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	s and Domestic Go	vernments (Sche	edule I (Form 990), Pa	art II.)	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 non-cash assistance	(h) Purpose of grant or assistance
CIVIL LIBERTIES DEFENSE CENTER							
1430 WILLAMETTE STREET, 359							EQUITY, HUMAN RIGHTS, ANI
EUGENE, OR 97401	58-2670951	501(C)(3)	70,000.	0.			ECONOMIC EMPOWERMENT
CLOSE TIES LEADERSHIP PROGRAM							
660 MCWILLIAMS ROAD SE							EQUITY, HUMAN RIGHTS, ANI
ATLANTA, GA 30315	81-4890204		25,000.	0.			ECONOMIC EMPOWERMENT
COALITION FOR RESPONSIBLE				- •			
COMMUNITY DEVELOPMENT - 7101 SOUTH							
CENTRAL AVENUE - LOS ANGELES, CA							HEALTHY INDIVIDUALS AND
90054	20-2445113	501(C)(3)	15,000.	0.			COMMUNITIES
			,				
COALITION ON POSITIVE HEALTH							
EMPOWERMENT INC - 127 W 127TH							EQUITY, HUMAN RIGHTS, AND
STREET - NEW YORK, NY 10027	27-2654975	501(C)(3)	32,000.	0.			ECONOMIC EMPOWERMENT
COLECTIVO EL ANCON DE LOIZA							
INCORPORADO - 401 AVENUE AMERICO							
MIRANDA, 110B , - SAN JUAN, PR							HEALTHY INDIVIDUALS AND
00927	66-0907038		20,000.	0.			COMMUNITIES
COLECTIVO ILE CORPORACION							
LUIS MUNOZ MARIN 20							EQUITY, HUMAN RIGHTS, ANI
CAGUAS, PR 00725	66-0808702		45,000.	0.			ECONOMIC EMPOWERMENT
			, ,				
COLLECTIVE HERITAGE INSTITUTE							
215 LINCOLN AVENUE							EQUITY, HUMAN RIGHTS, ANI
SANTA FE, NM 87501	85-0432731	501(C)(3)	100,000.	0.			ECONOMIC EMPOWERMENT
COLUMBIA COUNTY SANCTUARY MOVEMENT							
PO BOX 785							EQUITY, HUMAN RIGHTS, ANI
HUDSON, NY 12534	82-1804199		40,000.	0.			ECONOMIC EMPOWERMENT
COMEDORES SOCIALES DE PUERTO RICO							
INC - PO BOX 3181 - CAGUAS, PR							HEALTHY INDIVIDUALS AND
00726-3181	66-0912044	501(C)(3)	60,000.	0.			COMMUNITIES

TIDES CENTER

Schedule I (Form 990) TIDES CEN Part II Continuation of Grants and Other							94-3213100 Page
(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
COMING CLEAN INC 28 VERNON STREET, SUITE 434 BRATTLEBORO, VT 05301	04-3429794		165,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
COMISION CIUDADANA PARA LA AUDITORIA INTEGRAL DEL CREDITO PUB - PO BOX 21054 - SAN JUAN, PR 00940-0895	66-0880065	501(C)(3)	40,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
COMMITTEE AGAINST ANTI ASIAN VIOLENCE INC - 55 HESTER STREET, STOREFRONT - NEW YORK, NY 10002	13-3526938	501(C)(3)	118,200.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
COMMON CAUSE EDUCATION FUND 805 15TH STREET NW WASHINGTON, DC 20005	31-1705370	501(C)(3)	47,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
COMMUNITY ARTS PARTNERSHIP OF TOMPKINS COUNTY INC - 110 TIOGA STREET - ITHACA, NY 14850	16-1384455		87,500.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
COMMUNITY FINANCIAL RESOURCES 4100 REDWOOD ROAD, 20A-433 OAKLAND, CA 94619	20-3788598	501(C)(3)	38,320.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
COMMUNITY INITIATIVES 1000 BROADWAY, SUITE 480 OAKLAND, CA 94607	94-3255070	501(C)(3)	88,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
COMMUNITY MEDICAL CENTERS INC DEVELOPMENT OFFICE STOCKTON, CA 95210	94-2437106	501(C)(3)	25,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
COMMUNITY OF CHANGE INC 309 COUNTY STREET, SUITE 203 PORTSMOUTH, VA 23704	81-2315327		25,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

Schedule I (Form 990) TIDES CEN Part II Continuation of Grants and Other		montin Organizations	and Domostic Co	vernmente (Sch	adula I (Earm 990) Ba		4-3213100 Page
(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
COMMUNITY OF HOPE CENTER INC 201 BATCHELOR STREET ENFIELD, NC 27823	85-2496769		110,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
COMMUNITY PARTNERS 1000 N. ALAMEDA STREET, SUITE 240 LOS ANGELES, CA 90012	95-4302067	501(C)(3)	111,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
COMMUNITY RESOURCES FOR SCIENCE 1611 SAN PABLO AVENUE BERKELEY, CA 94702	94-3262587	501(C)(3)	20,000.	0.			QUALITY EDUCATION
CONNECT HUMANITY 185 SANTA RITA AVENUE PALO ALTO, CA 94301	87-1528048		577,500.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
CONSCIOUS CAPITALIST GROUP FOUNDATION INC - PO BOX 2242 - CHARLOTTESVILLE, VA 22902	84-2733195		25,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
CONTRA COSTA HEALTH SERVICES 50 DOUGLAS DRIVE MARTINEZ, CA 94553	94-6000509	501(C)(3)	60,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
CONTRA COSTA MIDRASHA 25 HILLCROFT WAY WALNUT CREEK, CA 94597	68-0171267	501(C)(3)	29,200.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
COOPER SQUARE COMMUNITY DEVELOPMENT COMMITTEE INC - 61 EAST 4TH STREET - NEW YORK, NY 10003	13-2666211		118,200.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
COOPERATIVES FOR A BETTER WORLD 670 NORTH COMMERCIAL STREET MANCHESTER, NH 03101	81-3247254		14,630,616.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT

Schedule I (Form 990)	TIDES	CENTER
-----------------------	-------	--------

Schedule I (Form 990) TIDES CEN				(Cab			74-3213100 Page
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	s and Domestic Go	vernments (Sch	edule I (Form 990), Pa I	rt II.) T	
(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
COORDINADORA PAZ PARA LA MUJER INC APARTADO 193008							
SAN JUAN, PR 00919	66-0550935	501(C)(3)	100,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
COUNCIL FOR NATIVE HAWAIIAN ADVANCEMENT - 91-1270 KINOIKI STREET - KAPOLEI, HI 96707	91-0313383	501(C)(3)	75,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
COUNCIL OF KOREAN AMERICANS INC 1875 K STREET NW, SUITE 400 WASHINGTON, DC 20006	27-3496925	501(C)(3)	75,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
DA VINCI SCHOOLS FUND 201 NORTH DOUGLAS STREET	82-4350823			0.			
EL SEGUNDO, CA 90245	82-4350823	501(C)(3)	10,000.	υ.			QUALITY EDUCATION
DANCES FOR A VARIABLE POPULATION INC - 560 RIVERSIDE DRIVE 9K - NEW YORK, NY 10027	26-4572204	501(C)(3)	40,000.	0.			EQUITY, HUMAN RIGHTS, AN ECONOMIC EMPOWERMENT
DEAF REFUGEE ADVOCACY INC PO BOX 10335 ROCHESTER, NY 14610	86-1231101		50,000.	0.			EQUITY, HUMAN RIGHTS, AN ECONOMIC EMPOWERMENT
DEEP SOUTH CENTER FOR ENVIRONMENTAL JUSTICE - 9801 LAKE FOREST BOULEVARD - NEW ORLEANS, LA							EQUITY, HUMAN RIGHTS, ANI
70127	56-2466977	501(C)(3)	180,000.	0.			ECONOMIC EMPOWERMENT
DEFINE AMERICAN 3682 KING STREET							EQUITY, HUMAN RIGHTS, AN
ALEXANDRIA, VA 22302	46-4610491	501(C)(3)	57,500.	0.			ECONOMIC EMPOWERMENT
DISABILITY RIGHTS INTERNATIONAL INC - 1825 K STREET NW, SUITE 600 - WASHINGTON DC 20006	52-2035860	501(C)(3)	60 000	0			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
ALEXANDRIA, VA 22302 DISABILITY RIGHTS INTERNATIONAL	46-4610491		57,500.	0.			ECONOMIC EMPOWERMENT

Schedule I (Form 990)	TIDES	CENTER
-----------------------	-------	--------

Part II Continuation of Grants and Other		mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990). Pa		74-3213100 Page
(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
DIVISION OF HOMELAND MINISTRIES P.O. BOX 1986 INDIANAPOLIS, IN 46206	35-1290911		133,333.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
DOLORES C HUERTA FOUNDATION P.O. BOX 2087 BAKERSFIELD, CA 93303	91-2145992	501(C)(3)	25,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
DOMESTIC WORKERS UNITED INC 1000 DEAN ST. SUITE 432 BROOKLYN, NY 11238	27-0441096		60,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
DREAM DARE TO REVITALIZE EDUCATION THRU ARTS MEDIATION INC - 3418 GATES PLACE - BRONX, NY 10473	45-5473512		50,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
DRUM DESIS RISING UP AND MOVING INC - 72-18 ROOSEVELT AVENUE - JACKSON HEIGHTS, NY 11372	38-3652741	501(C)(3)	10,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
DURHAM SUCCESS SUMMIT INC 732 9TH ST 596 DURHAM, VA 22701	86-2985757		20,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
EARTH ISLAND INSTITUTE INC 2150 ALLSTON WAY, SUITE 460 BERKELEY, CA 94704	94-2889684	501(C)(3)	55,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
EASTERN IOWA COMMUNITY BOND PROJECT - P.O. BOX 3174 - IOWA CITY, IA 52244-3174	82-0931341	501(C)(3)	55,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
ECHOES OF INCARCERATION INC 64 NORMAN AVENUE 2 BROOKLYN, NY 11222	85-2960336		55,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT

Schedule I (Form 990) ${ m T}$	IDES CENTER
--------------------------------	-------------

Part II Continuation of Grants and Other				verninents (och			
(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
ECONOMIC SECURITY PROJECT INC							
228 PARK AVE S							HEALTHY INDIVIDUALS AND
NEW YORK, NY 10003	85-3888872	501(C)(3)	10,000.	0.			COMMUNITIES
EDGE FUNDERS ALLLIANCE							
2021 FILLMORE ST #66							HEALTHY INDIVIDUALS AND
SAN FRANCISCO, CA 94115	20-8211195	501(C)(3)	8,120.	0.			COMMUNITIES
EDUCATION TRUST INC							
580 2ND STREET							
OAKLAND, CA 94607	52-1982223	501(C)(3)	57,500.	0.			QUALITY EDUCATION
EDUADD C IDUIN EQUNDATION							
EDWARD G IRVIN FOUNDATION ATTN: WALTER MILLER							FOULTRY UIMAN PICURE AND
CHICAGO, IL 60653	36-4473846		15,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
	50 44/5040		15,000.				ECONOMIC EMPOWERMENT
EL PUENTE DE WILLIAMSBURG INC							
211 SOUTH 4TH STREET							HEALTHY INDIVIDUALS AND
BROOKLYN, NY 11211	11-2614265	501(C)(3)	344,600.	0.			COMMUNITIES
EMERALD ISLE IMMIGRATION CENTER							
INC - 59-26 WOODSIDE AVENUE 2ND							EQUITY, HUMAN RIGHTS, AND
FLOOR - WOODSIDE, NY 11377	11-2932528		75,000.	0.			ECONOMIC EMPOWERMENT
ENERGETIC ENTERPRISE YOUTH							
COMMUNITY STUDIO INC - 800							
JERUSALEM AVE UNIONDALE, NY							EQUITY, HUMAN RIGHTS, ANI
11553	11-3437790		35,000.	0.			ECONOMIC EMPOWERMENT
ENTERPRISE CENTER INC							
1100 MARKET STREET, SUITE 500							EQUITY, HUMAN RIGHTS, ANI
CHATTANOOGA, TN 37402	20-0062024		55,000.	0.			ECONOMIC EMPOWERMENT
ENTRY POINT LLC							
1949 WEST PRINTERS ROW							EQUITY, HUMAN RIGHTS, AND
SALT LAKE CITY, UT 84119	20-3905626		57,736.	0.			ECONOMIC EMPOWERMENT

Schedule I (Form 990)	TIDES	CENTER
-----------------------	-------	--------

Schedule I (Form 990) TIDES CEN Part II Continuation of Grants and Other I		mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa		4-3213100 Page
(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
EQUALITY ALLIANCE OF SAN DIEGO COUNTY - P.O. BOX 12266 - SAN DIEGO, CA 92112	26-1712580	501(C)(3)	57,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
EQUALITY FLORIDA INSTITUTE INC P.O. BOX 20786 TAMPA, FL 33622-0786	59-3435235	501(C)(3)	57,500.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
EQUALITY FOUNDATION OF GEORGIA INC 1530 DEKALB AVENUE NE ATLANTA, GA 30307	58-2346744	501(C)(3)	57,500.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
EQUALITY NORTH CAROLINA FOUNDATION P.O. BOX 12581 DURHAM, NC 27709	58-1374041	501(C)(3)	62,500.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
EQUITY NETWORK 100 WARREN STREET SUITE 300-139 MANKATO, MN 56001	83-2298736		25,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
EVANGELICAL ENVIRONMENTAL NETWORK 24 E FRANKLIN STREET WESTFIELD, IN 46074-0340	23-2827214		35,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
EVERSON MUSEUM OF ART OF SYRACUSE AND ONONDAGA COUNTY - 401 HARRISON ST SYRACUSE, NY 13202	15-0616499		113,200.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
EXPERIMENTS IN OPERA 205 23RD STREET, FRONT BROOKLYN, NY 11232	46-3775780		30,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
FAITH IN FLORIDA INC 406 EAST AMELIA STREET ORLANDO, FL 32803	59-3151613	501(C)(3)	34,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT

(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
FAITH IN PUBLIC LIFE INC							
PO BOX 33668							EQUITY, HUMAN RIGHTS, ANI
WASHINGTON, DC 20033	20-3798596	501(C)(3)	18,000.	0.			ECONOMIC EMPOWERMENT
	20 3790390	501(0)(3)	10,000.	0.			ECONOMIC EMPOWERMENT
FARMWORKER JUSTICE FUND INC							
1126 16TH ST NW							EQUITY, HUMAN RIGHTS, AN
WASHINGTON, DC 20036	52-1196708	501(C)(3)	30,000.	0.			ECONOMIC EMPOWERMENT
	52 1150700	501(0)(3)					
FEDERACION DE MAESTROS DE PUERTO							
RICO - URBANIZACION EL CARIBE 1572							
AVENUE - SAN JUAN, PR 00926	66-0267056		154,900.	0.			QUALITY EDUCATION
,,				- •			×
FIDEICOMISO DE LA TIERRA DEL CANO							
MARTIN PENA - PMB 1838 - SAN JUAN,							EQUITY, HUMAN RIGHTS, AN
PR 00917	66-0648279		60,000.	0.			ECONOMIC EMPOWERMENT
			,				
FIDEICOMISO PARA EL DESARROLLO DE							
RIO PIEDRAS - PO BOX 9300448 - SAN							HEALTHY INDIVIDUALS AND
JUAN, PR 00928	66-6043399	501(C)(3)	40,000.	0.			COMMUNITIES
				.			
FILIPINO YOUTH LEADERSHIP PROGRAM							
ORGANIZATION - 123 W NYE LANE,							EQUITY, HUMAN RIGHTS, AN
, SUITE 129 - CARSON CITY, NV 89706	47-3782661	501(C)(3)	10,000.	0.			ECONOMIC EMPOWERMENT
· · · · ·			,				
FILOMEN M DAGOSTINO GREENBERG							
MUSIC SCHOOL INC - 2130 BROADWAY							EQUITY, HUMAN RIGHTS, AN
SUITE 1904 - NEW YORK, NY 10023	83-2582279		35,000.	0.			ECONOMIC EMPOWERMENT
			,				
FIREBURN HERITAGE INC							
1661 EAGLE BEND							HEALTHY INDIVIDUALS AND
WESTON, FL 33327	88-1850233	501(C)(3)	20,000.	0.			COMMUNITIES
,		· ·	, , ,				
FIRST FOCUS ON CHILDREN							
1400 EYE STREET NW							EQUITY, HUMAN RIGHTS, AN
WASHINGTON, DC 20005	81-3185002	501(C)(3)	500,000.	0.			ECONOMIC EMPOWERMENT

Schedule I	(Form 990) TIDES	CENTER
------------	-----------	---------	--------

Schedule I (Form 990) TIDES CENT				(Cab			74-3213100 Page
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	s and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.) T	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 non-cash assistance	(h) Purpose of grant or assistance
FJC							
31 WEST 34TH STREET							EQUITY, HUMAN RIGHTS, AND
NEW YORK, NY 10001	13-3848582		30,000.	0.			ECONOMIC EMPOWERMENT
FLANEWAYAN HAITIAN LITERACY PROJECT - 208 PARKSIDE AVENUE -							EQUITY, HUMAN RIGHTS, AND
BROOKLYN, NY 11226	27-0974276	501(C)(3)	206,400.	0.			ECONOMIC EMPOWERMENT
FLORIDA IMMIGRANT COALITION INC							
2800 BISCAYNE BOULEVARD							EQUITY, HUMAN RIGHTS, AND
MIAMI, FL 33137	20-2123833	501(C)(3)	200,000.	0.			ECONOMIC EMPOWERMENT
FLORIDA RISING TOGETHER INC							
10800 BISCAYNE BOULEVARD							EQUITY, HUMAN RIGHTS, AND
MIAMI, FL 33161	45-3956785	501(C)(3)	20,000.	0.			ECONOMIC EMPOWERMENT
FORTUNE SOCIETY INC							
29-76 NORTHERN BOULEVARD							EQUITY, HUMAN RIGHTS, ANI
LONG ISLAND CITY, NY 11101	13-2645436	501(C)(3)	294,600.	0.			ECONOMIC EMPOWERMENT
FOUNDATION FOR JEWISH CAMP INC							
253 WEST 35TH STREET, 4TH FLOOR	00 0554040						HEALTHY INDIVIDUALS AND
NEW YORK, NY 10001	22-3551013		6,000.	0.			COMMUNITIES
FOUNDATION FOR LOUISIANA							
4354 SOUTH SHERWOOD FOREST BOULEVAR							HEALTHY INDIVIDUALS AND
BATON ROUGE, LA 70816	20-3399944	501(C)(3)	10,473.	0.			COMMUNITIES
FRACTRACKER ALLIANCE							
704 LISBURN RD. STE 102							EQUITY, HUMAN RIGHTS, AND
CAMP HILL, PA 17011	80-0844297		40,000.	0.			ECONOMIC EMPOWERMENT
FRACTURED ATLAS INC							
228 PARK AVENUE SOUTH							HEALTHY INDIVIDUALS AND
NEW YORK, NY 10003	11-3451703	501(C)(3)	15,000.	0.			COMMUNITIES

Schedule I (Form 990) TIDES CENTER

Schedule I (Form 990) TIDES CEN				. (0.)			94-3213100 Page
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	overnments (Sche	edule I (Form 990), Pa	ırt II.) T	
(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
FREEDOM FOR ALL AMERICANS							
EDUCATION FUND - 1629 K STREET NW							EQUITY, HUMAN RIGHTS, ANI
- WASHINGTON, DC 20006	47-4166556	501(C)(3)	110,000.	0.			ECONOMIC EMPOWERMENT
FRIENDS OF GANONDAGAN INC							
PO BOX 113							EQUITY, HUMAN RIGHTS, AND
VICTOR, NY 14564	16-1353895	501(C)(3)	95,000.	0.			ECONOMIC EMPOWERMENT
·							
FRONT AND CENTERED							
1501 EAST MADISON STREET							EQUITY, HUMAN RIGHTS, AND
SEATTLE, WA 98122	84-3336800		115,000.	0.			ECONOMIC EMPOWERMENT
FUNDACION CORTES INC							
210 SAN FRANCISCO STREET							HEALTHY INDIVIDUALS AND
SAN JUAN, PR 00901	66-0804845	501(C)(3)	20,000.	0.			COMMUNITIES
GAP COMMUNITY CENTER							
2100 N KILDARE AVE							EQUITY, HUMAN RIGHTS, AND
CHICAGO, IL 60639	82-2024205		15,000.	0.			ECONOMIC EMPOWERMENT
CIDEN FLOW FLORE INCORPORATE							
GARTH FAGAN DANCE INCORPORATED 50 CHESTNUT STREET 3RD FLOOR							FOULTRY HUMAN DECUME AND
ROCHESTER, NY 14604	23-7276763		113,200.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
KOCHESTER, NI 14004	23 7270703		113,200.				ECONOMIC EMPOWERMENT
GENESEE ORLEANS REGIONAL ARTS							
COUNCIL - 201 EAST MAIN STREET -							EQUITY, HUMAN RIGHTS, AND
BATAVIA, NY 14020	16-1067054		100,000.	0.			ECONOMIC EMPOWERMENT
GENSPACE NYC							
132 32ND STREET, SUITE 108							EQUITY, HUMAN RIGHTS, AND
BROOKLYN, NY 11232	27-0947943		211,400.	0.			ECONOMIC EMPOWERMENT
GENTE ORGANIZADA							
2121 ARROYO DRIVE							EQUITY, HUMAN RIGHTS, AND
POMONA, CA 91768	27-2352500	501(C)(3)	105,000.	0.			ECONOMIC EMPOWERMENT

chedule I (Form 990)	TIDES	CENTER
----------------------	-------	--------

Schedule I (Form 990) TIDES CEN Part II Continuation of Grants and Other Continuation Continuation		mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa		94-3213100 Page
(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
GEORGETOWN UNIVERSITY 3300 WHITEHAVEN ST, NW STE 5000 WASHINGTON, DC 20057-1485	53-0196603	501(C)(3)	20,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
GEORGIA LATINO ALLIANCE FOR HUMAN RIGHTS INC - 7 DUNWOODY PARK - ATLANTA, GA 30338	76-0809155	501(C)(3)	6,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
GEORGIANS FOR ALTERNATIVES TO THE DEATH PENALTY - P.O. BOX 42227 - ATLANTA, GA 30311	27-1774366		30,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
GIVE BACK 2 DA BLOCK 4035 STOWAWAY LANE PORTSMOUTH, VA 23703	87-2203982		25,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
GLOBAL CAMPAIGN FOR EDUCATION US INC - 1201 16TH STREET, NW - WASHINGTON, DC 20036	46-5308134	501(C)(3)	85,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
GLOBAL DEAF MUSLIM 3951 PENDER DRIVE, SUITE130 ALEXANDRIA, VA 22312	84-1684165		50,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
GLORIA EVE PERFORMING ARTS FOUNDATION - 1225 FRANKLIN AVENUE - GARDEN CITY, NY 11530	75-3120234		35,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
GOOD LIFE FOUNDATION INC 2610 S. SALINA ST SYRACUSE, NY 13205	26-1123420		123,200.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
GRANTMAKERS OF WESTERN PENNSYLVANIA - THREE GATEWAY CENTER - PITTSBURGH, PA 15222	25-1496312	501(C)(3)	26,250.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

Schedule I (Form 990)	TIDES	CENTER
-----------------------	-------	--------

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	s and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	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 non-cash assistance	(h) Purpose of grant or assistance
GRASSROOTS LEADERSHIP INC PO BOX 6310 AUSTIN, TX 78762	58-1581743	501(C)(3)	55,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
, GREATER HUDSON PROMISE NEIGHBORHOOD INC - 369 WARREN STREET - HUDSON, NY 12534	85-0949720		20,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
GRUPO CULTURAL LATINOS EN ROCHESTER NY INC - 36 WOODCREST CIRCLE - FAIRPORT, NY 14450	46-3340559		65,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
GUILD HALL OF EAST HAMPTON INC 158 MAIN STREET EAST HAMPTON, NY 11937	11-1776034		203,900.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
GUITARS OVER GUNS ORGANIZATION INC 1000 W 15TH STREET 329 CHICAGO, IL 60607	26-2644682		15,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
HAITIAN BRIDGE ALLIANCE 4265 FAIRMONT AVENUE SAN DIEGO, CA 92105	81-3558713	501(C)(3)	62,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
HAMILTON HILL DROP IN ARTS CRAFTS CENTER - 409 SCHENECTADY ST SCHENECTADY, NY 12307	14-1577799		85,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
HARRIET TUBMAN FREEDOM FIGHTERS CORP - 1418 MANOTAK POINT DR, UNIT 105 - JACKSONVILLE, FL 32210	85-3303620	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
HASER INC PO BOX 368035 SAN JUAN, PR 00936-8035	66-0861655	501(C)(3)	238,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

Schedule	e I (Form 990)	TIDES	CENTER	
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
HEAL MINISTRY							
8011 SOUTH MARSHFIELD							EQUITY, HUMAN RIGHTS, ANI
CHICAGO, IL 60620	83-1105485		15,000.	0.			ECONOMIC EMPOWERMENT
HEALING CHICAGO							
4156 MILFORD LANE							EQUITY, HUMAN RIGHTS, AND
CHICAGO, IL 60504	85-3422821		15,000.	0.			ECONOMIC EMPOWERMENT
HENRY STREET SETTLEMENT							
265 HENRY STREET							EQUITY, HUMAN RIGHTS, ANI
NEW YORK, NY 10002	13-1562242	501(C)(3)	294,600.	0.			ECONOMIC EMPOWERMENT
HINENU THE BALTIMORE JUSTICE							
SHTIEBL - 3140 REMINGTON AVENUE -							HEALTHY INDIVIDUALS AND
BALTIMORE, MD 21233	82-4347258	501(C)(3)	18,500.	0.			COMMUNITIES
HONOR THE EARTH							
PO BOX 155							EQUITY, HUMAN RIGHTS, ANI
PONSFORD, MN 56575	45-4714238	501(C)(3)	12,500.	0.			ECONOMIC EMPOWERMENT
HUNTINGTON ARTS COUNCIL INC							L
213 MAIN STREET							EQUITY, HUMAN RIGHTS, ANI
HUNTINGTON, NY 11743	11-2205617		80,000.	0.			ECONOMIC EMPOWERMENT
HURLEYVILLE PERFORMING ARTS CENTRE							
INC - PO BOX 504 - HURLEYVILLE, NY							EQUITY, HUMAN RIGHTS, AND
12747	84-3970874		203,900.	0.			ECONOMIC EMPOWERMENT
HYP ACCESS INC							
C/O PERFORMANCE ZONE INC	00.0001000		20.000	_			HEALTHY INDIVIDUALS AND
BROOKLYN, NY 11237	87-3781023		30,000.	0.			COMMUNITIES
I AM A GENTLEMAN INC							
3622 SOUTH STATE STREET, UNIT 413							EQUITY, HUMAN RIGHTS, ANI
CHICAGO, IL 60680-4667	81-1396059		15,000.	0.			ECONOMIC EMPOWERMENT

Schedule I (Form 990) $ ext{TIDI}$	ES CENTER	
------------------------------------	-----------	--

Schedule I (Form 990) TIDES CEN Part II Continuation of Grants and Other A		nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990) Pa		4-3213100 Page
(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
I AM MENTALITYYOUTH MALE							
EMPOWERMENT PROJECT - P.O. BOX							EQUITY, HUMAN RIGHTS, AN
25042 - BALTIMORE, MD 21229	81-3874418		25,000.	0.			ECONOMIC EMPOWERMENT
IMOGEN ROCHE FOUNDATION INC							
10 BARCLAY STREET 19C							EQUITY, HUMAN RIGHTS, AN
NEW YORK, NY 10007	83-1897911		843,800.	0.			ECONOMIC EMPOWERMENT
INDUSTRY INITIATIVES FOR SCIENCE			,				
AND MATH EDUCATION - 5301 STEVENS							
CREEK BOULEVARD - SANTA CLARA, CA							
95052-8059	77-0143865	501(C)(3)	10,000.	٥.			QUALITY EDUCATION
INICIATIVA DE ECODESARROLLO DE							
BAHIA DE JOBOS - ANTIGUO CENTRO							
CIBERNETICO, CALLE 705 INTERIOR -							
ARROYO, PR 00714	66-0758170		45,000.	0.			SUSTAINABLE ENVIRONMENT
INSTITUTE FOR ASIAN PACIFIC							
AMERICAN LEADERSHIP ADVANCEMENT -							
815 16TH ST. NW, 2ND FLOOR -							EQUITY, HUMAN RIGHTS, AND
WASHINGTON, DC 20006	27-4284628	501(C)(3)	10,000.	0.			ECONOMIC EMPOWERMENT
INSTITUTE FOR COLLEGE ACCESS AND							
SUCCESS INC - 1300 CLAY STREET -							
OAKLAND, CA 94612	20-1368860	501(C)(3)	47,500.	0.			QUALITY EDUCATION
INSTITUTE FOR JEWISH AND COMMUNITY							
RESEARCH - 657 14TH AVENUE - SAN							HEALTHY INDIVIDUALS AND
	94-3307253	F(1/c)/2	61 640	0.			
FRANCISCO, CA 94118 INSTITUTE FOR SOCIO ECOLOGICAL	94-3307255	501(C)(3)	61,640.	0.			COMMUNITIES
RESEARCH - INSTITUTE FOR							
SOCIO-ECOLOGICAL RESEARCH - LAJAS							HEALTHY INDIVIDUALS AND
PR 00667	66-0795286		30,000.	0.			COMMUNITIES
IN 00007	00-0795280		30,000.	0.			
INSTITUTO PARA LA INVESTIGACION Y							
ACCION EN AGROECOLOGIA - 273 CALLE							
SIERRA MORENA - SAN JUAN, PR 00926	66-0910974		188,500.	0.			SUSTAINABLE ENVIRONMENT

TIDES CENTER

Part II Continuation of Grants and Other A	Assistance to Doi						
(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
INSURE THE UNINSURED PROJECT							
400 CAPITOL MALL, SUITE 900							EQUITY, HUMAN RIGHTS, AND
SACRAMENTO, CA 95814	27-4159194		135,000.	0.			ECONOMIC EMPOWERMENT
INTERACTION AMERICAN COUNCIL FOR							
VOLUNTARY INTERNATIONAL ACTION INC							
- 1400 16TH STREET NW -							EQUITY, HUMAN RIGHTS, AND
WASHINGTON, DC 20036	13-3287064	501(C)(3)	251,084.	0.			ECONOMIC EMPOWERMENT
,							
INTERFAITHFAMILY.COM INC							
190 NORTH MAIN STREET							HEALTHY INDIVIDUALS AND
NATICK, MA 01760	04-3577816	501(C)(3)	17,700.	0.			COMMUNITIES
IRONBOUND COMMUNITY CORPORATION							
317 ELM STREET							HEALTHY INDIVIDUALS AND
NEWARK, NJ 07105	22-1916086	501(C)(3)	170,000.	0.			COMMUNITIES
JAIL TO JOBS							
PO BOX 2737							EQUITY, HUMAN RIGHTS, AND
CEDAR PARK, TX 78630	27-1601066		15,000.	0.			ECONOMIC EMPOWERMENT
JAMESTOWN COMMUNITY COLLEGE							
260 N. UNION STREET							EQUITY, HUMAN RIGHTS, AND
OLEAN, NY 14760	16-6002650		203,900.	0.			ECONOMIC EMPOWERMENT
TADANECE AMEDICAN CIMITENC LEACHE							
JAPANESE AMERICAN CITIZENS LEAGUE 1765 SUTTER STREET							FOULTRY ULINAN DICUME AND
	04 1045005	F(1/(3)/(2))	75 000	0			EQUITY, HUMAN RIGHTS, AND
SAN FRANCISCO, CA 94115	94-1245885	501(C)(3)	75,000.	0.			ECONOMIC EMPOWERMENT
JEWISH ALLIANCE FOR LAW AND SOCIAL							
ACTION INC - 11 BEACON STREET -							HEALTHY INDIVIDUALS AND
BOSTON, MA 02108	01-0563874		12,000.	0.			COMMUNITIES
			,				
JEWS IN ALL HUES							
7152 CHEW AVENUE, 2ND FLOOR							HEALTHY INDIVIDUALS AND
PHILADELPHIA, PA 19119	27-2516792		7,000.	0.			COMMUNITIES

Schedule I (Form 990)	TIDES	CENTER
-----------------------	-------	--------

Part II Continuation of Grants and Other		nontio Organizationa	and Domostic Co	vornmonto (Sob	dula I (Earm 000) Da		4-3213100 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section	(d) Amount of cash grant	(e) Amount of noncash	(f) Method of valuation	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
				assistance	(book, FMV, appraisal, other)		
JEWS OF COLOR INITIATIVE							
1569 SOLANO AVE 474							EQUITY, HUMAN RIGHTS, AND
BERKELEY, CA 94707	86-2742246		720,512.	0.			ECONOMIC EMPOWERMENT
JOBS FOR THE FUTURE INC							
50 MILK STREET							HEALTHY INDIVIDUALS AND
BOSTON, MA 02109	06-1164568	501(C)(3)	88,000.	0.			COMMUNITIES
JOHN BROWN LIVES INC							
PO BOX 357							EQUITY, HUMAN RIGHTS, AND
WESTPORT, NY 12993	45-4553106		37,500.	0.			ECONOMIC EMPOWERMENT
JOHN N GARDNER INSTITUTE FOR							
EXCELLENCE IN UNDERGRADUATE							
EDUCATION - PO BOX 72 - BREVARD,							
NC 28712	26-0166817		8,000.	0.			QUALITY EDUCATION
JQ INTERNATIONAL							
801 LARRABEE STREET, SUITE 10							HEALTHY INDIVIDUALS AND
WEST HOLLYWOOD, CA 90069	68-0601176		10,000.	0.			COMMUNITIES
JUMP FOR JOI INC							
4500 N.FLAGLER DRIVE, A17							EQUITY, HUMAN RIGHTS, AND
WEST PALM BEACH, FL 33407	82-0780326		18,000.	0.			ECONOMIC EMPOWERMENT
JUNTOS							
600 WASHINGTON AVENUE							EQUITY, HUMAN RIGHTS, ANI
PHILADELPHIA, PA 19147	01-0769538		30,000.	0.			ECONOMIC EMPOWERMENT
,			,				
JUST FUTURES LAW INC							
95 WASHINGTON STREET							EQUITY, HUMAN RIGHTS, ANI
CANTON, MA 02021	84-2270207		50,000.	0.			ECONOMIC EMPOWERMENT
JUSTFUNDUS							
490 43RD STREET							EQUITY, HUMAN RIGHTS, AND
OAKLAND, CA 94609	85-3759949		200,000.	0.			ECONOMIC EMPOWERMENT

(b) EIN (c) IRC section (a) Name and address of

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

Schedule I (Form 990)

(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
KALEIDOSCOPE COMMUNITY ORGANIZATION - 307 S 8TH STREET - LANDING, MI 48912	83-3141324	501(C)(3)	36,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
KANATSIOHAREKE INC 4934 STATE HIGHWAY 5 FONDA, NY 12068	14-1787364	501(C)(3)	30,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
KANU HAWAII 1050 QUEEN STREET, 100 HONOLULU, HI 96814	20-5552831		50,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
KAPAL FOUNDATION INC 5101 LAKE DRIVE EAST ST. LOUIS, IL 62203	37-1372155		15,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
KAPPA ALPHA PSI FOUNDATION INC 2322 N. BROAD STREET PHILADELPHIA, PA 19132	23-2205286		25,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
KAVOD VNICHUM P.O. BOX 1206 MAPLEWOOD, NJ 07040	01-0604102		40,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
KEEP RISING TO THE TOP 119 E 102ND STREET NEW YORK, NY 10029	13-3948379		45,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
KENTUCKY COALITION TO ABOLISH THE DEATH PENALTY INC - PO BOX 3092 - LOUISVILLE, KY 40201-3092	61-1169551	501(C)(3)	30,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
KETTLE MORAINE SCHOOL DISTRICT 563 A J ALLEN CIRCLE WALES, WI 53183	39-1024329	GOVERNMENT	10,000.	0.			QUALITY EDUCATION

74

TIDES CENTER Schedule I (Form 990)

Schedule I (Form 990) TIDES CENTER

94-3213100 Page 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 non-cash assistance	(h) Purpose of grant or assistance
KILOMETRO 0 INC							
206 TETUN, SUITE 800							EQUITY, HUMAN RIGHTS, AND
SAN JUAN, PR 00936-2289	66-0898712	501(C)(3)	30,000.	0.			ECONOMIC EMPOWERMENT
KOREAN IMMIGRANT WORKERS ADVOCATES							
OF SOUTHERN CALIFORNIA - 941 S.							
VERMONT AVENUE - LOS ANGELES, CA							EQUITY, HUMAN RIGHTS, AND
90006	95-4392004	501(C)(3)	75,000.	0.			ECONOMIC EMPOWERMENT
L J EMPOWERMENT							
4355 COBB PARKWAY STE J 522							EQUITY, HUMAN RIGHTS, AND
ATLANTA, GA 30339	81-2177002		25,000.	0.			ECONOMIC EMPOWERMENT
LA FAMILIA COUNSELING CENTER INC							L
5523 34TH STREET	04 0050506	F01 (g) ())	11.00	•			HEALTHY INDIVIDUALS AND
SACRAMENTO, CA 95820	94-2270786	501(C)(3)	11,667.	0.			COMMUNITIES
LA MARANA							
551 CALLE TRIGO							HEALTHY INDIVIDUALS AND
SAN JUAN, PR 00918	66-0838654	501(C)(3)	35,000.	0.			COMMUNITIES
		301(0)(3)		••			
LAKE COUNTY VOICES OF REASON							
35624 CYPRESS COURT							EQUITY, HUMAN RIGHTS, AND
LEESBURG, FL 34788-2311	84-1837832		10,000.	0.			ECONOMIC EMPOWERMENT
i							
LAOTIAN AMERICAN NATIONAL ALLIANCE							
1612 K STREET							EQUITY, HUMAN RIGHTS, AND
WASHINGTON, DC 20006	35-2260474	501(C)(3)	125,000.	0.			ECONOMIC EMPOWERMENT
LATINX PLAYWRIGHTS CIRCLE INC							
22 RED BARN LN							EQUITY, HUMAN RIGHTS, AND
MIDDLETOWN, NY 10940	84-5058808		70,000.	0.			ECONOMIC EMPOWERMENT
LEAGUE OF NOMEN VOMEDO OF BLODIDA							
LEAGUE OF WOMEN VOTERS OF FLORIDA							FOULTRY HIMAN DICHTC AND
EDUCATION FUND INC - P.O. BOX 1911		F(1/a)/2)	20.000	^			EQUITY, HUMAN RIGHTS, AND
- ORLANDO, FL 32802	59-1385724	501(0)(3)	20,000.	0.			ECONOMIC EMPOWERMENT

Schedule I (Form 990) TI	DES CENTER
----------------------------	------------

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government		if applicable	cash grant	assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
LEARNING ACCELERATOR							
103 ROARING BROOK RD							
PORTLAND, ME 04103	46-1059054	501(C)(3)	10,000.	0.			QUALITY EDUCATION
LGBT CENTER INTERCULTURAL							
COLLECTIVE INC - 3763 83RD STREET							EQUITY, HUMAN RIGHTS, AND
- JACKSON HEIGHTS, NY 11372	82-4397912	501(C)(3)	35,000.	0.			ECONOMIC EMPOWERMENT
LINDSAY EDUCATIONAL FOUNDATION FOR LEARNING - 371 E HERMOSA AVENUE -							
LINDSAY, CA 93247	81-4151735	501(C)(3)	10,000.	0.			QUALITY EDUCATION
LITTLE MANILA FOUNDATION 2154 S SAN JOAQUIN STREET							FOULTRY HUNAN DECUME AND
STOCKTON, CA 95206	20-2661354	501(C)(3)	65,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
	20 2001334	501(0)(5)					
LOFT THE LESBIAN AND GAY COMMUNITY							
SERVICES CENTER INC - 252 BRYANT							EQUITY, HUMAN RIGHTS, AND
AVENUE - WHITE PLAINS, NY 10605	13-3603559		201,400.	0.			ECONOMIC EMPOWERMENT
LOS PLENEROS DE LA 21							
1680 LEXINGTON AVE, ROOM 209							EQUITY, HUMAN RIGHTS, ANI
NEW YORK, NY 10029	13-3353110		60,000.	٥.			ECONOMIC EMPOWERMENT
LOST BOYZ INC							
1818 E. 71ST STREET							EQUITY, HUMAN RIGHTS, AND
CHICAGO, IL 60649	26-3317656		15,000.	0.			ECONOMIC EMPOWERMENT
LOUISIANA HEALTH CARE QUALITY							
FORUM - 8550 UNITED PLAZA BLVD.,							HEALTHY INDIVIDUALS AND
STE. 301 - BATON ROUGE, LA 70809	26-0497115		66,157.	0.			COMMUNITIES
LOVE CIMY SERONG INC							
LOVE CITY STRONG INC 5000 ESTATE ENIGHED PMB435							HEALTHY INDIVIDUALS AND
SAINT JOHN, VI 00830	66-0887374	E01(0)(2)	20,000.	0.			COMMUNITIES

Schedule I (Form 990)

(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
LUNDQUIST INSTITUTE FOR BIOMEDICAL							
INNOVATION AT HARBOR UCLA MEDICAL							
- ATTN: MEHRUN PATEL - TORRANCE,	05 0100104	F01 (d) (2)	10.000				HEALTHY INDIVIDUALS AND
CA 90502	95-2138184	501(C)(3)	10,000.	0.			COMMUNITIES
MA YI FILIPINO THEATRE ENSEMBLE							
INC - 520 EIGHTH AVENUE, SUITE 309							EQUITY, HUMAN RIGHTS, AND
- NEW YORK, NY 10018	13-3607832		59,100.	0.			ECONOMIC EMPOWERMENT
MAKANDA TOWNSHIP							
5420 OLD U.S. HIGHWAY 51							EQUITY, HUMAN RIGHTS, AND
CARBONDALE, IL 62903	37-1288323		20,000.	0.			ECONOMIC EMPOWERMENT
MAKE THE ROAD NEW YORK 301 GROVE STREET							
	11-3344389	F(1/2)/2	70,000.	٥.			EQUITY, HUMAN RIGHTS, AND
BROOKLYN, NY 11237	11-3344389	501(C)(3)	70,000.	0.			ECONOMIC EMPOWERMENT
MANO A MANO MEXICAN CULTURE							
WITHOUT BORDERS - 550 W 155TH ST -							EQUITY, HUMAN RIGHTS, AND
NEW YORK, NY 10032	56-2545700		35,000.	0.			ECONOMIC EMPOWERMENT
			,				
MARCH ON MARYLAND INC							
820 RITCHIE HWY							EQUITY, HUMAN RIGHTS, AND
SEVERNA PARK, MD 21146	82-0958114	501(C)(3)	200,000.	0.			ECONOMIC EMPOWERMENT
MARY MAGDALENE COMMUNITY SERVICES							
AGENCY - 620 N. AURORA STREET -							HEALTHY INDIVIDUALS AND
STOCKTON, CA 95202	68-0462814	501(C)(3)	35,000.	0.			COMMUNITIES
MAC HOUSE BIDGO ADE SEUDIO							
MAS HOUSE BIPOC ART STUDIO 159 OLD POINT ROAD							EQUITY, HUMAN RIGHTS, AND
	85-3881183		65,000.	0.			ECONOMIC EMPOWERMENT
SOUTHAMPTON, NY 11969	02-2001102		05,000.	0.			ECONOMIC EMPOWERMENT
MASA MEXED INC							
2770 THIRD AVENUE							HEALTHY INDIVIDUALS AND
BRONX, NY 10455	11-3640210	501(C)(3)	37,500.	0.			COMMUNITIES

77

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

TIDES CENTER Schedule I (Form 990)

Schedule	e I (Form 990)	TIDES	CENTER	
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
MASSACHUSETTS DEPARTMENT OF HIGHER							
EDUCATION - ONE ASHBURTON PLACE,							
ROOM 1401 - BOSTON, MA 02108	04-6002284	GOVERNMENT	15,000.	0.			QUALITY EDUCATION
			,				
MATILDA JOSLYN GAGE FOUNDATION INC							
210 EAST GENESEE STREET							EQUITY, HUMAN RIGHTS, AND
FAYETTEVILLE, NY 13066	16-1581669		30,000.	0.			ECONOMIC EMPOWERMENT
MEDICAL CAREERS EXPOSURE AND							
EMERGENCY PREPAREDNESS INITIATIVE							
- 910 W VAN BUREN ST, STE 100,							HEALTHY INDIVIDUALS AND
UNIT 189 - CHICAGO, IL 60607	88-1845241		15,000.	0.			COMMUNITIES
MENTOR LEADERS PRODUCE MENTOR							
LEADERS - 219 S ALDEN STREET -							EQUITY, HUMAN RIGHTS, AND
PHILADELPHIA, PA 19139	82-4056224		25,000.	0.			ECONOMIC EMPOWERMENT
NEEDOEUMUDE ING							
METROFUTURE INC							
60 TEMPLE PLACE FLOOR 6	30-0221355		20.000	0.			EQUITY, HUMAN RIGHTS, AND
BOSTON, MA 02111-1379 MEXICAN AMERICAN LEGAL DEFENSE AND	30-0221355		20,000.	0.			ECONOMIC EMPOWERMENT
EDUCATIONAL FUND - 634 SOUTH							
SPRING STREET - LOS ANGELES, CA							EQUITY, HUMAN RIGHTS, AND
90014	74-1563270	501(C)(3)	37,500.	0.			ECONOMIC EMPOWERMENT
	/1 10001/0						
MI FAMILIA VOTA EDUCATION FUND							
3030 NORTH CENTRAL AVENUE							EQUITY, HUMAN RIGHTS, AND
PHOENIX, AZ 85012	20-0182824	501(C)(3)	20,000.	0.			ECONOMIC EMPOWERMENT
MIL MUNDOS EN COMUN LTD							
323 LINDEN STREET							EQUITY, HUMAN RIGHTS, AND
BROOKLYN, NY 11237	86-3016019		70,000.	0.			ECONOMIC EMPOWERMENT
MILPA							
339 MELODY LANE							HEALTHY INDIVIDUALS AND
SALINAS, CA 93901	83-2137871	501(C)(3)	75,000.	0.			COMMUNITIES

Schedule I (Form 990)	TIDES	CENTER	
-----------------------	-------	--------	--

Schedule I (Form 990) TIDES CEN							94-3213100 Page
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	ırt II.) T	
(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
MINDBUILDERS CREATIVE ARTS INC 3415 OLINVILLE AVENUE BRONX, NY 10467	13-2988157	501(C)(3)	486,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MINKWON CENTER FOR COMMUNITY ACTION INC - 133-29 41ST AVENUE - FLUSHING, NY 11355	11-2710506		118,200.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MISSISSIPPI M O V E PO BOX 579 TOUGALOO, MS 39174	90-0932897		25,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MISSOURIANS TO ABOLISH THE DEATH PENALTY - 6320 BROOKSIDE PLAZA - KANSAS CITY, MO 64113	20-3791024	501(C)(3)	30,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MIXTECO INDIGENA COMMUNITY ORGANIZING PROJECT - 520 W. 5TH STREET, SUITE F - OXNARD, CA 93030	30-0045901	501(C)(3)	75,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MONTGOMERY BAIL OUT FUND PO BOX 4772 MONTGOMERY, AL 36103-4772	85-3979130		8,570.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MORTAR CINCINNATI 1329 VINE STREET CINCINNATI, OH 45202	47-2431620	501(C)(3)	25,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MOSAIC VISIONS 3909 FIFTH STREET NORTH, SUITE 2 ARLINGTON, VA 22203	85-2310242		14,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
MOUNT PLEASANT NOW DEVELOPMENT CORPORATION - 13815 KINSMAN ROAD - CLEVELAND, OH 44120	34-1599720		10,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

Schedule I	(Form 990)) TIDES	CENTER
------------	------------	---------	--------

Part II Continuation of Grants and Other		nestic Organizations	s and Domestic Go	vernments (Sch	edule I (Form 990), Pa		4-3213100 Page
(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
MOVEMENT GENERATION P.O. BOX 102 BERKELEY, CA 94701	85-4168043		50,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
MOVEMENT STRATEGY CENTER 436 14TH STREET, 5TH FLOOR OAKLAND, CA 94612	20-1037643		100,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
MOVIMIENTO CULTURAL DE LA UNION INDIGENA - P.O. BOX 13 - NAPA, CA 94558	46-1037804	501(C)(3)	45,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
MR DADS FATHERS CLUB 6405 S WOLCOTT AVE CHICAGO, IL 60636	82-4042427		15,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
MUJERES DE ISLAS INC APARTADO 358 CULEBRA, PR 00775	66-0768054	501(C)(3)	40,000.	0.			SUSTAINABLE ENVIRONMENT
MUJERES UNIDAS Y ACTIVAS 3543 18TH STREET 23 SAN FRANCISCO, CA 94110	20-2986926	501(C)(3)	64,200.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
MULTIFAITH ALLIANCE INC 691 N SQUIRREL ROAD STE 100 NEW YORK, NY 10017	81-0799662		177,147.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
MUNSON WILLIAMS PROCTOR INSTITUTE 310 GENESEE STREET UTICA, NY 13502	15-0532214		113,200.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
NAACP STOCKTON BRANCH 401 N SAN JOAQUIN STREET STOCKTON, CA 95202	94-6172662	501(C)(4)	27,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

chedule I ((Form 990)	TIDES	CENTER

Schedule I (Form 990) TIDES CEN Part II Continuation of Grants and Other A		mestic Organizations	and Domestic Go	wernments (Sch	adule I (Form 990) Pa		94-3213100 Page
(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
NACA INSPIRED SCHOOLS NETWORK 2301 MOUNTAIN ROAD NE ALBUQUERQUE, NM 87196	47-2981893	501(C)(3)	306,500.	0.			QUALITY EDUCATION
NATIONAL AIDS MEMORIAL INC P.O. BOX 2270 SAN FRANCISCO, CA 94126-2270	82-4329012	501(C)(3)	5,521,853.	0.			EQUITY, HUMAN RIGHTS, AN ECONOMIC EMPOWERMENT
NATIONAL BLACK THEATRE WORKSHOP INCORPORATED - 2031 NATIONAL BLACK THEATRE WAY - NEW YORK, NY 10035	13-2632596	501(C)(3)	206,400.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
NATIONAL FEDERATION OF FILIPINO AMERICAN ASSOCIATIONS - 1612 K STREET NW, - WASHINGTON, DC 20006	52-2063531	501(C)(3)	222,800.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
NATIONAL HAITIAN AMERICAN OFFICIALS NETWORK INC - 1320 N PINE HILLS ROAD - ORLANDO, FL 32808	83-0913531	501(C)(3)	10,000.	0.			EQUITY, HUMAN RIGHTS, AN ECONOMIC EMPOWERMENT
NATIONAL KOREAN AMERICAN SERVICE AND EDUCATION CONSORTIUM INC - 4300 NORTH CALIFORNIA AVENUE - CHICAGO, IL 60618	11-3303986	501(C)(3)	75,000.	0.			EQUITY, HUMAN RIGHTS, AN ECONOMIC EMPOWERMENT
NATIONAL MATH AND SCIENCE INITIATIVE INC - 8350 NORTH CENTRAL EXPRESSWAY, SUITE M -2200 - DALLAS, TX 75206	11-3769438	501(C)(3)	24,500.	0.			QUALITY EDUCATION
NATIONAL QUEER ASIAN PACIFIC ISLANDER ALLIANCE INC - P.O.BOX 1277 - NEW YORK, NY 10113	27-2114866	501(C)(3)	125,000.	0.			EQUITY, HUMAN RIGHTS, AN ECONOMIC EMPOWERMENT
NEW MEXICO FIRST 609 BROADWAY BLVD NE, SUITE 202 ALBUQUERQUE, NM 87102	85-0350387		10,000.	0.			QUALITY EDUCATION

(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
NEW YORK CIVIL LIBERTIES UNION FOUNDATION - 125 BROAD STREET -				
NEW YORK, NY 10004	90-0808294	501(C)(3)	206,400.	0.
NEW YORK SHAKESPEARE FESTIVAL 425 LAFAYETTE STREET NEW YORK, NY 10003-7087	13-1844852	501(C)(3)	294,600.	0.

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

FOUNDATION - 125 BROAD STREET -					EQUITY, HUMAN RIGHTS, AND
NEW YORK, NY 10004	90-0808294	501(C)(3)	206,400.	0.	ECONOMIC EMPOWERMENT
NEW YORK SHAKESPEARE FESTIVAL 425 LAFAYETTE STREET NEW YORK, NY 10003-7087	13-1844852	501(C)(3)	294,600.	0.	EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
NORCAL RESIST 2121 BROADWAY SACRAMENTO, CA 95818-8331	83-1003248	501(C)(3)	172,000.	0.	EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
NORTH CAROLINA COALITION FOR ALTERNATIVES TO THE DEATH PENALTY - 123 WEST MAIN STREET - DURHAM, NC 27701	45-4288573	501(C)(3)	30,000.	0.	EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
NORTHERN ALASKA ENVIRONMENTAL CENTER - 830 COLLEGE ROAD - FAIRBANKS, AK 99701	23-7438038	501(C)(3)	75,000.	0.	EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
NORTHERN CASS PUBLIC SCHOOL DISTRICT 97 - 16021 18TH STREET SE - HUNTER, ND 58048	91-1762623	GOVERNMENT	10,000.	٥.	QUALITY EDUCATION
NORTHERN LOUISIANA INTERFAITH SPONSORING COMMITTEE INC - 2145 HORSESHOE DRIVE - ALEXANDRIA, LA 71301	72-1438482		10,000.	0.	EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
NORTHWEST ALLIANCE FOR ALTERNATIVE MEDIA EDUCATION - P.O.BOX 42671 - PORTLAND, OR 97242	93-1009519	501(C)(3)	33,597.	0.	EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
NORTHWEST COMMUNITY BAIL FUND 2311 N 45TH STREET 303 SEATTLE, WA 98103	83-1096468	501(C)(3)	51,000.	0.	EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

(f) Method of

valuation

(book, FMV, appraisal, other) (g) Description of

non-cash assistance

TIDES CENTER Schedule I (Form 990)

94-3213100 Page 1

(h) Purpose of grant

or assistance

Schedule I (Form 990)	TIDES	CENTER
-----------------------	-------	--------

(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
NPH ACTION FUND							
369 PINE STREET							HEALTHY INDIVIDUALS AND
SAN FRANCISCO, CA 94104	83-3147694	501(C)(4)	20,000.	0.			COMMUNITIES
NYC ARTS CYPHER INC							
12 BROAD STREET							EQUITY, HUMAN RIGHTS, AND
STATEN ISLAND, NY 10304	57-1229930		55,000.	0.			ECONOMIC EMPOWERMENT
OCCIDENTAL COLLEGE							
1600 CAMPUS ROAD							EQUITY, HUMAN RIGHTS, ANI
LOS ANGELES, CA 90041	95-1667177	501(C)(3)	100,000.	0.			ECONOMIC EMPOWERMENT
OHIOANS TO STOP EXECUTIONS							
P.O. BOX 82165							EQUITY, HUMAN RIGHTS, ANI
COLUMBUS, OH 43202	31-1269170	501(C)(3)	30,000.	0.			ECONOMIC EMPOWERMENT
,							
OKO URBAN FARMS INC							
1777 EASTERN PARKWAY, 3							EQUITY, HUMAN RIGHTS, AND
BROOKLYN, NY 11233	83-1456025		55,000.	0.			ECONOMIC EMPOWERMENT
ONE NATION ONE PROJECT INC							
1501 BROADWAY, 24TH FLOOR,							HEALTHY INDIVIDUALS AND
NEW YORK CITY, NY 10036	87-3253485	501(C)(3)	19,129.	0.			COMMUNITIES
ONETEN COALITION INC							
P.O. BOX 3220							EQUITY, HUMAN RIGHTS, ANI
NORFOLK, VA 23514	86-1528485	501(C)(3)	53,211,202.	0.			ECONOMIC EMPOWERMENT
	00 1020100	501(0)(5)					
OPTIONS FOR YOUTH							
1525 EAST 53RD STREET, SUITE 920							EQUITY, HUMAN RIGHTS, ANI
CHICAGO, IL 60615	20-1438278		15,000.	0.			ECONOMIC EMPOWERMENT
OPUS DANCE THEATRE AND COMMUNITY							
SERVICES INC - 127 WEST 141							
STREET, SUITE 23 - NEW YORK, NY				-			EQUITY, HUMAN RIGHTS, AND
10030	13-3548252		40,000.	0.		1	ECONOMIC EMPOWERMENT

Schedul	e I (Form 990)	TIDES	CENTER
Part II	Continuation of	of Grants and	Other Assist

(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
ORANGE COUNTY DEPARTMENT OF EDUCATION - 200 KALMUS DRIVE -							
COSTA MESA, CA 92626	95-6000943	GOVERNMENT	20,000.	0.			QUALITY EDUCATION
ORGANIZATION OF CHINESE AMERICANS INC – 900 19TH STREET NORTHWEST – WASHINGTON, DC 20006	23-7250499	501(C)(3)	40,000.	0.			EQUITY, HUMAN RIGHTS, AN ECONOMIC EMPOWERMENT
ORGANIZED COMMUNITIES AGAINST DEPORTATIONS – 4811 N CENTRAL PARK AVE – CHICAGO, IL 60625	82-0840451		30,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
OSPIEL 108 METRO DRIVE SPARTANBURG, SC 29303	47-3672656		25,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
OUR MOST VALUABLE PEOPLE FOUNDATION – 900 N LAKE SHORE DR. APT 2108 – CHICAGO, IL 60611	36-4407941		15,000.	0.			EQUITY, HUMAN RIGHTS, AN ECONOMIC EMPOWERMENT
OUR SAVIOUR'S LUTHERAN CHURCH 2101 NORTH FRUIT AVENUE, FRESNO, CA 93705	94-1706160	501(C)(3)	70,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PAN AFRICAN COMMUNITY OF CENTRAL NEW YORK - P.O. BOX 37033 - SYRACUSE, NY 13235	16-1479125		37,500.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
PARCELERAS AFORCARIBENAS POR LA FORMACION BARRIAL INC - PO BOX 1321 - SAINT JUST, PR 00978-1321	66-0924847	501(C)(3)	40,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PAROLE ILLINOIS INC 601 SOUTH CALIFORNIA AVENUE CHICAGO, IL 60612	83-3597258	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

Schedule	e I (Form 990)	TIDES	CENTER	
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
PAROLE PREPARATION PROJECT INC							
135 WEST 20TH STREET							EQUITY, HUMAN RIGHTS, AN
NEW YORK CITY, NY 10011	82-1096572		211,400.	0.			ECONOMIC EMPOWERMENT
	02 1090372		211,400.				
PARTNERSHIP FOR SOUTHERN EQUITY							
INC - 55 IVAN ALLEN JR BLVD, SUITE							EQUITY, HUMAN RIGHTS, AN
530 - ATLANTA, GA 30308	27-4424115	501(C)(3)	15,000.	0.			ECONOMIC EMPOWERMENT
			,				
PARTNERSHIP FOR THE ADVANCEMENT OF							
NEW AMERICANS - 4089 FAIRMOUNT							EQUITY, HUMAN RIGHTS, AN
AVENUE - SAN DIEGO, CA 92105	47-5299457	501(C)(3)	60,000.	0.			ECONOMIC EMPOWERMENT
PARTNERSHIP FOR THE PUBLIC GOOD							
617 MAIN STREET							EQUITY, HUMAN RIGHTS, AN
BUFFALO, NY 14203	27-1651050		118,200.	0.			ECONOMIC EMPOWERMENT
PARTNERSHIP PROJECT INC							
PO BOX 65826							EQUITY, HUMAN RIGHTS, AN
WASHINGTON, DC 20035	52-2192070		150,000.	0.			ECONOMIC EMPOWERMENT
PASO DEL NORTE COMMUNITY							
FOUNDATION - 221 NORTH KANSAS							EQUITY, HUMAN RIGHTS, AN
STREET - EL PASO, TX 79901	46-1997449		30,000.	0.			ECONOMIC EMPOWERMENT
PEACE DEVELOPMENT FUND INC							
PO BOX 1280							EQUITY, HUMAN RIGHTS, AN
AMHERST, MA 01004-1280	04-2738794	501(C)(3)	102,500.	0.			ECONOMIC EMPOWERMENT
AMARK51, MA 01004-1200	04-2730794	501(0)(5)	102,500.	0.			ECONOMIC EMPOWERMENT
PEOPLE ORGANIZED FOR WESTSIDE							
RENEWAL - 5617 HOLLYWOOD BLVD.							EQUITY, HUMAN RIGHTS, ANI
SUITE 107 - LOS ANGELES, CA 90028	65-1208274		42,500.	0.			ECONOMIC EMPOWERMENT
PEOPLE UNITED FOR SUSTAINABLE			12,000.				
HOUSING INCORPORATED - 429							
PLYMOUTH AVENUE - BUFFALO, NY							EQUITY, HUMAN RIGHTS, AN
14213	20-3558447	501(C)(3)	15,000.	0.			ECONOMIC EMPOWERMENT

chedule I (Form 990) TIDES CENTER	
-----------------------------------	--

Schedule I (Form 990) TIDES CEN			and Damastic Oc		adula I (Farm 000) Da		94-3213100 Page
Part II Continuation of Grants and Other A (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
PERFORMANCE ZONE INC 75 MAIDEN LANE NEW YORK, NY 10038	13-3357408	501(C)(3)	30,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
POINT COMMUNITY DEVELOPMENT CORPORATION - 940 GARRISON AVENUE - BRONX, NY 10474	13-3765140		118,200.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
POSITIVE COACHING ALLIANCE 66 FRANKLIN STREET, SUITE 300 OAKLAND, CA 94607	77-0485946	501(C)(3)	50,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PRATTSVILLE ART CENTER 14562 MAIN STREET 400 PRATTSVILLE, NY 12468	46-3477275		30,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
PRIME PRODUCE LIMITED 424 W 54TH STREET NEW HAVEN, CT 06510	26-1188925	501(C)(3)	1,275,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
PROJECT EVIDENT INC 501 BOYLSTON STREET BOSTON, MA 02116	88-3216649		552,500.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
PROJECT SWISH 8459 SOUTH HONORE CHICAGO, IL 60620	84-2032663		15,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
PROVIDENCE YOUTH STUDENT MOVEMENT 669 ELMWOOD AVENUE BOX 13 PROVIDENCE, RI 02907	65-1224536	501(C)(3)	10,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
PUBLIC HEALTH INSTITUTE 555 12TH STREET OAKLAND, CA 94607	94-1646278	501(C)(3)	25,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

(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
PUEBLO CRITICO INC							
MANSIONES DE RIO PIEDRAS 1786 BEGON							HEALTHY INDIVIDUALS AND
SAN JUAN, PR 00926	66-0882626		30,000.	0.			COMMUNITIES
PYRAMID CONSULTING INC							
3060 KIMBALL BRIDGE ROAD							EQUITY, HUMAN RIGHTS, AND
ALPHARETTA, GA 30022	58-2191055		50,000.	0.			ECONOMIC EMPOWERMENT
RADCLIFFES YOUTH SPORTS							
ORGANIZATION - 6548 SOUTH ELLIS -	04 5045411		15 000				EQUITY, HUMAN RIGHTS, AND
CHICAGO, IL 60637	84-5045411		15,000.	0.			ECONOMIC EMPOWERMENT
REAL WOMEN RADIO FOUNDATION							
3499 N DAVIS HIGHWAY							EQUITY, HUMAN RIGHTS, AND
PENSACOLA, FL 32503	82-4836878		9,000.	0.			ECONOMIC EMPOWERMENT
REALITY SPEAKING INC							FOULTRY HUMAN DECUME AND
742 HAWS AVENUE NORRISTOWN, PA 19401	16-1696798	501(C)(3)	11,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
	10 1050750	501(0)(3)	11,000.				
RECINTO UNIVERSITARIO DE MAYAGUEZ							
RECTORS OFFICE							
MAYAGEZ, PR 00681-9000	66-0433761	GOVERNMENT	10,000.	0.			QUALITY EDUCATION
RECONSTRUCTIONIST RABBINICAL							
COLLEGE - 1299 CHURCH ROAD -							
WYNCOTE, PA 19095	23-1710675	501(C)(3)	25,000.	0.			QUALITY EDUCATION
,							
REGENTS OF THE UNIVERSITY OF							
COLORADO - 1800 GRANT STREET -							
DENVER, CO 80203	84-6000555	501(C)(3)	10,000.	0.			QUALITY EDUCATION
REINVENT STOCKTON FOUNDATION							
100 N SAN JOAQUIN STREET							HEALTHY INDIVIDUALS AND
STOCKTON, CA 95202-2400	82-1005719	501(C)(3)	24,600.	0.			COMMUNITIES

87

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

TIDES CENTER Schedule I (Form 990)

Schedule I (Form 990)	TIDES	CENTER
-----------------------	-------	--------

(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
REMATRIATION INC							
102 1/2 CONCORD PLACE							EQUITY, HUMAN RIGHTS, ANI
SYRACUSE, NY 13210	85-1101586		100,000.	0.			ECONOMIC EMPOWERMENT
RESEARCH FOUNDATION OF THE CITY							
UNIVERSITY OF NEW YORK - 230 WEST							
41ST STREET - NEW YORK, NY							
10036-7207	13-1988190	501(C)(3)	20,000.	0.			QUALITY EDUCATION
RESTORE THE DELTA							
515 E MAIN STREET	27 4170166		95 000	0			EQUITY, HUMAN RIGHTS, AND
STOCKTON, CA 95202	27-4179166		85,000.	0.			ECONOMIC EMPOWERMENT
RESURRECTION AFTER EXONERATION 2 0							
1212 ST. BERNARD AVE.							EQUITY, HUMAN RIGHTS, AND
NEW ORLEANS, LA 70116	84-2767836		30,000.	0.			ECONOMIC EMPOWERMENT
RHIZOMATICA COMMUNICATIONS							
241 S. 6TH STREET, 605	00 0010001		20.000	0			EQUITY, HUMAN RIGHTS, AND
PHILADELPHIA, PA 19016	82-2312281		20,000.	0.			ECONOMIC EMPOWERMENT
RICHARDSON PLANO GUIDE RIGHT							
FOUNDATION - P.O. BOX 701831 -							EQUITY, HUMAN RIGHTS, ANI
DALLAS, TX 75287	75-2873488		15,000.	0.			ECONOMIC EMPOWERMENT
RISE COLORADO							
1595 ELMIRA ST							EQUITY, HUMAN RIGHTS, ANI
AURORA, CO 80010	47-3566342		25,000.	0.			ECONOMIC EMPOWERMENT
	17 3300342		23,000.				
ROBERT F KENNEDY CENTER FOR							
JUSTICE AND HUMAN RIGHTS - PO BOX							EQUITY, HUMAN RIGHTS, ANI
982 - NEW YORK, NY 10272	13-2522784	501(C)(3)	12,789.	0.			ECONOMIC EMPOWERMENT
ROBOTICS EDUCATION AND COMPETITION							
FOUNDATION INC - 1519 I-30 WEST -							
GREENVILLE, TX 75402	35-2212630		15,000.	0.			QUALITY EDUCATION

C/O PETER ROSE					HEALTHY INDIVIDUALS AND
	61-1461270	F01(C)(2)	50,000.	0.	COMMUNITIES
NEW YORK, NY 10014	01-1401270	501(C)(3)	50,000.	0.	COMMONTITES
ROCKWOOD LEADERSHIP INSTITUTE					
1212 BROADWAY					HEALTHY INDIVIDUALS AND
	70 1550165	F01(0)(2)	15 000	0	
OAKLAND, CA 94612	72-1552165	501(C)(3)	15,000.	0.	
ROOT2FRUIT YOUTH FOUNDATION					
5719 W. OHIO STREET	07 1000011		15 000	0	EQUITY, HUMAN RIGHTS, AND
CHICAGO, IL 60644	27-1292911		15,000.	0.	ECONOMIC EMPOWERMENT
RURAL PEOPLES PLATFORM					
PO BOX 1452	04 4388600		100.000		EQUITY, HUMAN RIGHTS, AND
WINTHORP, WA 98862	84-4377602		100,000.	0.	ECONOMIC EMPOWERMENT
S T R O N G YOUTH INC					
599 JERUSALEM AVENUE					EQUITY, HUMAN RIGHTS, AND
UNIONDALE, NY 11553	11-3590740		113,200.	0.	ECONOMIC EMPOWERMENT
SADIE NASH LEADERSHIP PROJECT INC					
4 W 43RD STREET					EQUITY, HUMAN RIGHTS, AND
NEW YORK, NY 10036	11-3633912	501(C)(3)	118,200.	0.	ECONOMIC EMPOWERMENT
SAINT LOUIS STORY STITCHERS					
ARTISTS COLLECTIVE - 616 N SKINKER					EQUITY, HUMAN RIGHTS, AND
BOULEVARD - ST. LOUIS, MO 63130	61-1750223		25,000.	0.	ECONOMIC EMPOWERMENT

251,847.

89

(d) Amount of

cash grant

318,000

(e) Amount of

noncash

assistance

0.

0.

(f) Method of

valuation

(book, FMV,

appraisal, other)

(g) Description of

non-cash assistance

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

(c) IRC section

if applicable

(b) EIN

33-0373293

13-3615533 501(C)(3)

(a) Name and address of

organization or government

ROCKEFELLER PHILANTHROPY ADVISORS INC - 6 WEST 48TH STREET - NEW

YORK, NY 10008

SAN DIEGO STATE UNIVERSITY 5500 CAMPANILE DRIVE SAN DIEGO, CA 92182-1620

ROCKHOUSE FOUNDATION

DUALITY EDUCATION

Schedule I (Form 990)

94-3213100 Page 1

(h) Purpose of grant

or assistance

HEALTHY INDIVIDUALS AND

COMMUNITIES

Schedule I (Form 990) TIDES CENTER	
------------------------------------	--

Schedule I (Form 990) TIDES CENT		nestic Arganizations	and Domestic Go	wernments (Sch	adula I (Form 990) Pa		94-3213100 Page
(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 JOSE GRAIL FAMILY SERVICES 2003 E. SAN ANTONIO STREET SAN JOSE, CA 95116	77-0397354	501(C)(3)	30,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
SANDRA CAPLAN COMMUNITY BET DIN 441 S. BARRINGTON AVENUE, UNIT 201 LOS ANGELES, CA 90049	45-5254674		32,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
SAVANNAH RIVERKEEPER INCORPORATED P.O. BOX 60 AUGUSTA, GA 30903	58-2630660	501(C)(3)	15,000.	0.			SUSTAINABLE ENVIRONMENT
SAY YES BUFFALO SCHOLARSHIP INC 712 MAIN STREET BUFFALO, NY 14208	46-2867677		760,600.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
SCHWEINFURTH MEMORIAL ART 205 GENESEE ST. AUBURN, NY 13021	16-1097876		128,200.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
SEARCH FOR COMMON GROUND 1730 RHODE ISLAND AVE NW SUITE 1101 WASHINGTON, DC 20036	52-1257425	501(C)(3)	40,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
SEMILLERO DE LAS ARTES CALLE MARIANO ABRIL 101A, BO. BUENA MAYAGUEZ, PR 00680	66-0874286		30,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
SENECA NATION OF INDIANS 12837 ROUTE 438 IRVING, NY 14081-9330	16-0786768		654,900.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
SEPHARDIC HERITAGE INTERNATIONAL 1811 R STREET NW WASHINGTON, DC 20009	83-4120107		12,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT

Schedule I (Form 990) TIDES CENTER

(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
SHAPING OUR APPALACHIAN REGION INC							
137 MAIN STREET, SUITE 300							EQUITY, HUMAN RIGHTS, AND
PIKEVILLE, KY 41501	37-1760428		25,000.	0.			ECONOMIC EMPOWERMENT
SHOSHONE BANNOCK TRIBES OF THE							
FORT HALL RESERVATION - P.O. BOX							EQUITY, HUMAN RIGHTS, AND
306 - FORT HALL, ID 83203	82-0197554	NATIVE TRIBE	13,281.	0.			ECONOMIC EMPOWERMENT
SIKH AMERICAN LEGAL DEFENSE AND			,				
EDUCATION FUND INC - 1050							
CONNECTICUT AVENUE, NW -							EQUITY, HUMAN RIGHTS, AND
WASHINGTON, DC 20006	04-3382840	501(C)(3)	85,000.	0.			ECONOMIC EMPOWERMENT
SIKHS FOR HUMANITY							
10940 TRINITY PARKWAY, SUITE C350							HEALTHY INDIVIDUALS AND
STOCKTON, CA 95219	85-0696432	501(C)(3)	15,000.	0.			COMMUNITIES
,							
SILICON VALLEY DE BUG							
701 LENZEN AVENUE							HEALTHY INDIVIDUALS AND
SAN JOSE, CA 95126	46-4274158	501(C)(3)	10,000.	0.			COMMUNITIES
SKYART NFP							
3026 E. 91ST STREET							HEALTHY INDIVIDUALS AND
CHICAGO, IL 60617	75-3152211	501(C)(3)	10,000.	0.			COMMUNITIES
SMARTMEME INC							L
PO BOX 71928	00 1005505			<u>^</u>			EQUITY, HUMAN RIGHTS, AND
OAKLAND, CA 94612	20-1897585		200,000.	0.			ECONOMIC EMPOWERMENT
SOCIAL GOOD FUND							
P.O. BOX 5473							
RICHMOND, CA 94805	46-1323531	501(C)(3)	119,000.	٥.			SUSTAINABLE ENVIRONMENT
SOUTH ASIAN AMERICANS LEADING							
TOGETHER INC - 8403 COLESVILLE							EQUITY, HUMAN RIGHTS, AND
ROAD - SILVER SPRING, MD 20910	52-2216665	501(0)(2)	75,000.	0.			ECONOMIC EMPOWERMENT

Schedule I (Form 990)	TIDES	CENTER
-----------------------	-------	--------

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	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 non-cash assistance	(h) Purpose of grant or assistance
SOUTHEAST ASIA RESOURCE ACTION CENTER SEARAC - 1628 16TH STREET, NW - WASHINGTON, DC 20009	52-1161473	501(C)(3)	75,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
SOUTHERN VISION ALLIANCE PO BOX 51698 DURHAM, NC 27717	61-1639641	501(C)(3)	100,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
SOUTHWEST ORGANIZING PROJECT 211 10TH STREET SW ALBUQUERQUE, NM 87102	85-0368743	501(C)(3)	100,000.	0.			SUSTAINABLE ENVIRONMENT
SPRINGFIELD PUBLIC SCHOOLS 1550 MAIN STREET SPRINGFIELD, MA 01103		501(C)(3)	516,678.	0.			QUALITY EDUCATION
ST CROIX FOUNDATION FOR COMMUNITY DEVELOPMENT INC - P.O. BOX 1128 - CHRISTIANSTED, VI 00820	66-0480131	501(C)(3)	20,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
ST LAWRENCE COUNTY ARTS COUNCIL PO BOX 252 POTSDAM, NY 13676	16-1330880		551,700.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
STATEN ISLAND URBAN CENTER INC P.O. BOX 10018 STATEN ISLAND, NY 10301	37-1833463		40,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
STORAHTELLING LAB SHUL INC 131 VARICK STREET NEW YORK, NY 10013	46-3877785	501(C)(3)	7,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
STUDENT SENATE FOR CALIFORNIA COMMUNITY COLLEGES – 1102 Q STREET - SACRAMENTO, CA 95811	47-5327498	501(C)(3)	47,500.	0.			QUALITY EDUCATION

TEA	CHI

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

94-3213100 Page 1

NEW YORK, NY 10018 33-1049070 501(c)(3) 118,200. 0. ECONONIC EMPO TALLER SALUD INC F0 B0X 524 66-0494692 501(c)(3) 100,000. 0. EQUITY, HUMAN L0IZA, PR 00772 66-0494692 501(c)(3) 100,000. 0. EQUITY, HUMAN CORPORATION - 131 STEUART STREET - 94-3227261 501(c)(3) 25,000. 0. ECONONIC EMPC TEACHING MATTERS INC 75 FUXERSIDE DRIVE 94-3227261 501(c)(3) 20,000. 0. EAULY TEACHING MATTERS INC 13-3770472 501(c)(3) 20,000. 0. EQUITY, HUMAN SECOND AVENUE FIREHOUSE GALLERY 13-3770472 501(c)(3) 20,000. 0. EQUITY, HUMAN SECOND AVENUE FIREHOUSE GALLERY 11-3735206 65,000. 0. EQUITY, HUMAN SAN FRANCISCO, CA 94107 94-3070617 501(c)(3) 208,600. 0. EQUITY, HUMAN SAN FRANCISCO, CA 94107 94-3070617 501(c)(3) 208,600. 0. EQUITY, HUMAN SAN FRANCISCO, CA 94107 94-3070617 501(c)(3)		(h) Purpose of gra or assistance	(g) Description of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(e) Amount of noncash assistance	(d) Amount of cash grant	(c) IRC section if applicable	(b) EIN	(a) Name and address of organization or government
YOUNG INC - 247 WEST 37H STREET - NEW YORK, NY 1018 EQUITY, HUMAN 33-1049070 EQUITY, HUMAN SCONDARD EMPO ENDING TALLER SALUD INC PO 50X 524 66-0494692 501(C)(3) 100,000. 0. EQUITY, HUMAN ECONOMIC EMPO EQUITY, HUMAN ECONOMIC EMPO SONORAJENISH COMMUNITY CONFORATION - 131 STEUART STREET - SAN FRANCISCO, CA 94105 66-0494692 501(C)(3) 20,000. 0. ECONOMIC EMPO ECONOMIC EMPO COMMUNITIES TEACHING MATTERS INC 475 RIVERSIDE DRIVE NEW YORK, NY 10115 13-3770472 501(C)(3) 20,000. 0. ECONOMIC EMPO ECONOMINITIES TEACHING MATTERS INC 475 RIVERSIDE DRIVE NEW YORK, NY 10115 13-3770472 501(C)(3) 20,000. 0. ECONOMIC EMPO ECONOMINITIES TEACHING EXPERIMENAL VERBABRUJA INC SANORA, NY 10115 13-3770472 501(C)(3) 20,000. 0. ECONOMIC EMPO ECONOMIC EMPO ECONOMIC EMPO DECONOMIC EMPO 11-3735206 65,000. 0. ECONOMIC EMPO ECONOMIC									
NEW YORK, NY 10018 33-1049070 501(c)(3) 118,200. 0. ECONOMIC EMPORENTIAL TALLER SALUD INC PO BOX 524 LDIZA, PR 00772 66-0494692 501(c)(3) 100,000. 0. EQUITY, HUMAN ECONOMIC EMPORENTIAL LDIZA, PR 00772 66-0494692 501(c)(3) 100,000. 0. EQUITY, HUMAN ECONOMIC EMPORENTIAL TANONGA JEWISH COMMUNITY CORFORATION - 131 STEURART STREET - SAN FRANCISCO, CA 94105 94-3227261 501(c)(3) 25,000. 0. ECONOMITIES TEACHING MATTERS INC 475 RUVERSIDE DRIVE 13-3770472 501(c)(3) 20,000. 0. ECONOMIC EMPORENTIES ECONOMIC INC SECOND AVENUE FIREHOUSE GALLERY BAY SHORE, NY 11706 13-3770472 501(c)(3) 20,000. 0. EQUITY, HUMAN ECONOMIC EMPORENTIES II-3735206 EQUITY, HUMAN ECONOMIC EMPORENTIES III-3735206 IIIIIIIIIIIIIIIIIIIIIII									
TALLER SALUD INC PO 80X 524 EQUITY, HUMAN LOIZA, PR 00772 66-0494692 501(C)(3) 100,000. 0. EQUITY, HUMAN LOIZA, PR 00772 66-0494692 501(C)(3) 100,000. 0. ECONOMIC EMPC TANONGA JEWISH COMMUNITY CORPORATION - 131 STEURART STREET - SAN FRANCISCO, CA 94105 94-3227261 501(C)(3) 25,000. 0. COMMUNITIES TEACHING MATTERS INC 475 RIVERSIDE DRIVE NEW YORK, NY 10115 13-3770472 501(C)(3) 20,000. 0. COMMUNITIES TEATRO EXPERIMENAL YERBABRUJA INC SECOND AVENUE FIRENOUSE GALLERY BAY SHORE, NY 11706 11-3735206 65,000. 0. EQUITY, HUMAN ECONOMIC EMPC TECHSOUP GLOBAL 435 BRANNAN STREET TENNESSEANS FOR ALTERNATIVES TO TE DEARTH FENALTY - P.O. BOX 120552 - NASHVILLE, TN 37212 62-1577038 501(C)(3) 208,800. 0. EQUITY, HUMAN ECONOMIC EMPC TEXAS COALITION TO ABOLISH THE DEART PENALTY - P.O. BOX 82212 - 62-1577038 501(C)(3) 30,000. 0. EQUITY, HUMAN		ECONOMIC EMPOWERMEN			0	118 200	501(C)(3)	33-1049070	
PO BOX 524 Control (C) (3) 100,000 Control (C) (3) EQUITY, HUMAN LDIZA, FR 00772 66-0494692 501(C) (3) 100,000 0. EQUITY, HUMAN TAWONGA JEWISH COMMUNITY SAN FRANCISCO, CA 94105 94-3227261 501(C) (3) 25,000. 0. EALTHY INDIV CORPORATION - 131 STEUART STREET - SAN FRANCISCO, CA 94105 94-3227261 501(C) (3) 25,000. 0. EALTHY INDIV TEACHING MATTERS INC 475 RIVERSIDE DRIVE 13-3770472 501(C) (3) 20,000. 0. EALTHY INDIV TEACHING EXPERIMENAL YERBABRUJA INC SECOND AVENUE FIREHOUSE GALLERY 11-3735206 65,000. 0. ECONONIC EMPORENCE BAY SHORE, NY 11706 11-3735206 65,000. 0. ECONONIC EMPORENCE TECHSOUP GLOBAL 435 BRANNAN STREET 501(C) (3) 208,800. 0. EQUITY, HUMAN SAN FRANCISCO, CA 94107 94-3070617 501(C) (3) 208,800. 0. EQUITY, HUMAN 120552 - NASHVILLE, TN 37212 62-1577038 501(C) (3) 30,000. 0. EQUITY, HUMAN 120552 - NASHVILLE, TN 37212 62-1577038 501(C) (3) 30,000. 0. EQUITY, HUMAN	AF OWERMEN I	ECONOMIC EMPOWERMEN			0.	110,200.	501(0)(5)	55 1045070	NEW TORK, NI TOOTO
PO BOX 524 Construction Construction Construction Construction TAWONGA JEWISH COMMUNITY CORPORATION - 131 STEUART STREET - SAN FRANCISCO, CA 94105 94-3227261 501(C)(3) 25,000. 0. Construction TEACHING MATTERS INC 475 RIVERSIDE DRIVE NEW YORK, NY 10115 13-3770472 501(C)(3) 20,000. 0. Construction TEACHING EXPERIMENTLY READERULA INC SECOND AVENUE FIREHOUSE GALLERY BAY SHORE, NY 11706 13-3770472 501(C)(3) 20,000. 0. Construction TECHSOUP GLOBAL 435 BRANNAN STREET SAN FRANCISCO, CA 94107 94-3070617 501(C)(3) 20,000. 0. Construction TECHSOUP GLOBAL 435 BRANNAN STREET SAN FRANCISCO, CA 94107 94-3070617 501(C)(3) 208,800. 0. Construction TENNESSEANS FOR ALTERNATIVES TO THE DEATH FEMALTY - P.O. BOX 120552 - NASHVILLE, TN 37212 62-1577038 501(C)(3) 30,000. 0. Construction TEXAS COALITION TO ABOLISH THE DEATH FEMALTY - P.O. BOX 82212 - Construction Construction Construction Construction									TALLER SALUD INC
LOIZA, PR 00772 66-0494692 501(C)(3) 100,000. 0. CCONMUNITY TAMONGA JEWISH COMMUNITY CORFORATION - 131 STEUART STREET - SAN FRANCISCO, CA 94105 94-3227261 501(C)(3) 25,000. 0. COMMUNITIES TEACHING MATTERS INC 475 RIVERSIDE DRIVE NEW YORK, NY 10115 13-3770472 501(C)(3) 20,000. 0. COMMUNITIES TEATRO EXPERIMENAL YERBABRUJA INC SECOND AVENUE FIREHOUSE GALLERY BAY SHORE, NY 11706 11-3735206 65,000. 0. COMMUNITIES TECHSOUP GLOBAL 435 BRANNAN STREET SAN FRANCISCO, CA 94107 94-3070617 501(C)(3) 208,800. 0. COMMUNIC EMPONENCE (CONMIC EMPONENCE) TENNESSEANS FOR ALTERNATIVES TO THE DEATH PENALTY - P.O. BOX 120552 - NASHVILLE, TN 37212 62-1577038 501(C)(3) 30,000. 0. COMMUNIC EMPONENCE (CONMIC EMPONENCE) TEXAS COALITION TO ABOLISH THE DEATH FENALTY - P.O. BOX 82212 -	MAN RIGHTS AND	EQUITY, HUMAN RIGHT	T						
TANONGA JEWISH COMMUNITY CORPORATION - 131 STEUART STREET - SAN FRANCISCO, CA 9410594-3227261 501(C)(3)25,000.0.TEACHING MATTERS INC 475 RIVERSIDE DRIVE NEW YORK, NY 1011513-3770472 501(C)(3)20,000.0.COMMUNITIESTEATRO EXPERIMENAL YERBABRUJA INC SECOND AVENUE FIREHOUSE GALLERY BAY SHORE, NY 1170611-373520665,000.0.EQUITY, HUMAN BCONOMIC EMPONICTECHSOUP GLOBAL 435 BRANNAN STREET SAN FRANCISCO, CA 9410794-3070617 501(C)(3)208,800.0.EQUITY, HUMAN BCONOMIC EMPONICTENNESSEANS FOR ALTERNATIVES TO THE DEATH PENALTY - P.O. BOX 120552 - NASHVILLE, TN 3721262-1577038 501(C)(3)30,000.0.EQUITY, HUMAN BCONOMIC EMPONICTEXAS COALITION TO ABOLISH THE DEATH PENALTY - P.O. BOX 82212 -EQUITY, HUMAN EQUITY, HUMANEQUITY, HUMAN EQUITY, HUMAN					0	100 000	501(0)(3)	66-0494692	
CORPORATION - 131 STEUART STREET - SAN FRANCISCO, CA 94105 94-3227261 501(C)(3) 25,000. 0. HEALTHY INDIV COMMUNITIES TEACHING MATTERS INC 475 RIVERSIDE DRIVE NEW YORK, NY 10115 13-3770472 501(C)(3) 20,000. 0. HEALTHY INDIV COMMUNITIES TEATRO EXPERIMENAL YERBABRUJA INC SECOND AVENUE PIREHOUSE GALLERY BAY SHORE, NY 11706 11-3735206 65,000. 0. EQUITY, HUMAN ECONOMIC EMPORENCE SECOND AVENUE PIREHOUSE GALLERY BAY SHORE, NY 11706 11-3735206 65,000. 0. EQUITY, HUMAN ECONOMIC EMPORENCE SECOND GLOBAL 435 BRANNAN STREET SAN FRANCISCO, CA 94107 94-3070617 501(C)(3) 208,800. 0. EQUITY, HUMAN ECONOMIC EMPORENCE SECOND HE DEATH PENALTY - P.O. BOX 120552 - NASHVILLE, TN 37212 62-1577038 501(C)(3) 30,000. 0. EQUITY, HUMAN ECONOMIC EMPORENCE SECOND IN TO ABOLISH THE DEATH PENALTY - P.O. BOX 82212 - EQUITY, HUMAN	AF OWERMEN I	ECONOMIC EMPOWERMEN			0.	100,000.	501(0)(5)	00 0404002	
CORPORATION - 131 STEUART STREET - SAN FRANCISCO, CA 94105 94-3227261 501(C)(3) 25,000. 0. HEALTHY INDIV COMMUNITIES TEACHING MATTERS INC 475 RIVERSIDE DRIVE NEW YORK, NY 10115 13-3770472 501(C)(3) 20,000. 0. HEALTHY INDIV COMMUNITIES TEATRO EXPERIMENAL YERBABRUJA INC SECOND AVENUE FIREHOUSE GALLERY BAY SHORE, NY 11706 11-3735206 65,000. 0. EQUITY, HUMAN ECONOMIC EMPORENCE EQUITY, HUMAN SAN FRANCISCO, CA 94107 94-3070617 501(C)(3) 208,800. 0. EQUITY, HUMAN ECONOMIC EMPORENCE EQUITY, HUMAN ECONOMIC EMPO									TAWONGA JEWISH COMMUNITY
SAN FRANCISCO, CA 9410594-3227261501(C)(3)25,000.0.COMMUNITIESTEACHING MATTERS INC 475 RIVERSIDE DRIVE NEW YORK, NY 1011513-3770472501(C)(3)20,000.0.HEALTHY INDIV HEALTHY INDIV COMMUNITIESTEATRO EXPERIMENAL YERBABRUJA INC SECOND AVENUE FIREHOUSE GALLERY BAY SHORE, NY 1170611-373520665,000.0.EQUITY, HUMAN EQUITY, HUMAN SOURCE COMMUNITIESTECHSOUP GLOBAL 435 BRANNAN STREET SAN FRANCISCO, CA 9410794-3070617501(C)(3)208,800.0.ECONOMIC EMPON ECONOMIC EMPON BOULTY, HUMAN ECONOMIC EMPON ECONOMIC EM	DIVIDITALS AND	HEALTHY INDIVIDUALS	T.						
TEACHING MATTERS INC 13-3770472 501(C)(3) 20,000. 0. TEACHING MATTERS INC 13-3770472 501(C)(3) 20,000. 0. NEW YORK, NY 10115 13-3770472 501(C)(3) 20,000. 0. TEATRO EXPERIMENAL YERBABRUJA INC SECOND AVENUE FIREHOUSE GALLERY BAY SHORE, NY 11706 11-3735206 65,000. 0. TECHSOUP GLOBAL 435 BRANNAN STREET SAN FRANCISCO, CA 94107 94-3070617 501(C)(3) 208,800. 0. TENNESSEANS FOR ALTERNATIVES TO THE DEATH PENALTY - P.O. BOX 120552 - NASHVILLE, TN 37212 62-1577038 501(C)(3) 30,000. 0. TEXAS COALITION TO ABOLISH THE DEATH PENALTY - P.O. BOX 82212 - EQUITY, HUMAN EQUITY, HUMAN					0	25 000	501(c)(3)	94-3227261	
475 RIVERSIDE DRIVE NEW YORK, NY 1011513-3770472501(C)(3)20,000.0.HEALTHY INDIV COMMUNITIESTEATRO EXPERIMENAL YERBABRUJA INC SECOND AVENUE FIREHOUSE GALLERY BAY SHORE, NY 1170611-373520665,000.0.EQUITY, HUMAN EQUITY, HUMAN SCONOMIC EMPORENCETECHSOUP GLOBAL 435 BRANNAN STREET SAN FRANCISCO, CA 9410794-3070617501(C)(3)208,800.0.EQUITY, HUMAN EQUITY, HUMAN<		COMMONITIES			0.	25,000.	501(0)(5)	94-3227201	SAN FRANCISCO, CA 94105
475 RIVERSIDE DRIVE NEW YORK, NY 1011513-3770472501(C)(3)20,000.0.HEALTHY INDIV COMMUNITIESTEATRO EXPERIMENAL YERBABRUJA INC SECOND AVENUE FIREHOUSE GALLERY BAY SHORE, NY 1170611-373520665,000.0.EQUITY, HUMAN EQUITY, HUMAN SCONOMIC EMPORENCETECHSOUP GLOBAL 435 BRANNAN STREET SAN FRANCISCO, CA 9410794-3070617501(C)(3)208,800.0.EQUITY, HUMAN EQUITY, HUMAN<									TEACHING MATTERS INC
NEW YORK, NY 1011513-3770472501(C)(3)20,000.0.communitiesTEATRO EXPERIMENAL YERBABRUJA INC SECOND AVENUE FIREHOUSE GALLERY BAY SHORE, NY 1170611-373520665,000.0.EQUITY, HUMAN ECONOMIC EMPOTECHSOUP GLOBAL 435 BRANNAN STREET SAN FRANCISCO, CA 9410794-3070617501(C)(3)208,800.0.EQUITY, HUMAN ECONOMIC EMPOTENNESSEANS FOR ALTERNATIVES TO THE DEATH PENALTY - P.O. BOX 120552 - NASHVILLE, TN 3721262-1577038501(C)(3)30,000.0.EQUITY, HUMAN EQUITY, HUMAN EQUI		זגוותדעדת אשתוגים	r.						
TEATRO EXPERIMENAL YERBABRUJA INC SECOND AVENUE FIREHOUSE GALLERY BAY SHORE, NY 11706 TECHSOUP GLOBAL 435 BRANNAN STREET SAN FRANCISCO, CA 94107 94-3070617 501(C)(3) 208,800. 0. EQUITY, HUMAN EQUITY, HUMAN SAN FRANCISCO, CA 94107 94-3070617 501(C)(3) 208,800. 0. EQUITY, HUMAN EQUITY, HUMAN EQUITY, HUMAN SAN FRANCISCO, CA 94107 94-3070617 501(C)(3) 208,800. 0. EQUITY, HUMAN 120552 - NASHVILLE, TN 37212 62-1577038 501(C)(3) 30,000. 0. EQUITY, HUMAN EQUITY, HUMAN EQUITY, HUMAN EQUITY, HUMAN EQUITY, HUMAN					0	20.000	E01(0)(2)	12 2770472	
SECOND AVENUE FIREHOUSE GALLERY 11-3735206 65,000. 0. EQUITY, HUMAN ECONOMIC EMPORENCE BAY SHORE, NY 11706 11-3735206 65,000. 0. ECONOMIC EMPORENCE TECHSOUP GLOBAL 435 BRANNAN STREET EQUITY, HUMAN EQUITY, HUMAN SAN FRANCISCO, CA 94107 94-3070617 501(C)(3) 208,800. 0. EQUITY, HUMAN ECONOMIC EMPORENCE TENNESSEANS FOR ALTERNATIVES TO 94-3070617 501(C)(3) 208,800. 0. EQUITY, HUMAN ECONOMIC EMPORENCE 120552 - NASHVILLE, TN 37212 62-1577038 501(C)(3) 30,000. 0. EQUITY, HUMAN EQUITY, HUMAN ECONOMIC EMPORENCE TEXAS COALITION TO ABOLISH THE EQUITY, P.O. BOX 82212 - EQUITY, HUMAN EQUITY, HUMA	5	COMMUNITIES			0.	20,000.	501(C)(3)	13-3770472	NEW YORK, NY 10115
SECOND AVENUE FIREHOUSE GALLERY 11-3735206 65,000. 0. EQUITY, HUMAN ECONOMIC EMPORENCE BAY SHORE, NY 11706 11-3735206 65,000. 0. ECONOMIC EMPORENCE TECHSOUP GLOBAL 435 BRANNAN STREET EQUITY, HUMAN EQUITY, HUMAN SAN FRANCISCO, CA 94107 94-3070617 501(C)(3) 208,800. 0. EQUITY, HUMAN ECONOMIC EMPORENCE TENNESSEANS FOR ALTERNATIVES TO FENNESSEANS FOR ALTERNATIVES TO EQUITY, HUMAN EQUIT									MEAMDO EVDEDIMENAL VEDDADDILLA INC
BAY SHORE, NY 1170611-373520665,000.0.ECONOMIC EMPORENCETECHSOUP GLOBAL 435 BRANNAN STREET SAN FRANCISCO, CA 9410794-3070617501(C)(3)208,800.0.EQUITY, HUMAN EQUITY, HUMAN ECONOMIC EMPORENCETENNESSEANS FOR ALTERNATIVES TO THE DEATH PENALTY - P.O. BOX 120552 - NASHVILLE, TN 3721262-1577038501(C)(3)30,000.0.ECONOMIC EMPORENCETEXAS COALITION TO ABOLISH THE DEATH PENALTY - P.O. BOX 82212 -62-1577038501(C)(3)30,000.0.EQUITY, HUMAN EQUITY, HUMAN									
TECHSOUP GLOBAL 435 BRANNAN STREET EQUITY, HUMAN SAN FRANCISCO, CA 94107 94-3070617 501(C)(3) 208,800. 0. TENNESSEANS FOR ALTERNATIVES TO EQUITY, HUMAN EQUITY, HUMAN 120552 - NASHVILLE, TN 37212 62-1577038 501(C)(3) 30,000. 0. TEXAS COALITION TO ABOLISH THE EQUITY, HUMAN EQUITY, HUMAN					0	65 000		11 2025006	
435 BRANNAN STREET SAN FRANCISCO, CA 9410794-3070617501(C)(3)208,800.0.EQUITY, HUMAN ECONOMIC EMPORENCETENNESSEANS FOR ALTERNATIVES TO THE DEATH PENALTY - P.O. BOX 120552 - NASHVILLE, TN 3721262-1577038501(C)(3)30,000.0.EQUITY, HUMAN ECONOMIC EMPORENCETEXAS COALITION TO ABOLISH THE DEATH PENALTY - P.O. BOX 82212 -62-1577038501(C)(3)30,000.0.EQUITY, HUMAN EQUITY, HUMAN EQUITY, HUMAN	MPOWERMENT	ECONOMIC EMPOWERMEN	1		0.	65,000.		11-3/35206	BAY SHORE, NY 11706
435 BRANNAN STREET SAN FRANCISCO, CA 9410794-3070617501(C)(3)208,800.0.EQUITY, HUMAN ECONOMIC EMPORENCE EQUITY, HUMAN ECONOMIC EMPORENCE BEQUITY, HUMAN EQUITY, H									TECHSOLID GLOBAL
SAN FRANCISCO, CA 9410794-3070617501(C)(3)208,800.0.ECONOMIC EMPORETENNESSEANS FOR ALTERNATIVES TO THE DEATH PENALTY - P.O. BOX 120552 - NASHVILLE, TN 3721262-1577038501(C)(3)30,000.0.EQUITY, HUMAN ECONOMIC EMPORETEXAS COALITION TO ABOLISH THE DEATH PENALTY - P.O. BOX 82212 -Image: Content of the second		FOULT WY HUMAN PICH	π						
TENNESSEANS FOR ALTERNATIVES TO EQUITY, HUMAN 120552 - NASHVILLE, TN 37212 62-1577038 501(C)(3) TEXAS COALITION TO ABOLISH THE EQUITY, HUMAN DEATH PENALTY - P.O. BOX 82212 - EQUITY, HUMAN					0	208 800	501(c)(3)	94-3070617	
THE DEATH PENALTY - P.O. BOX 62-1577038 501(C)(3) 30,000. 0. EQUITY, HUMAN 120552 - NASHVILLE, TN 37212 62-1577038 501(C)(3) 30,000. 0. ECONOMIC EMPO TEXAS COALITION TO ABOLISH THE DEATH PENALTY - P.O. BOX 82212 - Image: Comparison of the comparison of	AF OWERMEN I	ECONOMIC EMPOWERMEN			0.	200,000.	501(0)(5)	94-3070017	SAN FRANCISCO, CA 94107
THE DEATH PENALTY - P.O. BOX 62-1577038 501(C)(3) 30,000. 0. EQUITY, HUMAN 120552 - NASHVILLE, TN 37212 62-1577038 501(C)(3) 30,000. 0. ECONOMIC EMPO TEXAS COALITION TO ABOLISH THE DEATH PENALTY - P.O. BOX 82212 - Image: Comparison of the comparison of									TENNESSEANS FOR ALTERNATIVES TO
120552 - NASHVILLE, TN 37212 62-1577038 501(C)(3) 30,000. 0. ECONOMIC EMPORENCE TEXAS COALITION TO ABOLISH THE DEATH PENALTY - P.O. BOX 82212 - EQUITY, HUMAN EQUITY, HUMAN			π						
TEXAS COALITION TO ABOLISH THE DEATH PENALTY - P.O. BOX 82212 - EQUITY, HUMAN	•				0	20 000	501(C)(3)	62-1577029	
DEATH PENALTY - P.O. BOX 82212 - EQUITY, HUMAN	MPOWERMENT	ECONOMIC EMPOWERMEN			0.	30,000.	501(C)(3)	02-15//030	120552 - NASHVILLE, TN 37212
DEATH PENALTY - P.O. BOX 82212 - EQUITY, HUMAN									
	NAN DIAMA								
AUSTIN, TX 78708-2212 76-0618574 B01(C)(3) 30,000. 0. ECONOMIC EMPO							F01 (a) (2)		
	MPOWERMENT	ECONOMIC EMPOWERMEN	E		0.	30,000.	5U1(C)(3)	/6-0618574	AUSTIN, TX 78708-2212
TEXAS FREEDOM NETWORK EDUCATION									TEXAS FREEDOM NETWORK EDUCATION
		EQUITY, HUMAN RIGHT	т						
		ECONOMIC EMPOWERMEN			0	150 000	F(1/2)/2	71 2700217	

Schedule I (Form 990)	TIDES	CENTER
-----------------------	-------	--------

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.) T	
(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 BRONX DOCUMENTARY CENTER 614 COURTLANDT AVENUE BRONX, NY 10451	45-2403312		843,800.	0.			EQUITY, HUMAN RIGHTS, AN ECONOMIC EMPOWERMENT
THE BROTHERHOOD 2500 S. ABILENE ST. 441659 AURORA, CO 80014	80-0168705		25,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
THE CALIFORNIA ENDOWMENT ATTN: RYAN WENTWORTH SACRAMENTO, CA 95814	95-4523232		2,386,369.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
THE CANTATA SINGERS PO BOX 952 ELMIRA, NY 14902	16-0989756		30,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
THE CENTER FOR POPULAR DEMOCRACY 449 TROUTMAN STREET BROOKLYN, NY 11237	45-3813436	501(C)(3)	495,000.	0.			EQUITY, HUMAN RIGHTS, ANI ECONOMIC EMPOWERMENT
THE CRENULATED COMPANY LTD 1512 TOWNSEND AVENUE BRONX, NY 10452	14-1719016	501(C)(3)	37,500.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
THE IMANI GROUP INC P. O. BOX 1666 AIKEN, SC 29802	57-1122166	501(C)(3)	125,000.	0.			SUSTAINABLE ENVIRONMENT
THE JEWISH FEDERATIONS OF NORTH AMERICA - 25 BROADWAY, SUITE 1700 - NEW YORK, NY 10004-1010	13-1624240		29,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
THE NAPABA LAW FOUNDATION P.O. BOX 65081 WASHINGTON, DC 20035	36-4014003	501(C)(3)	40,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT

Schedule I (Form 990) TIDES CENTER	
------------------------------------	--

Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	s and Domestic Go	vernments (Sche	edule I (Form 990), Pa	art II.)	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 non-cash assistance	(h) Purpose of grant or assistance
THE NEW SCHOOL							
66 WEST 12TH STREET							EQUITY, HUMAN RIGHTS, AND
NEW YORK, NY 10011	13-3297197	501(C)(3)	160,000.	0.			ECONOMIC EMPOWERMENT
THE OPPORTUNITY AGENDA INC							
575 8TH AVENUE SUITE 701							EQUITY, HUMAN RIGHTS, AND
NEW YORK, NY 10018	84-3935514	501(C)(3)	383,513.	0.			ECONOMIC EMPOWERMENT
THE PRAXIS PROJECT INC							
PO BOX 7259							EQUITY, HUMAN RIGHTS, AND
OAKLAND, CA 94601	30-0044814	501(C)(3)	185,000.	0.			ECONOMIC EMPOWERMENT
THE SMILE TRUST INC							
100 SW 2ND AVE							HEALTHY INDIVIDUALS AND
MIAMI, FL 33130	47-2964710	501(C)(3)	8,000.	0.			COMMUNITIES
THE SPRINGVILLE CENTER FOR THE							
ARTS INC - PO BOX 62 -							EQUITY, HUMAN RIGHTS, AND
SPRINGVILLE, NY 14141	16-1093588		203,900.	0.			ECONOMIC EMPOWERMENT
THE TRUSTEES OF COLUMBIA							
UNIVERSITY IN THE CITY OF NEW YORK							
- 622 WEST 113TH STREET - NEW							HEALTHY INDIVIDUALS AND
YORK, NY 10025	13-5598093	501(C)(3)	20,000.	0.			COMMUNITIES
THE W O W PROJECT INC							
26 MOTT STREET	05 01 55000		70.000	0			EQUITY, HUMAN RIGHTS, AND
NEW YORK, NY 10013	85-3155239		70,000.	0.			ECONOMIC EMPOWERMENT
TIDES ADVOCACY							
P.O. BOX 29229							HEALTHY INDIVIDUALS AND
SAN FRANCISCO, CA 94129	94-3153687	501(C)(4)	18,208,110.	0.			COMMUNITIES
TIDES FOUNDATION							
WESTERN CLEAN ENERGY CAMPAIGN							HEALTHY INDIVIDUALS AND
LOS ANGELES, CA 90088-9389	51-0198509	501(C)(3)	14,229,810.	0.			COMMUNITIES

TIKKUN OLAM PRODUCTIONS						
INCORPORATED - 27 WILTON STREET -						EQUITY, HUMAN RIGHTS, AND
SOMERVILLE, MA 02145	83-0681681		150,000.	0.		ECONOMIC EMPOWERMENT
TOP CITY COPMMUNITY FOUNDATION						
P.O. BOX 2565			15 000			EQUITY, HUMAN RIGHTS, AND
TOPEKA, KS 66604	83-2089019		15,000.	0.		ECONOMIC EMPOWERMENT
TRADITIONAL ARTS IN UPSTATE NEW						
YORK - 53 MAIN ST CANTON, NY						FOULTRY HIMAN PICERS AND
13617	22-3090439		287,100.	0.		EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
	22 3090439		207,100.			
TRANS GOOFY GAMES INC						
ALAMEDA TOWER II						HEALTHY INDIVIDUALS AND
SAN JUAN, PR 00921	66-0995209		28,500.	0.		COMMUNITIES
TRANSART AND CULTURAL SERVICES INC						
PO BOX 148						EQUITY, HUMAN RIGHTS, AND
WEST PARK, NY 12493	11-2922264	501(C)(3)	55,000.	0.		ECONOMIC EMPOWERMENT
TRANSGENDER LEGAL DEFENSE AND						
EDUCATION FUND INC - 520 8TH						EQUITY, HUMAN RIGHTS, AND
AVENUE - NEW YORK, NY 10018	04-3762842	501(C)(3)	47,000.	0.		ECONOMIC EMPOWERMENT
TRANSPARENCY TEXAS						
6125 LUTHER LANE PMB 262						HEALTHY INDIVIDUALS AND
DALLAS, TX 75225	27-1365206	501(C)(3)	12,000.	0.		COMMUNITIES
TREEHOUSE SHAKERS INC						
RADIO CITY STATION						FOULTRY HIMAN PICERS AND
NEW YORK, NY 10101-0186	57-1194398		123,200.	0.		EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
TROY REHABILITATION AND	57-1194330		125,200.	υ.		ECONOMIC EMPOWERMENT
IMPROVEMENT PROGRAM INC - 415						
RIVER STREET, 3RD FLOOR - TROY, NY						EQUITY, HUMAN RIGHTS, AND
······································						 , , ,

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

(d) Amount of

cash grant

(e) Amount of

noncash

assistance

(f) Method of

valuation

(book, FMV,

appraisal, other)

(g) Description of

non-cash assistance

(c) IRC section

if applicable

(b) EIN

14-1503655

TIDES CENTER Schedule I (Form 990)

(a) Name and address of

organization or government

Part II

12180

94-3213100 Page 1

(h) Purpose of grant

or assistance

ECONOMIC EMPOWERMENT

203,900.

Ο.

Schedule I (Form 990)	TIDES	CENTER
-----------------------	-------	--------

Schedule I (Form 990) TIDES CEN							4-3213100 Page 1
Part II Continuation of Grants and Other A (a) Name and address of organization or government	Assistance to Doi (b) EIN	(c) IRC section (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
TRUE SELF FOUNDATION INC WQ-8 CALLE DELFIN SAN JUAN, PR 00919	66-0881019		80,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
TRUTH PHARM INC PO BOX 424 BINGHAMTON, NY 13902	81-0718278		87,500.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
UNION FOR REFORM JUDAISM ATTN: DEVELOPMENT OFFICE NEW YORK, NY 10017	13-1663143	501(C)(3)	16,250.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
UNITED STATES FUND FOR UNICEF 125 MAIDEN LANE NEW YORK, NY 10038	13-1760110	501(C)(3)	105,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
UNITED WAY OF SANTA CRUZ COUNTY 4450 CAPITOLA ROAD, SUITE 106 CAPITOLA, CA 95010	94-1422471	501(C)(3)	30,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
UNIVERSITY OF MARYLAND FOUNDATION INC - 3300 METZEROTT ROAD - ADELPHI, MD 20783	52-1125663	501(C)(3)	15,000.	0.			QUALITY EDUCATION
UNIVERSITY OF WISCONSIN FOUNDATION 1848 UNIVERSITY AVENUE MADISON, WI 53726	39-0743975	501(C)(3)	15,000.	0.			EQUITY, HUMAN RIGHTS, AND ECONOMIC EMPOWERMENT
UPRISE COLLECTIVE PO BOX 7462 BEAVERTON, OR 97007	82-4833932	501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
URBAN HABITAT PROGRAM 2000 FRANKLIN STREET OAKLAND, CA 94612	20-0275424	501(C)(3)	92,900.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES

Schedule	e I (Form 990)	TIDES	CENTER	
Part II	Continuation of	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
URBAN MALE NETWORK							
2245 W. JACKSON BLVD							EQUITY, HUMAN RIGHTS, AND
CHICAGO, IL 60612	47-4830984		15,000.	0.			ECONOMIC EMPOWERMENT
URI L TZEDEK							
4645 E. MARILYN ROAD							EQUITY, HUMAN RIGHTS, AND
SCOTTSDALE, AZ 85260	26-3274502	501(C)(3)	32,000.	0.			ECONOMIC EMPOWERMENT
UTAH DINE BIKEYAH P.O. BOX 554							EQUITY, HUMAN RIGHTS, AND
SALT LAKE CITY, UT 84110	61-1729917	501(C)(3)	50,000.	0.			ECONOMIC EMPOWERMENT
		501(0)(3)		••			
VALLEY COMMUNITY SDA CHURCH							
POST OFFICE BOX 5155,							HEALTHY INDIVIDUALS AND
STOCKTON, CA 95205-0155	68-0260844	501(C)(3)	40,000.	0.			COMMUNITIES
VALLEY OF THE SUN YOUNG MENS							
CHRISTIAN ASSOCIATION - 350 N 1ST							HEALTHY INDIVIDUALS AND
AVENUE - PHOENIX, AZ 85003-1513	86-0096799	501(C)(3)	15,000.	0.			COMMUNITIES
VALLEY VOICES							
1303 AMELIA AVENUE							HEALTHY INDIVIDUALS AND
HANFORD, CA 93230	84-3911625	501(C)(3)	75,000.	0.			COMMUNITIES
VERDE							
4145 NE CULLY BOULEVARD							EQUITY, HUMAN RIGHTS, AND
PORTLAND, OR 97218	20-3685723		67,500.	0.			ECONOMIC EMPOWERMENT
VILLAGE CONNECT INC							
1250A FAIRMONT DRIVE							HEALTHY INDIVIDUALS AND
SAN LEANDRO, CA 94578	27-0955890	501(C)(3)	150,000.	0.			COMMUNITIES
VIRGINIA ORGANIZING INC							
703 CONCORD AVENUE							EQUITY, HUMAN RIGHTS, AND
CHARLOTTESVILLE, VA 22903	54-1674992	501(0)(3)	200,000.	0.			ECONOMIC EMPOWERMENT

Schedule I (Form 990)	TIDES	CENTER
-----------------------	-------	--------

Schedule I (Form 990) TIDES CEN Part II Continuation of Grants and Other A		mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa		94-3213100 Page
(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
VOICE BUFFALO INC							
2495 MAIN STREET, SUITE 547							EQUITY, HUMAN RIGHTS, AND
BUFFALO, NY 14214	16-1502516	501(C)(3)	211,400.	0.			ECONOMIC EMPOWERMENT
WAREHOUSE WORKER RESOURCE CENTER							
521 N EUCLID AVE							EQUITY, HUMAN RIGHTS, ANI
ONTARIO, CA 91762	45-2287926	501(C)(3)	75,000.	0.			ECONOMIC EMPOWERMENT
WAUKESHA COUNTY GREEN TEAM INC							
1223 TIMBER RIDGE PEWAUKEE, WI 53072	46-0902803	501(C)(3)	40,000.	0.			SUSTAINABLE ENVIRONMENT
	10 0902000	561(0)(5)	10,000.				
WE THE PEOPLE OF DETROIT							
P.O. BOX 7033							EQUITY, HUMAN RIGHTS, ANI
DETROIT, MI 48207	47-5123903	501(C)(3)	100,000.	0.			ECONOMIC EMPOWERMENT
WESPAC FOUNDATION INC							
52 NORTH BROADWAY							EQUITY, HUMAN RIGHTS, AND
WHITE PLAINS, NY 10607	13-3109400		35,000.	0.			ECONOMIC EMPOWERMENT
WEST COUNTY HEALTH CENTERS INC							
P.O. BOX 1449							HEALTHY INDIVIDUALS AND
GUERNEVILLE, CA 95446	23-7310613	501(C)(3)	25,000.	0.			COMMUNITIES
WILLOW DOMESTIC VIOLENCE CENTER OF							
GREATER ROCHESTER INC - PO BOX							EQUITY, HUMAN RIGHTS, AND
39601 - ROCHESTER, NY 14604	16-1099257		113,200.	0.			ECONOMIC EMPOWERMENT
WISCONSIN ALLIANCE FOR WOMENS MKE							
FREEDOM FUND - PO BOX 1726 -							EQUITY, HUMAN RIGHTS, ANI
MADISON, WI 53701	80-0287566	501(C)(3)	100,000.	0.			ECONOMIC EMPOWERMENT
NUMBERS NO INNOCENCE							
WITNESS TO INNOCENCE 1501 CHERRY STREET							EQUITY, HUMAN RIGHTS, ANI
PHILADELPHIA, PA 19102	20-2394229	501(C)(3)	150,000.	0.			ECONOMIC EMPOWERMENT

Schedule I (Form 990)	\mathtt{TIDES}	CENTER
-----------------------	------------------	--------

94-3213100 Page 1

(a) Name and address of				(-) A manual of	(f) Mathead of		(h) Dumpers of sugart
(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
WOMEN HAVE OPTIONS							
P.O. BOX 1611							EQUITY, HUMAN RIGHTS, AN
COLUMBUS, OH 43216	31-1357186	501(C)(3)	8,358.	0.			ECONOMIC EMPOWERMENT
WOMEN S HOUSING AND ECONOMIC							
DEVELOPMENT CORPORATION - 50 E							EQUITY, HUMAN RIGHTS, AN
168TH ST BRONX, NY 10452	11-3099604		294,600.	0.			ECONOMIC EMPOWERMENT
WOODSIDE ON THE MOVE INC							
51-23B QUEENS BOULEVARD							EQUITY, HUMAN RIGHTS, AN
WOODSIDE, NY 11377	11-2435565	501(C)(3)	211,400.	0.			ECONOMIC EMPOWERMENT
WORD IS BOND							
522 NW 23 AVE, SUITE J							EQUITY, HUMAN RIGHTS, AN
PORTLAND, OR 97210	83-1843221		25,000.	٥.			ECONOMIC EMPOWERMENT
WORKER S CENTER OF CENTRAL NEW							
YORK INC - 2013 E. GENESEE STREET							EQUITY, HUMAN RIGHTS, AN
- SYRACUSE, NY 13210	61-1706974		123,200.	0.			ECONOMIC EMPOWERMENT
WORLD VISION INC							
P.O. BOX 9716							EQUITY, HUMAN RIGHTS, AN
FEDERAL WAY, WA 98063-9716	95-1922279	501(C)(3)	70,000.	0.			ECONOMIC EMPOWERMENT
YELLOWSTONE TO YUKON CONSERVATION							
INITIATIVE - P.O. BOX 157 -							EQUITY, HUMAN RIGHTS, AN
BOZEMAN, MT 59771-0157	81-0535303		75,000.	0.			ECONOMIC EMPOWERMENT
YESHIVA UNIVERSITY							
500 WEST 185TH STREET							
NEW YORK, NY 10033-3201	13-1624225	501(C)(3)	49,000.	0.			QUALITY EDUCATION
YOUNG MEN OF DISTINCTION INC							
2201 AVENUE F							EQUITY, HUMAN RIGHTS, AN
RIVIERA BEACH, FL 33404	84-1747227		15,000.	٥.			ECONOMIC EMPOWERMENT

Schedule I (Form 990)	TIDES	CENTER
-----------------------	-------	--------

(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
YOUNG MENS EDUCATIONAL NETWORK 1241 S. PULASKI ROAD CHICAGO, IL 60623	36-4124098		15,000.	0.			EQUITY, HUMAN RIGHTS, AN ECONOMIC EMPOWERMENT
YOUTH FOR ENVIRONMENTAL SANITY 3240 KING STREET BERKELEY, CA 94703	77-0467495	501(C)(3)	15,000.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
YOUTH FORWARD 2411 15TH ST SUITE A. SACRAMENTO, CA 95820	81-5343876	501(C)(3)	25,667.	0.			HEALTHY INDIVIDUALS AND COMMUNITIES
YOUTHBUILD BOSTON 27 CENTRE STREET ROXBURY, MA 02119	04-3080098		25,000.	0.			EQUITY, HUMAN RIGHTS, AN ECONOMIC EMPOWERMENT
ZENO 1404 E YESLER WAY, SUITE 202D SEATTLE, WA 98122	20-5570858	501(C)(3)	30,000.	0.			QUALITY EDUCATION

TIDES CENTER

94-3213100 Page 2

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
TIPEND/SUPPORT/SCHOLARSHIP	7	39,833.	0.		
Part IV Supplemental Information. Provide the information red	uired in Part I. lin	e 2; Part III, column	(b); and any other ac	lditional information.	

PART I, LINE 2:

TIDES CONDUCTS THOROUGH DUE DILIGENCE IN ADVANCE OF FUNDING, INCLUDING

REVIEW OF THE GROUP'S TAX-EXEMPT STATUS AND WHETHER THE GRANT WOULD ADVANCE

TIDES' MISSION. GRANTEES RECEIVE A WRITTEN GRANT AWARD NOTIFICATION. BY

ACCEPTING PAYMENT, THE GRANTEE AGREES TO USE THE FUNDS EXCLUSIVELY FOR

PURPOSES CONSISTENT WITH TIDES' EXEMPT STATUS UNDER IRC SECTION 501(C)(3).

IF A GRANT IS RESTRICTED FOR A SPECIFIC PROGRAM OR SPECIFIC ACTIVITIES,

GRANTEES FURTHER AGREE THAT ANY PORTION OF THE GRANT NOT USED FOR THE

STATED PURPOSE MUST BE REPAID AND ANY CHANGE OF THE PURPOSES MUST BE

Schedule I (Form 990)		TIDE	S CENTER					94-32	213100	Page 2
Part IV	Supple	mental In	formation	า							
APPROV	ED BY	TIDES	IN ADV	/ANCE IN	WRITING.	GRANT	AWARD	NOTIFI	CATIONS	5 FOR	
GRANTS	THAT	ARE R	ESTRIC	TED TO A	NON-LOBB	YING PU	JRPOSE	ALSO E	ROHIBIT	THE U	JSE
OF GRA	NT FU	NDS TO	ENGAGI	E IN LOBI	BYING ACT	IVITY.	NO GRA	ANT FUN	IDS MAY	BE USE	ED
TO ENG.	AGE I	N PROH	IBITED	CAMPAIG	N INTERVE	NTION.	BASEI	ON A	RISK AS	SESSME	ENT
AND CO	NSIDE	RATION	OF THE	E GRANTE	E'S TAX-E	XEMPT S	STATUS	, NARRA	ATIVE AN	ID	
FINANC	IAL R	EPORTS	DESCR	BING US	E OF GRAN	TS FUNI	OS ARE	REQUIF	RED FOR	CERTAI	IN

GRANTS AFTER THE GRANT AWARD.

Schedule I (Form 990)

232291 04-01-22

SC	HEDULE J	Compensation Information		1	OMB No. 1	1545-00	47
(Fo	rm 990)	- For certain Officers, Directors, Trustees, Key Employees, and H	ighest		20	20)
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV	- (line 22		20	22	-
Dena	tment of the Treasury	Attach to Form 990.	, iiiie 23.		Open to		
Intern	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest inform	nation.		Inspe		
Nam	e of the organization			Employer i			mber
		TIDES CENTER		94-3	21310	0	
Pa		s Regarding Compensation					
	.					Yes	No
1a		ate box(es) if the organization provided any of the following to or for a person listed		990,			
		line 1a. Complete Part III to provide any relevant information regarding these items					
	First-class or c		•				
	Travel for com						
		ation and gross-up payments Health or social club dues or ini					
	Discretionary s	pending account Personal services (such as main	J, Chauffeu	ir, chet)			
h	If any of the bayes	an line to are shoulded, did the experimetion follow a written policy respecting now	ant ar				
b	•	on line 1a are checked, did the organization follow a written policy regarding paym			16		
2		rovision of all of the expenses described above? If "No," complete Part III to expla n require substantiation prior to reimbursing or allowing expenses incurred by all di			<u>1b</u>		
2	0	rs, including the CEO/Executive Director, regarding the items checked on line 1a?	,		2		
	trustees, and onicer	s, including the GEO/Executive Director, regarding the items checked of line Ta?					
3	Indicate which if an	y, of the following the organization used to establish the compensation of the organization of the organization used to establish the compensation used to establish the compensation of the organization used to establish the compensation used to establish the compensation of the organization used to establish the compensation used to establish the compensation of the organization used to establish the compensation	anization's				
•		ctor. Check all that apply. Do not check any boxes for methods used by a related					
		ation of the CEO/Executive Director, but explain in Part III.	organizatio				
	Compensation						
	·	ompensation consultant Compensation survey or study					
	·	ther organizations Approval by the board or comp	ensation c	ommittee			
			encurer e				
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filir	ng				
	organization or a rel	•••	5				
а	•	e payment or change-of-control payment?			4a		X
b	Participate in or rec	eive payment from a supplemental nonqualified retirement plan?					X
с	Participate in or rec	eive payment from an equity-based compensation arrangement?					X
	If "Yes" to any of lin	es 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 o	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any co	mpensatio	n			
	contingent on the re	evenues of:					
а	The organization?				. 5a		X
		ation?					X
		r 5b, describe in Part III.					
6	For persons listed o	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any co	mpensatio	n			
	contingent on the n	et earnings of:					
а	The organization?				<u>6a</u>		X
b	Any related organization	ation?			6b		X
		r 6b, describe in Part III.					
7		n Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed					
		es 5 and 6? If "Yes," describe in Part III			7		X
8	-	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was su	-	e			
		ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part II	JI		8		X
9	If "Yes" on line 8, di	d the organization also follow the rebuttable presumption procedure described in					
	Regulations section		<u></u>				
LHA	For Paperwork Re	eduction Act Notice, see the Instructions for Form 990.		Sched	ule J (Forn	n 990) 2022

232111 10-18-22

94-3213100

Page **2**

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.

		(B) Breakdown of W	-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) JANIECE EVANS-PAGE	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	553,772.	190,900.	1,290.	0.	18,841.	764,803.	0.
(2) HOLDEN LEE	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	425,553.	27,667.	1,344.	15,321.	17,883.	487,768.	0.
(3) SUNEELA JAIN	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	296,875.	56,775.	306.	13,031.	24,712.	391,699.	0.
(4) MARK SMOLINSKI	(i)	368,213.	4,200.	1,980.	13,807.	13,599.	401,799.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	358,412.	0.	450.	9,150.	17,789.	385,801.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) SARAH CALDERON	(i)	299,988.	600.	450.	13,125.	38,424.	352,587.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) KELLY FITZSIMMONS	(i)	311,783.	0.	1,247.	13,150.	28,608.	354,788.	0.
FOUNDER & MNG'G DIR, CHIEF NETWORK &	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) TALIA MILGROM-ELCOTT	(i)	274,861.	19,879.	450.	14,490.	26,270.	335,950.	0.
EXEC. DIR THE STARFISH INSTITUTE	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(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 I, LINE 3

THE ORGANIZATION'S CEO IS COMPENSATED BY TIDES NETWORK, A RELATED

ORGANIZATION AND THE CEO'S LEGAL EMPLOYER. THROUGH A COST SHARING

ARRANGEMENT, TIDES CENTER PAYS TIDES NETWORK AN ALLOCATED PORTION OF

THE CEO'S TOTAL COMPENSATION. TIDES NETWORK UTILIZES THE FOLLOWING

METHODS TO ESTABLISH COMPENSATION FOR THE CEO: INDEPENDENT COMPENSATION

CONSULTANT, COMPENSATION SURVEY OR STUDY, AND REVIEW AND APPROVAL BY

THE EXECUTIVE COMPENSATION SUBCOMMITTEE AND THE BOARD OF DIRECTORS.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection Employer identification number

94-3213100

20

Name of the organization

TIDES CENTER

Pa	t I Types of Property							
		(a) Check if	(b) Number of	(c) Noncash contribution	(d) Method of de	etermining	•	
		applicable	contributions or	amounts reported on Form 990, Part VIII, line 1g	noncash contribu	ution amo	ounts	
1	Art - Works of art							
2	Art - Historical treasures							
2	Art - Fractional interests							
4								
	Books and publications	x		/9 617	COST OR SEL	TITNC	DD	TC
5	Clothing and household goods			<u> </u>	CODI ON DEL	DING	II	.10
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property	x	34	2,683,123.	<u>ЕМ7</u>			
9	Securities - Publicly traded		54	2,005,125.	с MV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory			1.5.000				
20	Drugs and medical supplies	X	1	15,336.	FMV			
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organiz	zation during	g the tax year for c	ontributions				
	for which the organization completed Form 828	83, Part V, D	onee Acknowledg	ement 29				
						Y	'es	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	Jh 28, that it			
	must hold for at least 3 years from the date of	the initial co	ntribution, and whi	ich isn't required to be used	for			
	exempt purposes for the entire holding period?	?				30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	oolicy that re	quires the review o	of any nonstandard contribut	tions?	31	X	
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash				

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

contributions?

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

Schedule M (Form 990) 2022

32a

232141 09-09-22

Х

b If "Yes," describe in Part II.

Schedule M (Form 990) 2022 TIDES CENTER Part II Supplemental Information. Provide

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

SCHEDULE M, PART I, COLUMN (B):

THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS RECEIVED IN

SCHEDULE M, PART I, COLUMN (B).

Schedule M (Form 990) 2022

Page 2

18250125 149058 94-3213100

232142 09-09-22

SCHEDULE O (Form 990)

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.



94-3213100

TIDES CENTER

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SOCIETY'S TOUGHEST PROBLEMS.

FORM 990, PART VI, SECTION A, LINE 2:

AS BOARD MEMBERS OF TIDES NETWORK, MARC DIAZ, MICHAEL FERNANDEZ, REGINA

JACKSON, EDWARD LLOYD, DYLAN ORR, TIM WANG, CHERYL ALSTON, AND ANTOINETTE

KLATZKY HAVE AN EMPLOYMENT RELATIONSHIP WITH JANIECE EVANS-PAGE, SUNEELA

JAIN, HOLDEN LEE, AND JENNIFER LANDIG, WHO WERE EMPLOYEES OF TIDES NETWORK

DURING THE TAX YEAR.

FORM 990, PART VI, SECTION A, LINE 4:

THE TIDES CENTER BOARD OF DIRECTORS ADOPTED NEW BYLAWS ON JULY 20, 2022.

BYLAWS FOR TIDES CENTER HAVE BEEN UPDATED TO REFLECT GOVERNANCE UPDATES.

FORM 990, PART VI, SECTION A, LINE 6:

TIDES CENTER HAS ONE SOLE MEMBER, TIDES NETWORK, A SECTION 501(C)(3)

ORGANIZATION.

FORM 990, PART VI, SECTION A, LINE 7A:

EACH OF THE DIRECTORS OF TIDES CENTER SHALL BE APPOINTED BY THE

ORGANIZATION'S SOLE MEMBER, TIDES NETWORK.

FORM 990, PART VI, SECTION A, LINE 7B:

BYLAWS SECTIONS 4.5 & 6.1

VOTING RIGHTS: THE SOLE MEMBER SHALL HAVE THE SOLE POWER AND AUTHORITY TO

 VOTE
 TO
 DETERMINE
 AND
 APPROVE
 THE
 FOLLOWING:
 (I)
 ANY
 AMENDMENT
 TO
 ARTICLE
 4

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990) 2022

 232211
 10-28-22
 Schedule O (Form 990) 2022

 $18250125 \ 149058 \ 94-3213100$

109 2022.05030 TIDES CENTER

Name of the organization TIDES CENTER	Employer identification number 94-3213100
OF THESE BYLAWS; (II) THE DISSOLUTION OF THIS CORPORATION,	PROVIDED THE
SOLE MEMBER SHALL FIRST SOLICIT THE OPINION OF THE BOARD C	F DIRECTORS OF
THIS CORPORATION; (III) SELECTION OF A CHIEF EXECUTIVE OFF	ICER OF THIS
CORPORATION, AS DESCRIBED IN SECTION 4.6; AND (III) THE NU	MBER OF
AUTHORIZED DIRECTORS AND THE APPOINTMENT OF DIRECTORS. THE	BOARD MAY MAKE
RECOMMENDATIONS TO OR REQUEST ACTION BY THE SOLE MEMBER CO	NCERNING ANY OF
THE FOREGOING MATTERS AT ANY TIME. THE BOARD MAY, BUT IS	NOT REQUIRED TO,
PRESENT ANY MATTERS OTHER THAN THOSE IN THIS SECTION 4.5 A	ND SECTION
6.1(B), AND THOSE REQUIRED BY APPLICABLE LAW, TO THE SOLE	MEMBER FOR
CONSENT.	
POWERS: (A) GENERAL CORPORATE POWERS. SUBJECT TO THE LIMIT	ATIONS SET FORTH
IN THESE BYLAWS, THE BUSINESS AND AFFAIRS OF THIS CORPORAT	ION SHALL BE
MANAGED, AND ALL CORPORATE POWERS SHALL BE EXERCISED BY OF	UNDER THE
DIRECTION OF THE BOARD OF DIRECTORS. (B) LIMITATION ON POW	ERS.
NOTWITHSTANDING THE PROVISIONS OF SECTION 6.L(A), ACTION E	Y THE BOARD OF
DIRECTORS ON THE FOLLOWING MATTERS SHALL BE EFFECTIVE ONLY	WITH THE CONSENT
OF THE BOARD OF DIRECTORS OF THE SOLE MEMBER: (I) ANY CHAN	GE IN THE
FUNDAMENTAL NATURE OR STATED PURPOSES FOR WHICH THE CORPOR	ATION IS
ORGANIZED; (II) THE ADOPTION OF THE STRATEGIC PLANS FOR TH	E CORPORATION;
(III) THE ADOPTION OF THE ANNUAL CAPITAL AND OPERATING BUI	GETS FOR THE
CORPORATION; (IV) MERGER, CONSOLIDATION OR SIMILAR REORGAN	IZATION OF THE
CORPORATE STRUCTURE; (V) DISPOSITION OF ALL OR SUBSTANTIAL	LY ALL OF THE
ASSETS OF THE CORPORATION; (VI) SELECTION OF THE AUDITORS	OF THE
CORPORATION; (VII) REMOVAL OF A DIRECTOR OF THE CORPORATIO	N WITHOUT CAUSE;
(VIII) AMENDMENT, REPEAL OR ADOPTION OF THE ARTICLES OF IN	CORPORATION OR
THESE BYLAWS (PROVIDED THAT, ACTION BY THE BOARD OF DIRECT	ORS OF THIS
CORPORATION IS NOT REQUIRED TO AMEND ARTICLE 4 OF THESE BY	LAWS, WHICH IS IN
THE SOLE DISCRETION OF THE SOLE MEMBER, AS PROVIDED IN SEC	
²³²²¹² 10-28-22 110 50125 149058 94-3213100 2022.05030 TIDES CENTER	Schedule O (Form 990) 20

18250125 149058 94-3213100

^{2022.05030} TIDES CENTER

⁹⁴⁻³²¹³¹

94-3213100

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

THE FORM 990 IS PREPARED BY AN INDEPENDENT TAX ACCOUNTANT IN CONJUNCTION WITH THE ORGANIZATION'S FINANCE AND ACCOUNTING DEPARTMENT. THE TREASURER/CFO AND LEGAL COUNSEL REVIEW A DRAFT OF THE FORM 990; ADJUSTMENTS ARE MADE AS NECESSARY. A COMPLETE COPY OF THE FORM 990 IS THEN PROVIDED TO THE MEMBERS OF THE BOARD OF DIRECTORS PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

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

UNDER THE TERMS OF THE CONFLICT OF INTEREST POLICY, COVERED INDIVIDUALS, INCLUDING OFFICERS AND MEMBERS OF THE BOARD OF DIRECTORS, CENTER ADVISORY BOARDS, AND DESIGNATED STAFF ARE REQUIRED TO SUBMIT CONFLICT OF INTEREST DISCLOSURE STATEMENTS AT THE TIME A PERSON BECOMES A COVERED INDIVIDUAL AND ANNUALLY THEREAFTER. THE POLICY REQUIRES COVERED INDIVIDUALS TO PERIODICALLY UPDATE THE CONFLICT OF INTEREST STATEMENT AS MATERIAL FACTS CHANGE, AS WELL AS MAKE VERBAL AND/OR WRITTEN DISCLOSURES OF POTENTIAL CONFLICTS OF INTEREST AS THEY ARISE. AT ANY TIME THAT A POTENTIAL OR ACTUAL CONFLICT OF INTEREST IS IDENTIFIED, DISCLOSURE MUST BE MADE TO THE BOARD OF DIRECTORS, THE APPROPRIATE COMMITTEE, OR STAFF (DEPENDING ON THE NATURE OF THE POTENTIAL OR ACTUAL CONFLICT). PRIOR TO ACTING ON ANY MATTER WHERE A POTENTIAL OR ACTUAL CONFLICT IS IDENTIFIED WITH RESPECT TO AN OFFICER OR MEMBER OF THE BOARD, THE CONFLICT AND ALL MATERIAL FACTS RELATED TO IT MUST BE FULLY DISCLOSED BY THE COVERED INDIVIDUAL TO THE BOARD PRIOR TO CONSIDERATION OF THE PROPOSED MATTER. IF THE BOARD DETERMINES A CONFLICT OF INTERESTS EXISTS, THE COVERED INDIVIDUAL, IF REQUESTED TO DO SO BY THE CHAIR OF THE BOARD, MAY PROVIDE ADDITIONAL FACTUAL INFORMATION REGARDING THE AFFECTED TRANSACTION, BUT MAY NOT PARTICIPATE IN OR ATTEMPT TO Schedule O (Form 990) 2022 232212 10-28-22 111

18250125 149058 94-3213100

2022.05030 TIDES CENTER

Schedule O (Form 990) 2022	Page 2
Name of the organization	Employer identification number
TIDES CENTER	94-3213100
INFLUENCE DELIBERATION AND VOTING. THE COVERED INDIVIDUAL	MUST BE EXCUSED
FROM THE MEETING PRIOR TO DELIBERATION, AND MAY NOT RETURN	UNTIL
DELIBERATION AND VOTING ON THE MATTER HAVE BEEN CONCLUDED.	THE POLICY
PROVIDES FOR SIMILAR PROCEDURES FOR ADVISORY COMMITTEES TO	ADDRESS MATTERS
THAT ARE DECIDED AT THE ADVISORY COMMITTEE LEVEL. IF QUEST	IONS ARISE WITH
RESPECT TO THE POLICY OR PROCEDURES FOR DISCLOSING A POTEN	TIAL OR ACTUAL
CONFLICT, THE MATTER MAY BE REFERRED TO HUMAN RESOURCES OR	THE LEGAL,
COMPLIANCE AND RISK DEPARTMENT FOR REVIEW AND RESOLUTION C	ONSISTENT WITH
THE POLICY. IN THE EVENT OF A DELAY IN COLLECTION OF DISCL	OSURE STATEMENTS,
THE ORGANIZATION TAKES STEPS TO ADDRESS SO THAT THE FORMS	ARE BROUGHT UP TO
DATE.	

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

THE CEO, OFFICERS, AND KEY EMPLOYEES OF THE ORGANIZATION ARE ALL COMPENSATED BY TIDES NETWORK, A RELATED ORGANIZATION AND SUCH PERSONS' LEGAL EMPLOYER. THROUGH A COST SHARING ARRANGEMENT, TIDES CENTER PAYS TIDES NETWORK AN ALLOCATED PORTION OF SUCH PERSONS' TOTAL COMPENSATION. AS SUCH, FORM 990, PART VI, SECTION B, LINES 15A AND 15B HAVE BEEN MARKED "NO", AS PROVIDED BY THE FORM 990 INSTRUCTIONS. PLEASE REFERENCE THE DISCLOSURE IN SCHEDULE O OF THE TIDES NETWORK FORM 990 FOR A DISCUSSION REGARDING HOW COMPENSATION IS DETERMINED FOR THESE INDIVIDUALS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL,AK,AR,CA,CO,CT,DC,FL,GA,HI,IL,KS,KY,ME,MA,MD,MI,MN,NC,ND,NH,NJ,NM,NY,OH OK,OR,PA,RI,SC,TN,UT,VA,WA,WI,WV

FORM 990, PART VI, SECTION C, LINE 19:

THE FINANCIAL STATEMENTS ARE PROVIDED ON THE ORGANIZATION'S WEBSITE. THE
232212 10-28-22
Schedule O (Form 990) 2022
112

 $18250125 \ 149058 \ 94-3213100$

2022.05030 TIDES CENTER

GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT GENERALLY
PROVIDED.
FORM 990, PART VI, SECTION B, LINE 12B:
ALL WERE REQUIRED TO DISCLOSE; OFFICERS AND DIRECTORS COMPLETED THE
DISCLOSURE STATEMENTS. DUE TO STAFF TURNOVER, KEY EMPLOYEES WERE
INADVERTENTLY OMITTED FROM COMPLETING THE ANNUAL DISCLOSURE STATEMENTS
IN 2022. ALL DIRECTORS, OFFICERS, AND KEY EMPLOYEES HAVE COMPLETED THE
REQUIRED ANNUAL DISCLOSURE FOR 2023.
FORM 990, PART IX, LINE 11G, OTHER FEES:
CONSULTANTS AND CONTRACT SERVICES:
PROGRAM SERVICE EXPENSES 53,055,106.
MANAGEMENT AND GENERAL EXPENSES 0.
FUNDRAISING EXPENSES 496,218.
TOTAL EXPENSES 53,551,324.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 53,551,324.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:
RETURNED CONTRIBUTION 465,404.
AMENDED RETURN:
THIS TAX RETURN IS BEING AMENDED TO CORRECT THE AMOUNTS SHOWN ON PART
VII AND SCHEDULE J FOR ALL COMPENSATED INDIVIDUALS.
232212 10-28-22 Schedule O (Form 990) 2022 113

TIDES CENTER

Name of the organization

Employer identification number

94-3213100

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.

OMB No. 1545-0047

Open to Public Inspection

22

Department of the Treasury Internal Revenue Service

SCHEDULE R (Form 990)

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

Name of the organization

TIDES CENTER

Employer identification number 94-3213100

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
TIDES CENTER SOCIAL PURPOSE REAL ESTATE					
HOLDING, 1012 TORNEY AVE, SAN FRANCISCO, CA					
94129	REAL ESTATE	CALIFORNIA	0.	0.	TIDES CENTER
401 STATE STREET WBU LLC					
55 EXCHANGE PLACE, SUITE 402					
NEW YORK, NY 10005	REAL ESTATE	NEW YORK	650,570.	15,500,120.	TIDES CENTER
	_				
	-				
	4				

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 Part II 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	(f) Direct controlling entity	cont	g) 512(b)(13) trolled tity?
				501(c)(3))		Yes	No
TIDES, INC 57-1138099	DEVELOP/OPERATE FACILITIES						
1012 TORNEY AVENUE	MGMT AND MULTI-TENANT						
SAN FRANCISCO, CA 94129	NONPROFIT CENTERS	CALIFORNIA	501(C)(3)	10	TIDES NETWORK	Х	
TIDES TWO RIVERS FUND - 20-1588459	DEVELOP/OPERATE FACILITIES						
1012 TORNEY AVENUE	MGMT AND MULTI-TENANT						
SAN FRANCISCO, CA 94129	NONPROFIT CENTERS	CALIFORNIA	501(C)(3)	12A, I	TIDES NETWORK	x	
HARDING ROCK FUND - 20-1430532	HOLD AND MANAGE INVESTMENT						
1012 TORNEY AVENUE	ON BEHALF OF TIDES						
SAN FRANCISCO, CA 94129	FOUNDATION	CALIFORNIA	501(C)(3)	12A, I	TIDES FOUNDATION	x	
TIDES FOUNDATION - 51-0198509							
1012 TORNEY AVENUE							
SAN FRANCISCO, CA 94129	GRANTMAKING	CALIFORNIA	501(C)(3)	7	TIDES NETWORK	x	

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

Part II Continuation of Identification of Related Tax-Exempt Organizations

(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) 512(b)(13) rolled zation? No
TIDES NETWORK - 20-3395198						162	NO
1012 TORNEY AVENUE	CHARITABLE GOVERNANCE AND						
SAN FRANCISCO, CA 94129	OPERATIONS	CALIFORNIA	501(C)(3)	12B, II	N/A		х
BEAUCHAMP CHARITIES - 33-0956671				,			
2454 ALTON PARKWAY	GRANTMAKING AND SUPPORT OF						
IRVINE, CA 92606	TIDES FOUNDATION	CALIFORNIA	501(C)(3)	12A, I	TIDES FOUNDATION	x	

Schedule R (Form 990) 2022 TIDES CENTER

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

	interentip dannig tite ta								1		
(a)	(b)	(c)	(d)	(e)	(f)	(g)	()	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	alloca	ortionate tions?		Genera manag partne	or Percentage ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	10
]										
	1										
	1										
											<u> </u>
											+
	1										
	1										
	1										
	1		l								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i Sec 512(k contr ent	(i) ction b)(13) rolled tity?
		country)						Yes	No
									<u> </u>
									<u> </u>
								'	

Schedule R (Form 990) 2022 TIDES CENTER

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

te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Ye	es
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Pa	arts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	1	
Gift, grant, or capital contribution to related organization(s)		5 X	X
Gift, grant, or capital contribution from related organization(s)		; X	X
Loans or loan guarantees to or for related organization(s)		i X	X
Loans or loan guarantees by related organization(s)		, Х	<u> </u>
Dividends from related organization(s)		:	
g Sale of assets to related organization(s)	1g	,	
n Purchase of assets from related organization(s)	1h	1	
Exchange of assets with related organization(s)			
Lease of facilities, equipment, or other assets to related organization(s)			_
Lease of facilities, equipment, or other assets from related organization(s)	1k	X X	X
	11		
n Performance of services or membership or fundraising solicitations by related organization(s)	1m	n X	Χ
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		n X	X
Sharing of paid employees with related organization(s)		5 X	ζ.
Reimbursement paid to related organization(s) for expenses	1p	, X	x
Reimbursement paid by related organization(s) for expenses		1 2	ζ
Other transfer of cash or property to related organization(s)	1r		
Other transfer of cash or property from related organization(s)	1s	;	

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) TIDES NETWORK	С	56,218.	FMV
(2) TIDES FOUNDATION	с	11,283,615.	FMV
(3) TIDES FOUNDATION	В	7,312,405.	FMV
(4) TIDES TWO RIVERS FUND	К	203,224.	FMV
(5) TIDES NETWORK	М	21,252,804.	FMV
(6)			

Schedule R (Form 990) 2022 TIDES CENTER

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predomant income (related, unrelated, excluded from tax under sections 512-514)	(€ Are partnei 501(i org	e) all rs sec. c)(3) s.?	(f) Share of total income	(g) Share of end-of-year assets	(† Dispr tior allocat	n) opor- late tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genera manag partne	(k) I or Percentag ownershi
		country	Sections 512-514)	Yes	No		235013	Yes	No	(FOTH 1065)	Yes I	