Form **990**

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.

2022
Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2022 calendar year, or tax year beginning JUL 1, 2022 and ending Check if applicable: C Name of organization D Employer identification number Address change PUBLIC POLICY INSTITUTE OF CALIFORNIA Name change Doing business as 94-3207299 Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final 500 WASHINGTON STREET (415)291-4400 City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 40,329,931. SAN FRANCISCO, CA 94111 H(a) Is this a group return Applica-F Name and address of principal officer: TANI CANTIL-SAKAUYE for subordinates? _______ Yes X No pending SAME AS C ABOVE H(b) Are all subordinates included? I Tax-exempt status: X 501(c)(3) 501(c) (4947(a)(1) or (insert no.) If "No," attach a list. See instructions WWW.PPIC.ORG J Website: H(c) Group exemption number K Form of organization; X Corporation Trust Association Other L Year of formation: 1994 M State of legal domicile; CA Part I Summary Briefly describe the organization's mission or most significant activities: INFORM AND IMPROVE PUBLIC POLICY Governance IN CALIFORNIA THROUGH INDEPENDENT, OBJECTIVE, NONPARTISAN RESEARCH if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 17 Number of independent voting members of the governing body (Part VI, line 1b) 16 4 Activities & Total number of individuals employed in calendar year 2022 (Part V, line 2a) 97 5 Total number of volunteers (estimate if necessary) 92 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 -576,568. 7a b Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7b **Prior Year Current Year** 7,253,386. Contributions and grants (Part VIII, line 1h) 8.574.979. Program service revenue (Part VIII, line 2g) 9 0. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 26,202,030. 16,264,562. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 59,046. -1,152,173. 34,836,055, Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 22,365,775. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. Benefits paid to or for members (Part IX, column (A), line 4) 0. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 13,472,209. 15,088,632. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 6,542,805. 7,375,810. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 20,015,014. 22,464,442. Revenue less expenses. Subtract line 18 from line 12 14,821,041. -98,667. 5 **Beginning of Current Year End of Year** Total assets (Part X, line 16) 340,951,909. 353,065,421. Total liabilities (Part X, line 26) 21 36,050,413. 36,174,550. Net assets or fund balances. Subtract line 21 from line 20 304,901,496. 316,890,871. 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. Signature of officer Sign MARTIN HOSHINO, CHIEF OPERATING OFFICER Here Type or print name and title Date Print/Type preparer's name Check Preparer s signature MAGA E. KISRIEV Paid 12/20/23 P01008919 HOOD & STRONG LLP Preparer Firm's name 94-1254756 Firm's EIN Use Only 60 SO. MARKET ST. STE 200 Firm's address SAN JOSE, CA 95113 Phone no.408.998.8400 X Yes May the IRS discuss this return with the preparer shown above? See instructions

Form **8868** (Rev. January 2022)

. . .

Department of the Treasury Internal Revenue Service

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

▶ File a separate application for each return.
 ▶ Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

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.

	ts, for which an extension request must be sent to the IRs this form, visit <i>www.irs.gov/e-file-providers/e-file-for-chari</i>		,	etails on t	the electronic						
	natic 6-Month Extension of Time. Only subm										
All corp	prations required to file an income tax return other than Fo	orm 990-T	(including 1120-C filers), partnerships	s, REMIC	s, and trusts						
must us	e Form 7004 to request an extension of time to file incom	e tax retur	ns.								
Type or	Type or Name of exempt organization or other filer, see instructions. Taxpayer identification number (1)										
print]	,									
Elle books	PUBLIC POLICY INSTITUTE OF CALIFORNIA				94-3207299						
File by the due date for filing your return, See	500 WASHINGTON STREET, 600										
instruction	s. City, town or post office, state, and ZIP code. For a for SAN FRANCISCO, CA 94111										
Enter th	e Return Code for the return that this application is for (file	a separat	e application for each return)			0 1					
Applica	tion	Return	Application			Return					
Is For		Code	Is For			Code					
	0 or Form 990-EZ	01	Form 1041-A			08					
	20 (individual)	03	Form 4720 (other than individual)			09					
Form 990-PF Form 990-T (sec. 401(a) or 408(a) trust)			Form 5227 Form 6069		10						
	0-T (trust other than above)	05 06	Form 8870			11 12					
	0-T (corporation)			12							
• If the	organization does not have an office or place of business is for a Group Return, enter the organization's four digit (Group Exe	Fax No. ted States, check this box mption Number (GEN) If the check this box	f this is fo	r the whole group, o						
th	equest an automatic 6-month extension of time until e organization named above. The extension is for the orga calendar year or	anization's	return for: d ending JUN 30, 2023	the exem	npt organization retu	ırn for					
	this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter the	tentative tax, less								
	y nonrefundable credits. See instructions.		undingalable anadite 4	3a	\$	0.					
	this application is for Forms 990-PF, 990-T, 4720, or 6069			OL.		0					
-	timated tax payments made. Include any prior year overp lance due. Subtract line 3b from line 3a. Include your pa			3b	\$	0.					
	ing EFTPS (Electronic Federal Tax Payment System). See			3с		0.					
	: If you are going to make an electronic funds withdrawal				d Form 8879-TE for						
LHA I	For Privacy Act and Paperwork Reduction Act Notice,	see instru	ctions.		Form 8868 (R	ev. 1-2022)					

223841 04-01-22

17,125,306.

(Expenses \$

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

Total program service expenses

Porm 990 (2022) PUBLIC POLICY INST 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		Х
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			.,
6	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	_5		Х
0	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			х
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		
′		_		x
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	_ 7		
O	, ,			х
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	8		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
				x
10	If "Yes," complete Schedule D, Part IV	9		
10		40	x	
11	or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,	10		
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
ű	Part VI	11a	x	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	Ha		
~	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	1 10		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
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	110		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
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	110		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
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		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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	Х	
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? 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			
4.5	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? If "Yes,"			
00	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	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	000	Х

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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			l
	Schedule K. If "No," go to line 25a	24a	-	Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		_
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
4	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
z.ou	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		l x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	234		-
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	250		
	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 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 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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
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		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			,
25-	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		X
Ь		٥٥٦		
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		-
55	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
	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	х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)		P	age J
	Continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		163	140
	filed for the calendar year ending with or within the year covered by this return 2a 9	7		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	х	
b		3b	х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
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
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			X
b	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 to file Form 8282?	1_		
d	LEWY BY TO A STATE OF THE STATE	7c		Х
e	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	-		x
f	District the second sec	7e 7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			Jak
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_		100
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
10-	amounts due or received from them.)	-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yos " onter the amount of tay organization for second during the year.	12a		
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	Note: See the instructions for additional information the organization must report on Schedule O.	100		
b	Enter the amount of reserves the organization is required to maintain by the states in which the		31	
	organization is licensed to issue qualified health plans		19	1.75
С	Enter the amount of reserves on hand		12	EV-7
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
	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?	17		
	If "Yes," complete Form 6069.			
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PUBLIC POLICY INSTITUTE OF CALIFORNIA Form 990 (2022) Part VI | Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 17 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent 16 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Х 5 Did the organization have members or stockholders? 6 X 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? Х 8a **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? .10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done X Did the organization have a written whistleblower policy? X 13 13 Did the organization have a written document retention and destruction policy? 14 X 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a Other officers or key employees of the organization 15b Х If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ___CA 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) available for public inspection. Indicate how you made these available. Check all that apply.

X Own website ___ Another's website X Upon request Other (explain on Schedule O)

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records MARTIN HOSHINO - (415)291-4400

500 WASHINGTON STREET, 600, SAN FRANCISCO, CA 94111

Form 990 (2022)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

 See the instructions for the order in which to list the persons above.

Check this box if neither the organization ne	or any related	orga	niza	tion	con	nper	sate	ed any current officer, d	rector, or trustee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do			ition more	l than o	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	s both	an	compensation	compensation	amount of
	week		Cer an	uau	recto	Trus	lee)	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the
	organizations	trustee or director	l trus		99,	npen		1099-NEC)	1099-NEC)	organization and related
	below	dual t	Institutional trustee		mplo)	st cor	<u></u>	1000 (120)		organizations
9	line)	Individual	Institu	Officer	Key employee	Highest compensated employee	Former			J
(1) MARK BALDASSARE	40.00									
PRESIDENT AND CEO (THRU 12/31/22)		х		х				527,609.	0.	81,853.
(2) ELLEN HANAK	40.00									
VP & DIR, WATER POLICY CTR & SEN. FE					Х	_		346,347.	0.	37,145.
(3) ABIGAIL COOK	40.00									
VP OF COMMS & CHIEF STRATEGY OFFICER				_	Х	_		294,012.	0.	79,289.
(4) CYNTHIA SCHERER	40.00								_	
TREASURER AND CFO (5) HANS P. JOHNSON	40.00			X	_		_	297,957.	0.	74,350.
SENIOR FELLOW	40.00					, .		265 262		71 666
(6) LANDE U. AJOSE	40,00		-	_		Х		265,362.	0.	71,666.
VP, CA'S FUT & SR FL (THRU 10/21/22)	40,00				х			284,766.	0	33,838.
(7) SARAH BOHN	40.00		_			Н	-	201,700.	***	33,030.
VP OF RESEARCH AND SENIOR FELLOW					x			272,186.	0.	43,036.
(8) LYNETTE UBOIS	40.00					П				· · · · · · · · · · · · · · · · · · ·
DIRECTOR OF CONTENT STRATEGY						х		205,264.	0.	65,844.
(9) ERIC M. MCGHEE	40.00									
POLICY DIRECTOR AND SENIOR FELLOW						х		204,452.	0.	57,509.
(10) MAGNUS J. LOFSTROM	40.00									
POLICY DIRECTOR AND SENIOR FELLOW						Х		211,437.	0.	44,928.
(11) CAROLINE DANIELSON	40.00									
POLICY DIRECTOR AND SENIOR DIRECTOR					Х			208,855.	0.	42,397.
(12) DEBORAH GONZALEZ	40.00									
SECRETARY				Х				222,643.	0.	25,462.
(13) ATHENA M BREKKE	40.00									
DIRECTOR OF INFORMATION TECHNOLOGY			_		_	Х	_	207,406.	0.	35,924.
(14) SANDRA RUIZ	40.00									
VP OF PEOPLE AND CULTURE					Х		_	177,106.	0 .	18,470.
(15) OLGA RODRIGUEZ	40,00	P							_	2
DIR PPIC HIGHER ED CENTER & SENIOR F	40.00				Х	_	_	152,848.	0.	16,403.
(16) EMILY LOESCHINGER SECRETARY (THRU 9/12/22)	40.00			x				92 900	0	9 360
(17) TANI CANTIL-SAKAUYE	40.00			Λ	-	\vdash	\vdash	82,800.	0.	8,360.
PRESIDENT AND CEO	40.00	х		х				0.	0.	0.
		4		21	_			0.	0.	- 000

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Page 7

Part VII Section A. Officers, Directors, (A)	(B)			((C)			(D)	(E)	(F)
Name and title	Average hours per week Average hours per week Position (do not check more than one box, unless person is both an officer and a director/trustee)				an	Reportable compensation from	Reportable compensation from related	Estimated amount of other		
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee:	Former .	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) CHET HEWITT	1.00									
BOARD CHAIR		х		х				0.	0.	0.
(19) OPHELIA BASGAL DIRECTOR	1.00	x						0.	0.	0.
(20) LOUISE HENRY BRYSON	1.00									
DIRECTOR		х						0.	0.	0.
(21) SANDRA CELEDON	1.00									
DIRECTOR		х						0.	0.	0.
(22) A. MARISA CHUN DIRECTOR	1.00	x						0.	0.	0.
(23) PHILLIP ISENBERG DIRECTOR	1,00	х						0.	0.	0.
(24) DAVID MAS MASUMOTO DIRECTOR	1.00	х						0.	0.	0.
(25) STEVEN A. MERKSAMER DIRECTOR	1.00	х						0.	0.	0.
(26) STEVEN J. OLSON	1.00									
DIRECTOR		х						0.	0.	0.
1b Subtotal							3,961,050.	0.	736,474.	
c Total from continuation sheets to Pa	rt VII, Section A	*****			*****	*****	20	0.	0.	0.
d Total (add lines 1b and 1c)								3,961,050.	0.	736,474.

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

47

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ABT ASSOCIATES, INC		
10 FAWCETT STREET, CAMBRIDGE, MA 02138	SURVEY	867,415.
IPSOS PUBLIC AFFAIRS LLC		
301 MERRITT 7, NORWALK, CT 06851	SURVEY	377,238.
FREEDMAN CONSULTING LLC, 1300 CONNECTICUT		
AVE NW, SUITE 275, WASHINGTON, DC 20036	CONSULTING SERVICES	230,000.
ALAN J BLAIR PERSONNEL SERVICES INC, 214		
GRANT AVE., #350, SAN FRANCISCO, CA 94108	TEMPORARY STAFFING	216,839.
KORN FERRY (US), 1900 AVENUE OF THE STARS,		
SUITE 2600, LOS ANGELES, CA 90067	RECRUITING SERVICES	203,333.
2 Total number of independent contractors (including but not limited to	to those listed above) who received more than	
\$100,000 of compensation from the organization	11	

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VII Section A. Officers, Directors, True (A)	(B)			((C)			(D)	(E)	(F)
Name and title	Average hours per							Reportable compensation from	Reportable compensation from related	Estimated amount of
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Кеу етрюуее	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
27) LEON E. PANETTA DIRECTOR	1.00	x						0.	0.	
28) GERALD L. PARKSY DIRECTOR	1.00	x						0.	0.	
29) KIM POLESE PIRECTOR	1.00	x						0.	0.	
30) CASSANDRA WALKER PYE	1.00	x						0.	0.	
31) HELEN IRIS TORRES DIRECTOR	1.00	x						0.	0.	
(32) GADDI H. VASQUEZ DIRECTOR	1,00									
TABETON.		Х						0.	0.	

Pa	irt V	VIII Statement of Revenue					
		Check if Schedule O contains a response or n	ote to any line	in this Part VIII			🔲
/.===		· · · · · · · · · · · · · · · · · · ·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1	f All other contributions, gifts, grants, and	1,152,785. 5,100,601. 10,072.	7,253,386.			
		Ви	usiness Code				
Program Service Revenue		b c d e f All other program service revenue					
	-	g Total. Add lines 2a-2f					
	3 4 5	other similar amounts) Income from investment of tax-exempt bond proce	eeds	8,886,408.		136,821.	8,749,587.
	6	(i) Real (ii) a Gross rents 6a 2,926,647. 6b 4,078,885.	ii) Personal				
		c Rental income or (loss) 6c -1,152,238.					
		d Net rental income or (loss) a Gross amount from sales of assets other than inventory 7a 21,263,425.	(ii) Other	-1,152,238.		-713,389.	-438,849.
Revenue		b Less: cost or other basis and sales expenses					
Je V		d Net gain or (loss)		7,378,154.			7,378,154.
Other F	8	a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a					
		b Less: direct expenses 8b					
		c Net income or (loss) from fundraising events					
		a Gross income from gaming activities. See Part IV, line 19					
		b Less: direct expenses 9b c Net income or (loss) from gaming activities					
	10	a Gross sales of inventory, less returns and allowances 10a					
		b Less: cost of goods sold 10b					
Miscellaneous			usiness Code	65.	65.		
neo	'	b		03,			
ella		c					
Aisc		d All other revenue					
_	0	e Total. Add lines 11a-11d		65.			
				22,365,775.	65.	-576 568.	15 688 892.

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PUBLIC POLICY INSTITUTE OF CALIFORNIA Form 990 (2022) 94-3207299 Page 10 Part IX | Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b. Total expenses Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 3,622,982. 2,514,481. 1,108,501. Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 8,820,015. 7 6,544,310. 1,880,951, 394,754. Pension plan accruals and contributions (include 826,654 613,442. 175,405 section 401(k) and 403(b) employer contributions) 37,807. Other employee benefits 1,010,526 930,499 59,009 21,018. 9 808,455. 600,098. 10 Payroll taxes 180,255. 28,102. Fees for services (nonemployees): Management 48,206. 24,276. 23,930. Legal 135,697. 66. 135,631. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees _____ 1,511,818. 1,334,784. 127,598, 49,436. Other. (If line 11g amount exceeds 10% of line 25, 1,891,112 1,468,260, 372,369 column (A), amount, list line 11g expenses on Sch O.) 50,483. Advertising and promotion 12 35,272. 237,051. 188,955. 12,824. 13 Office expenses Information technology 355,810. 278,228. 67,277. 10,305. 14

1,272,595.

266,213.

76,538.

184,204

137,904.

809,346.

219,257.

26,672.

16,909.

186,478

22,464,442,

1,006,007.

182,847.

70,310.

149,205.

111,702.

809,346.

216,186.

13,337

16,250.

52,717.

17,125,306,

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46.952.

4,563.

1,141.

5,526.

4,137.

475.

104.

5,763.

673,390.

15

16

17

18

19 20

21

22

23

24

h

е

25

Insurance

SURVEYS

DATA/LIBRARY

FACILITY RENTAL

All other expenses

PRINTING/PUBLICATIONS

Check here

Royalties

Occupancy

Travel Payments of travel or entertainment expenses

for any federal, state, or local public officials ...

Conferences, conventions, and meetings

Depreciation, depletion, and amortization

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 0.)

Total functional expenses. Add lines 1 through 24e

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

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

Interest
Payments to affiliates

219,636.

78,803.

5,087.

29,473.

22,065.

2,596

555,

13,335

127,998

4,665,746.

Form 990 (2022)
Part X Balance Sheet

					(A) Beginning of year		(B) End of year
Π.	1	Cash - non-interest-bearing			1,129,090.	1	742,394
2	2	Savings and temporary cash investments			39,861.	2	3,196,405
3		Pledges and grants receivable, net			1,669,277.	3	3,186,029
4	4	Accounts receivable, net	500		1,015,215.	4	246,829
		Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa					
		controlled entity or family member of any of thes	e persons		151.	5	238
6	6	Loans and other receivables from other disqualif	ied persor	ns (as defined			
		under section 4958(f)(1)), and persons described	in section	1 4958(c)(3)(B)		6	
7 يو	7	Notes and loans receivable, net				7	
Assets		Inventories for sale or use				8	
ع کة	9	Prepaid expenses and deferred charges			1,291,671.	9	1,107,694
10	0a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		55,376,766.			
		Less: accumulated depreciation		34,477,618.	21,583,384.	10c	20,899,148
11		Investments - publicly traded securities			254,640,187.	11	268,362,206
12		Investments - other securities. See Part IV, line 1			59,070,410.	12	54,765,445
13	3	Investments - program-related. See Part IV, line 1	1			13	
14		Intangible assets				14	
15		Other assets. See Part IV, line 11			512,663.	15	559,033
16		Total assets. Add lines 1 through 15 (must equa			340,951,909.	16	353,065,421
17	7	Accounts payable and accrued expenses			2,935,334.	17	2,996,961
18		Grants payable				18	
19		Deferred revenue				19	
20	0	Tax-exempt bond liabilities			12,705,000.	20	12,705,000
21	1	Escrow or custodial account liability. Complete F	Part IV of S	Schedule D		21	
ဖ္မ 22		Loans and other payables to any current or form					
Ě		trustee, key employee, creator or founder, substa					
Liabilities		controlled entity or family member of any of thes	•	Service (1000)		22	
J 23		Secured mortgages and notes payable to unrela-			19,897,415.	23	19,913,557
24		Unsecured notes and loans payable to unrelated				24	
25		Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24). Co	omplete Part X			
		of Schedule D		······	512,664.		559,032
26		Total liabilities. Add lines 17 through 25			36,050,413.	26	36,174,550
u l		Organizations that follow FASB ASC 958, chec	ck here	X			
일		and complete lines 27, 28, 32, and 33.		l.	000 022 740		200 505 046
27					288,233,712.	27	300,606,816
28		Net assets with donor restrictions			16,667,784.	28	16,284,055
Š		Organizations that do not follow FASB ASC 95	8, check	here			
5		and complete lines 29 through 33.					
29		Capital stock or trust principal, or current funds				29	
30		Paid-in or capital surplus, or land, building, or eq				30	
27 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20		Retained earnings, endowment, accumulated inc			304 001 406	31	316 900 971
	_	Total liebilities and not assets found belonges			304,901,496.	32	316,890,871
33	3	Total liabilities and net assets/fund balances			340,951,909.	33	353,065,421, Form 990 (2022

	n 990 (2022) PUBLIC POLICY INSTITUTE OF CALIFORNIA	94-32072	99	Pa	ge 12		
Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	22	365,	775.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	22	464,	442.		
3	Revenue less expenses. Subtract line 2 from line 1	3		-98,	667.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	304	901,	496.		
5	Net unrealized gains (losses) on investments	5	12	088,	042.		
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B)) 10						
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII	***************************************					
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,					
	consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b				

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

2022

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

PUBLIC POLICY INSTITUTE OF CALIFORNIA 94-3207299 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Light Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) is the organization listed in your governing document? (i) Name of supported (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

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.)

Se	ction A. Public Support	<u></u>		·			
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	1					
	membership fees received. (Do not						
	include any "unusual grants.")	14,270,152.	3,614,989.	4,418,472.	8,574,979.	7,253,386.	38,131,978.
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	14,270,152.	3,614,989.	4,418,472.	8,574,979.	7,253,386.	38,131,978.
5	The portion of total contributions						
	by each person (other than a	16.5 (- 1)					
	governmental unit or publicly		1 Y 1 - 2	100			
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						12,109,413.
6	Public support. Subtract line 5 from line 4.						26,022,565.
	ction B. Total Support						
_	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	14,270,152.	3,614,989.	4,418,472.	8,574,979.	7,253,386.	38,131,978.
8	Gross income from interest,			, , ,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
•	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	12,084,164.	10,007,209.	4,845,919.	10,678,460.	8,749,587.	46,365,339.
9	Net income from unrelated business			-,,,-	20,0.0,200	0,125,007.	10,000,000
Ū	activities, whether or not the						
	business is regularly carried on	0.	0.	0.	0.	0.	
10	Other income. Do not include gain	-		•			
10	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						84,497,317.
	Gross receipts from related activities,	oto (con instructio	1.00			12	556.
	First 5 years. If the Form 990 is for th	•	***************************************	with or fifth town	nas an a poetion F		330.
10	organization, check this box and stop	8.5 e 5 8.5 8.5 8.5 7		-			
Sec	tion C. Computation of Publi		centage		***************************************		
-	Public support percentage for 2022 (li			olumn (fl)		14	30.80 %
	Public support percentage from 2021					15	25 22
	33 1/3% support test - 2022. If the c						7.0
	stop here. The organization qualifies						
h	33 1/3% support test - 2021. If the o	organization did no	t check a box on lir	ne 13 or 16a and l	lino 15 is 33 1/20/	or more, chook this	hov
_	and stop here. The organization quali						
172	10% -facts-and-circumstances test						
174							
	and if the organization meets the facts				!		
L	meets the facts-and-circumstances test 10% -facts-and-circumstances test	_				70. and line 15 is 1	
J							U70 UI
	more, and if the organization meets the				•		
12	organization meets the facts-and-circu						
10	Private foundation. If the organization	IT GIG TIOL CHECK & L	JOX OIT III IO 13, 10a,	, 100, 17a, 01 17b,	GIECK THIS DOX AF		
						Scriedule A (Form 990) 2022

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

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

Section A. Public Support	now, please com	piete Part II.)				
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	,,,,	,0,000	χο, ====	19/2021	(6) 2022	(i) Total
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
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						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						10
14 First 5 years. If the Form 990 is for the	organization's fi	irst, second, third, t	ourth, or fifth tax	year as a section 5	01(c)(3) organizati	on,
check this box and stop here						
Section C. Computation of Public	Support Per	rcentage				
15 Public support percentage for 2022 (lin		-	olumn (f))		15	%
16 Public support percentage from 2021			×		16	%
Section D. Computation of Invest					T I	
17 Investment income percentage for 202					17	%
18 Investment income percentage from 2					18	%
19a 33 1/3% support tests - 2022. If the c						
more than 33 1/3%, check this box and						
		TOLUCION & DOX OF	mile 14 Of liftle 19a	. and the total mo	ue mant കെ 1/3%o. 8	nici
b 33 1/3% support tests - 2021. If the cline 18 is not more than 33 1/3%, chec						

232023 12-09-22

Schedule A (Form 990) 2022

94-3207299

(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.)

Yes No 1 2 За 3b Зс 4a 4b 4c 5а 5b 5c 6 7 8 9a 9b 9c 10a 10b

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Schedule A (Form 990) 2022

Pa	rt IV Supporting Organizations (continued)			
			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		
	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			
Sec	detail in Part VI. tion B. Type I Supporting Organizations	11c		
	J. J		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		res	NO
•	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? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove 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		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
-	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
		_	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	_1_		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
_	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described 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		1 -	
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
1				-
' a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below.	<i>)</i> -		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	notruotion	01	
2	Activities Test. Answer lines 2a and 2b below.	isuucuori	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		103	140
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

PUBLIC POLICY INSTITUTE OF CALIFORNIA Schedule A (Form 990) 2022 94-3207299 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 Recoveries of prior-year distributions 2 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 Other expenses (see instructions) 7 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior 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): Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by 0.035. 6 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8

1

2

3

4

5

Schedule A (Form 990) 2022

Current Year

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Section C - Distributable Amount

Enter greater of line 2 or line 3.

instructions).

Income tax imposed in prior year

Enter 0.85 of line 1.

3

4

Adjusted net income for prior year (from Section A, line 8, column A)

Minimum asset amount for prior year (from Section B, line 8, column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

Pa	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (contin	ued)	rage /
Sect	ion D - Distributions		111111111111111111111111111111111111111		Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	SCHINGSHE MOTAL
2	Amounts paid to perform activity that directly furthers exemple	pt purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpos	li .	3		
4	Amounts paid to acquire exempt-use assets		4		
_5	Qualified set-aside amounts (prior IRS approval required - pr		5		
6	Other distributions (describe in Part VI). See instructions.	VI NASA-18-10-0-10-0-10-0-10-0-10-0-10-0-10-0-		6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	he organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2022	ns	(iii) Distributable 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				
a	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				
ь	Applied to 2022 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. 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:				
а	Excess from 2018				
b	Excess from 2019				
_с	Excess from 2020				
d	Excess from 2021				
-	Evenes from 2022				

Schedule A (Form 990) 2022

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

PUBLIC POLICY INSTITUTE OF CALIFORNIA

Employer identification number 94-3207299

Pa	rt I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		or Accounts. Complete if the
27		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in wri	iting that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's ex	clusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor adv		
	for charitable purposes and not for the benefit of the donor or o		
	impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·	
Pa	rt II Conservation Easements. Complete if the organ	nization answered "Yes" on Form 990, I	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recreation		a historically important land area
	Protection of natural habitat	r	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	d conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	T-1-1		
С	Number of conservation easements on a certified historic struct		
d	Number of conservation easements included in (c) acquired after		
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, relea	sed, extinguished, or terminated by the	organization during the tax
	year	area, examigation ed, or committee by the	organization during the tax
4	Number of states where property subject to conservation easer	ment is located	
5	Does the organization have a written policy regarding the period	***************************************	
	violations, and enforcement of the conservation easements it has		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, ha	***************************************	
		3	and your
7	Amount of expenses incurred in monitoring, inspecting, handlin	ng of violations, and enforcing conservat	tion easements during the year
	<u> </u>	, ,	a coming and year
8	Does each conservation easement reported on line 2(d) above s	satisfy the requirements of section 170(n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	easements in its revenue and expense	statement and
	balance sheet, and include, if applicable, the text of the footnot		
	organization's accounting for conservation easements.		
Pa	rt III Organizations Maintaining Collections of A	Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" on Form 99	90, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958,	not to report in its revenue statement a	nd balance sheet works
	of art, historical treasures, or other similar assets held for public		
	service, provide in Part XIII the text of the footnote to its financia		
b	If the organization elected, as permitted under FASB ASC 958,		
	art, historical treasures, or other similar assets held for public ex		
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1	\$5,500 (\$500) See 1907 (\$100 (\$	\$
2	If the organization received or held works of art, historical treasu		
	the following amounts required to be reported under FASB ASC		ā, E. e. 1770
а	Revenue included on Form 990, Part VIII, line 1	•	s\$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions for		Schedule D (Form 990) 2022

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022

180,542.

20,899,148.

e Other

2,198,313.

d Equipment

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

2,017,771.

Part VII	Investments -	Other	Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
1) Financial derivatives		
2) Closely held equity interests		
3) Other		
(A) 2008 ADAMS ST. DIRECT	264,875.	END-OF-YEAR MARKET VALUE
(B) 2008 ADAMS ST. US	1,067,010.	END-OF-YEAR MARKET VALUE
(C) 2008 ADAMS ST. NON US	1,120,842.	END-OF-YEAR MARKET VALUE
(D) 2006 ADAMS ST. DIRECT	136,688.	END-OF-YEAR MARKET VALUE
(E) 2006 ADAMS ST. US	394,145.	END-OF-YEAR MARKET VALUE
(F) 2006 ADAMS ST. NON US	151,103.	END-OF-YEAR MARKET VALUE
(G) 2011 ADAMS ST. DIRECT	336,677.	END-OF-YEAR MARKET VALUE
(H) 2011 ADAMS ST. US	2,338,385.	END-OF-YEAR MARKET VALUE
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	54,765,445.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
PI (0.4 - A) - 15 - 000 P 1 V 1 (0.5 45)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	457(B) PLAN LIABILITY	559,032.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	559,032.

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

Complete if the organization answered "Yes" on Form 990, Part IV, li 1 Total revenue, gains, and other support per audited financial statements				34,094,237
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			1	34,034,237
	1 0. 1	12,088,042.		
a Net unrealized gains (losses) on investments b Donated services and use of facilities		12,000,042.	1	
			-	
c Recoveries of prior year grants				
d Other (Describe in Part XIII.)				10 000 040
e Add lines 2a through 2d			2e	12,088,042
3 Subtract line 2e from line 1			3	22,006,195
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 - 1	1 511 010		
a Investment expenses not included on Form 990, Part VIII, line 7b		1,511,818.	-	
b Other (Describe in Part XIII.)		-1,152,238.		250 500
c Add lines 4a and 4b			4c	359,580
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) otomonto With	Evnancas nas f	5	22,365,775
Part XII Reconciliation of Expenses per Audited Financial St		Expenses per i	teturn.	
Complete if the organization answered "Yes" on Form 990, Part IV, Ii				
Total expenses and losses per audited financial statements			1	22,104,862
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	i i			
a Donated services and use of facilities				
b Prior year adjustments				
c Other losses				
d Other (Describe in Part XIII.)	2d	1,152,238.		
e Add lines 2a through 2d			2e	1,152,238
3 Subtract line 2e from line 1			3	20,952,624
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	74 W			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,511,818.		
b Other (Describe in Part XIII.)	4b			
c Add lines 4a and 4b			4c	1,511,818
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	22,464,442
PART X, LINE 2: PPIC IS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF REVENUE CODE AND THE CALIFORNIA TAX CODE. ACCORDINGLY, THE O PPIC ARE CURRENTLY CONSIDERED EXEMPT FROM FEDERAL AND STATE	PERATIONS OF			
EXCISE TAXES.				
PART XI, LINE 4B - OTHER ADJUSTMENTS:				
TAKE AL, BIKE 4D CHIEK ADOUGHERID:				
BUILDING FINANCING COSTS RECLASSIFIED TO REVENUE	-1,436,927	•		
NET INCOME FROM BUILDING OPERATIONS RECLASSIFIED TO REVENUE	284,689	-		
TOTAL TO SCHEDULE D, PART XI, LINE 4B	-1,152,238	•		
PART XII, LINE 2D - OTHER ADJUSTMENTS:				
232054 09-01-22			Schedule	e D (Form 990) 202

Schedule D (Form 990) PUBLIC POLICY INSTI-

Part VII Investments - Other Securities. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
2011 ADAMS ST. NON US DEV MKT	1,127,184.	FMV
2011 ADAMS ST. EMERGING MARKETS	679,660.	FMV
2017 ADAMS ST. GLOBAL	10,523,528.	FMV
UBS TRUMBULL	7,058,675.	FMV
PRUDENTIAL REAL ESTATE	21,224,870.	FMV
IARBOURVEST	8,341,803.	FMV

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

						-	
-	LIC POLICY INSTITUT					94-3207299	
Pa			ctivities Out	side the United States. Comple	te if the organ	ization answered "	Yes" on
	Form 990, Part I						
1				ds to substantiate the amount of its gran the selection criteria used to award the			Yes No
2	For grantmakers. Desc United States.	cribe in Part V the	organization's	procedures for monitoring the use of its	grants and ot	her assistance outs	ide the
3				n be duplicated if additional space is ne			
·	(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 region	(f) Total expenditures for and investments in the region
	FRAL AMERICA AND CARIBBEAN	0	0	INVESTMENTS			8,341,803.
p .							
			•				
-							
3 a	Subtotal	0	0				8,341,803.
b	Total from continuation sheets to Part I	0	0				0.
	Totals (add lines 3a and 3b) For Paperwork Reduct	ion Act Notice	0 see the Instruc	ions for Form 990		Cabadula F	8,341,803. (Form 990) 2022
"			JOO WITE III JU UC			ocheque Fil	1 01111 990) 2022

Schedule F (Form 990) 2022

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

(i) Method of valuation (book, FMV appraisal, other)					
(h) Description of noncash assistance					
(g) Amount of noncash assistance					
(f) Manner of cash disbursement					ecognized as a tax
(e) Amount of cash grant					oreign country, r
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax
(c) Region					s listed above that are re
(b) IRS code section and EIN (if applicable)					ecipient organization
1 (a) Name of organization					2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2022

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Page 3

94-3207299

(h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement (c) Number of (d) Amount of recipients cash grant Part III can be duplicated if additional space is needed. (b) Region (a) Type of grant or assistance

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

Schedule F (Form 990) 2022

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.

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

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OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

PUBLIC POLICY INSTITUTE OF CALIFORNIA

Employer identification number 94-3207299

P	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence	1 8		
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			14.5
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
a		4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	177		
	contingent on the revenues of:			
а	The organization?	5a		х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		х
b	Any related organization?	6b		х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2022

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

PUBLIC POLICY INSTITUTE OF CALIFORNIA

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) Brea	kdown of W-2	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title	dwoo	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MARK BALDASSARE	(3)	527,609.	0	.0	35,350.	46,503.	609,462.	0
PRESIDENT AND CEO (THRU 12/31/22)	(II)	• 0	0.	0	0	0	0	0
(2) ELLEN HANAK	(i)	346,347.	.0	0.	35,350.	1,795.	383,492.	0
VP & DIR, WATER POLICY CTR & SEN. FE (II)	(iii	• 0	0	0	0	.0	0	0
(3) ABIGAIL COOK	(i)	294,012.	0	0	34,450.	44,839.	373,301.	0
VP OF COMMS & CHIEF STRATEGY OFFICER (ii)		0	0	0	0	.0	0	0
(4) CYNTHIA SCHERER	()	297,957.	0.	.0	34,676.	39,674.	372,307.	0
TREASURER AND CFO	(II)	0.	0	0	0	0	0	0
(5) HANS P. JOHNSON	(i)	265,362.	0	0	30,001.	41,665.	337,028.	0
SENIOR FELLOW	(II)	.0	0	0	0	0.	0	0
LANDE U. AJOSE		284,766.	0	.0	32,461.	1,377.	318,604.	.0
VP, CA'S FUT & SR FL (THRU 10/21/22) (ii)	ii)	0.	0.	* 0	0	• 0	0	0
(7) SARAH BOHN	(i)	272,186.	0	0	30,865.	12,171.	315,222.	0
VP OF RESEARCH AND SENIOR FELLOW	(ii)	.0	0.	0.	*0	.0	0	•0
(8) LYNETTE UBOIS	(1)	205,264.	0.	*0	22,193.	43,651.	271,108.	.0
DIRECTOR OF CONTENT STRATEGY	(11)	0.	0.	0.	• 0	•0	*0	•0
(9) ERIC M. MCGHEE	(i)	204,452.	0.	.0	21,804.	35,705.	261,961.	.0
POLICY DIRECTOR AND SENIOR FELLOW	(ii)	0.	0.	0.	0	0.	*0	.0
(10) MAGNUS J. LOFSTROM	()	211,437.	0.	0.	22,675.	22,253.	256,365.	0.
POLICY DIRECTOR AND SENIOR FELLOW	(ii)	0.	0.	0.	0.	.0	• 0	0
(11) CAROLINE DANIELSON	(1)	208,855.	0.	0.	22,722.	19,675.	251,252.	.0
POLICY DIRECTOR AND SENIOR DIRECTOR ((ii)	.0	0.	0.	.0	.0	*0	•0
(12) DEBORAH GONZALEZ	(E)	222,643.	0.	0	23,576.	1,886.	248,105.	• 0
SECRETARY	(ii)	0 •	*0	*0	0	0	*0	• 0
(13) ATHENA M BREKKE	(i)	207,406.	0.	0.	21,804.	14,120.	243,330.	0.
DIRECTOR OF INFORMATION TECHNOLOGY	(II)	0.	0.	0.	0.	.0	*0	*0
(14) SANDRA RUIZ	(i)	177,106.	0.	*0	17,369.	1,101.	195,576.	• 0
VP OF PEOPLE AND CULTURE	(E)	0	0.	0.	0.	0.	0.	*0
(15) OLGA RODRIGUEZ	(E)	152,848.	0.	.0	14,695.	1,708.	169,251.	*0
DIR PPIC HIGHER ED CENTER & SENIOR F	(11)	0	0.	0	0	.0	0	0
	<u> </u>							
	(ii)							
							O-1-O	0000 000

SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open To Public Inspection

Name of the organization

Employer identification number

	P	UBLIC POLICY	INSTITUTE C	F CAI	LIFORI	NIA				7299	moati	on nu	iiibei
Part I	Excess Bene	efit Transact	ions (section 5	01(c)(3), secti	ion 501(c)(4), and sec	ction 501(c)(29) orga	nizatio	ns on	ly).			
	Complete if the o					art IV, line 25a or 25b	, or Form 990-EZ, Pa	art V, li	ne 40	b.			
1 (a) Name	e of disqualified p	person (b)	(b) Relationship between disqualified				elationship between disqualified		n		(d)	Corre	cted?
(4)	o o aloqualitou p	7676611	person and o	rganıza	ation	,,,	, becomplied of transaction			Y	es	No	
												-	
											+	-	
											7		
2 Enter th	e amount of tax i	ncurred by the	organization man	agers	or disa	ualified persons duri	ng the year under					-	
section	1050		-	_			,		\$				
3 Enter th	e amount of tax,					et cocces mini e							
						775400,00009801							
Part II	Loans to and	/or From In	terested Pers	sons.									
						Part V, line 38a or F	orm 990, Part IV, line	e 26; c	r if th	e orga	nizatio	n	
	reported an amo									(h) Ani	around		
	Name of ted person	(b) Relationship with organization		of loan from	n the	(e) Original principal amount	(f) Balance due		(g) In by board default?		oard or ""		
	iou porcon	With Organization	or loan		zation?	principaramount		LOI		comm			_
BIGAIL CO	OOK	KEY EMPL	COMPUTER	То	From	2,021.	238.	Yes	No X	Yes	No X	Yes	No
			DOIN GIEN	+	- A	2,021.	250.				Λ		_
			1										
2 - 60Vpc													
Part III	Grants or As	eistanee Re	nofiting Inter	octor	1 Dor	\$	238.						
	Complete if the o												
	ne of interested p						(a) Tura			7-1	D		
(a) Nai	ne or interested p	Derson	(b) Relationship interested pers			(c) Amount of assistance	(d) Type assistan) Purp assista	ose of ance	
			the organiza										
									_				
									_				
									_				

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

Schedule L (Form 990) 2022

SEE PART V FOR CONTINUATIONS

(a) Name of interested person	(h) Relationship between interested 1	(c) Amount of	(d) Description of	(e) Sha	ring
	(b) Relationship between interested person and the organization	transaction	transaction	(e) Sha organiz rever	ation
				Yes	N
					_
					_
rt V Supplemental Information.					
Provide additional information for resp	oonses to questions on Schedule L (see in	nstructions).			
EDULE L, PART II, LOANS TO AND FROM	M INTERESTED PERSONS:				
NAME OF DEDGOV ADJUST COOK					
NAME OF PERSON: ABIGAIL COOK					
RELATIONSHIP WITH ORGANIZATION: K	ZV EMDIOVEE				
REDATIONSHIP WITH ORGANIZATION: KI	CI EMPLOISE				_
PURPOSE OF LOAN: COMPUTER LOAN					
TORTOGE OF HOAN; COMPOTER HOAN					
E.					
t-					
41					
t e					

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.

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

PUBLIC POLICY INSTITUTE OF CALIFORNIA 94-3207299 FORM 990 PART I LINE 1: THE PUBLIC POLICY INSTITUTE OF CALIFORNIA (PPIC) IS DEDICATED TO INFORMING AND IMPROVING PUBLIC POLICY IN CALIFORNIA THROUGH INDEPENDENT, OBJECTIVE, NONPARTISAN RESEARCH. FORM 990, PART III, LINE 1: PPIC IS A NONPROFIT, NONPARTISAN THINK TANK DEDICATED TO INFORMING AND IMPROVING PUBLIC POLICY IN CALIFORNIA THROUGH RIGOROUS. INDEPENDENT OBJECTIVE RESEARCH, PPIC IS COMMITTED TO PROVIDING DATA-DRIVEN INFORMATION THAT ENCOURAGES PRODUCTIVE DIALOGUE AND INSPIRES SUSTAINABLE POLICY SOLUTIONS IN SACRAMENTO AND AROUND THE STATE. PPIC'S CENTRAL AUDIENCES ARE CALIFORNIA'S ELECTED OFFICIALS AND POLICYMAKERS AT THE LOCAL, STATE, AND FEDERAL LEVELS. PPIC ALSO INFORMS KEY POLICY INFLUENCERS-FROM TRADITIONAL AND SOCIAL MEDIA TO LEADERS IN THE BUSINESS AND NONPROFIT COMMUNITIES. PPIC DOES NOT TAKE OR SUPPORT POSITIONS ON ANY BALLOT MEASURES OR ON ANY LOCAL, STATE, OR FEDERAL LEGISLATION, NOR DOES IT ENDORSE, SUPPORT, OR OPPOSE ANY POLITICAL PARTIES OR CANDIDATES FOR PUBLIC OFFICE. FORM 990, PART III, LINE 4A: PPIC IS COMMITTED TO PROVIDING ESSENTIAL INFORMATION AND FRAMING POLICY DEBATES TO SHAPE A BETTER FUTURE FOR CALIFORNIA. WE IDENTIFY PRACTICAL FORWARD-LOOKING APPROACHES TO CALIFORNIA'S MOST PRESSING CHALLENGES. OUR PUBLICATIONS RANGE FROM ONE-PAGE FACT SHEETS TO COMPREHENSIVE IN-DEPTH REPORTS; ALL PUBLICATIONS ARE AVAILABLE ON PPIC'S WEBSITE -PPIC.ORG - FREE OF CHARGE. ON AVERAGE, PPIC PRODUCES 65 PUBLICATIONS LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2022 232211 10-28-22

Name of the organization PUBLIC POLICY INSTITUTE OF CALIFORNIA	Employer identification number 94-3207299
PER YEAR. THE PPIC BLOG OFFERS TIMELY COMMENTARY AND ANALYSIS. OUR BLOG	
PRODUCES CLOSE TO 200 POSTS, WHICH ARE WIDELY DISTRIBUTED THROUGH OUR	
EMAIL MARKETING AND SOCIAL MEDIA CHANNELS. WE REGULARLY BRING LEADERS	
AND STAKEHOLDERS TOGETHER AT PUBLIC EVENTS TO INSPIRE NEW THINKING AND	
FIND INNOVATIVE ANSWERS TO CRITICAL POLICY QUESTIONS. WE HOST	
APPROXIMATELY 30 HIGH-PROFILE EVENTS - BOTH IN-PERSON AND MORE	
RECENTLY, ONLINE - WITH HUNDREDS OF PARTICIPANTS AT EACH CONVENING, WE	
ARE ROUTINELY CITED IN NATIONAL AND STATE MEDIA ARTICLES, AVERAGING	
14,500 PER YEAR. MORE THAN 2.2 MILLION PAGES ARE VIEWED ON OUR	
WEBSITE, PPIC.ORG. WE POST APPROXIMATELY 3,400 TIMES ON OUR SOCIAL MEDIA	
CHANNELS, RESULTING IN APPROXIMATELY 2,600,000 IMPRESSIONS. OUR	
RESEARCHERS TESTIFY REGULARLY AT LEGISLATIVE HEARINGS, ON AVERAGE, AND	
PPIC RESEARCH IS CITED THE TEXT OF MORE THAN 100 BILLS OR BILL ANALYSES	
PER TWO-YEAR LEGISLATIVE CYCLE.	
PPIC'S WORK IS DEFINED BY THREE STRATEGIC PRIORITIES:	
IMPROVING OPPORTUNITY FOR CALIFORNIANS - WE ENCOURAGE THE DEVELOPMENT	
OF POLICIES THAT IMPROVE THE WELL-BEING OF ALL CALIFORNIANS. AREAS OF	
FOCUS INCLUDE EDUCATION, THE SAFETY NET, CRIMINAL JUSTICE, AND WATER,	
LAND, AND AIR.	
UNDERSTANDING CALIFORNIA'S FUTURE - WE ANALYZE KEY DEMOGRAPHIC,	
ECONOMIC, ENVIRONMENTAL, AND POLITICAL TRENDS TO ANTICIPATE MAJOR	
CHALLENGES AND IDENTIFY PRACTICAL POLICY SOLUTIONS.	
INFORMING CIVIC LIFE - OUR STATEWIDE SURVEY PROVIDES A VOICE FOR	
CALIFORNIANS ON CRITICAL ISSUES AND OUR PUBLIC EVENTS AND ENGAGEMENT	
WITH NEW AND EMERGING LEADERS ACROSS THE STATE PROMOTE CONSTRUCTIVE	
DIALOGUE TO HELP REALIZE CALIFORNIA'S POTENTIAL.	

Name of the organization PUBLIC POLICY INSTITUTE OF CALIFORNIA	Employer identification number 94-3207299
IN ADDITION, PPIC HOUSES THREE POLICY CENTERS. THE PPIC HIGHER	
EDUCATION CENTER ADVANCES PRACTICAL SOLUTIONS THAT ENHANCE EDUCATIONAL	
OPPORTUNITIES FOR ALL OF CALIFORNIA'S STUDENTS - IMPROVING LIVES AND	
EXPANDING ECONOMIC GROWTH ACROSS THE STATE, THE PPIC STATEWIDE SURVEY	
PROVIDES A VOICE FOR THE PUBLIC AND LIKELY VOTERS ON CALIFORNIA'S KEY	
POLICY ISSUES. AND THE PPIC WATER POLICY CENTER SPURS INNOVATIVE WATER	
MANAGEMENT SOLUTIONS THAT SUPPORT A HEALTHY ECONOMY, ENVIRONMENT, AND	
SOCIETY.	
OUR EXTENSIVE OUTREACH ACTIVITIES BRING PPIC'S WORK TO AN	
EVER-EXPANDING AUDIENCE IN SACRAMENTO AND BEYOND. OUR EVENTS FEATURE	
VIEWPOINTS ACROSS THE POLITICAL SPECTRUM, PROMOTING CONSTRUCTIVE,	
THOUGHTFUL, AND RESPECTFUL DIALOGUE ON THE ISSUES THAT MATTER MOST TO	
CALIFORNIA. THROUGH OUR WEBSITE AND PUBLIC EVENTS, PPIC AIMS TO BE AN	
INFORMATION RESOURCE FOR ENGAGED CALIFORNIANS ACROSS THE STATE. OUR	
CENTRAL AUDIENCES ARE CALIFORNIA'S ELECTED OFFICIALS AND POLICYMAKERS	
AT THE LOCAL, STATE, AND FEDERAL LEVELS. THESE LEADERS ROUTINELY DRAW	
ON PPIC RESEARCH TO MAKE VITAL POLICY CHOICES ON A WIDE RANGE OF	
TOPICS. OUR WORK IS REGULARLY CITED IN BILL ANALYSES AND OUR EXPERTS	
ARE OFTEN INVITED TO TESTIFY BEFORE THE STATE LEGISLATURE AND OTHER	
GOVERNMENTAL ENTITIES.	
THE PPIC SACRAMENTO CENTER - LOCATED ACROSS FROM THE STATE CAPITOL -	
OFFERS OPPORTUNITIES FOR HANDS-ON ENGAGEMENT WITH THE STATE'S POLICY	
COMMUNITY. THE BECHTEL CONFERENCE CENTER, AT OUR SAN FRANCISCO	
HEADQUARTERS, PROVIDES A STATE-OF-THE-ART VENUE - AND A NEUTRAL MEETING	
GROUND - FOR IMPORTANT POLICY DISCUSSIONS AND EVENTS.	

Name of the organization PUBLIC POLICY INSTITUTE OF CALIFORNIA	Employer identification number 94-3207299
PPIC RECEIVES GENEROUS SUPPORT FROM FOUNDATIONS, CORPORATIONS, AND	
INDIVIDUALS. OUR ENDOWMENT ALSO SUPPORTS MANY OF OUR RESEARCH AND OTHER	
ACTIVITIES. PPIC IS A 501(C)(3) PUBLIC CHARITY AND DOES NOT TAKE OR	
SUPPORT POSITIONS ON ANY BALLOT MEASURES OR ON ANY LOCAL, STATE, OR	
FEDERAL LEGISLATION, NOR DOES IT ENDORSE, SUPPORT, OR OPPOSE ANY	
POLITICAL PARTIES OR CANDIDATES FOR PUBLIC OFFICE.	
PPIC WAS ESTABLISHED IN 1994 WITH AN ENDOWMENT FROM WILLIAM R. HEWLETT.	
SINCE ITS INCEPTION, PPIC HAS HELPED CALIFORNIA'S LEADERS TO BETTER	
UNDERSTAND POLICY ISSUES BY PROVIDING THEM WITH NONPARTISAN RESEARCH.	
TANI CANTIL-SAKAUYE IS PRESIDENT AND CEO AND CHET HEWITT IS CHAIR OF	
THE BOARD OF DIRECTORS.	<u> </u>
FORM 990, PART VI, SECTION B, LINE 11B:	
PPIC'S CFO AND CONTROLLER ARE RESPONSIBLE FOR THE TIMELY PREPARATION OF THE	
IRS FORM 990. WHEN A DRAFT HAS BEEN COMPLETED, IT IS DISTRIBUTED TO THE	
AUDIT COMMITTEE OF THE BOARD FOR REVIEW, COMMENTS, AND DISCUSSION. ANY	
QUESTIONS, CONCERNS AND CHANGES BY THE COMMITTEE ARE PROVIDED TO STAFF FOR	
INCORPORATION INTO THE FORM 990. THE FULL BOARD IS PROVIDED A COPY OF THE	
DRAFT FOR REVIEW AND COMMENTS.	
FORM 990, PART VI, SECTION B, LINE 12C:	
PPIC'S CONFLICT OF INTEREST POLICY REQUIRES ALL RESEARCHERS TO DISCLOSE ANY	
POTENTIAL CONFLICTS OF INTEREST TO THE RESEARCH OPERATIONS MANAGER. IF THE	
OPERATIONS MANAGER DETERMINES THAT A CONFLICT OF INTEREST MAY EXIST, THE	
MATTER IS REVIEWED BY THE VICE PRESIDENT OF RESEARCH AND THE CFO. IN THE	
EVENT OF A DISAGREEMENT, THE MATTER IS TAKEN TO PPIC'S PRESIDENT. IF THE	
MATTER INVOLVES A MEMBER OF THE BOARD OF DIRECTORS IT IS REVIEWED BY THE	