Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Α	For t	he 2022 calen	dar year, or tax year begir	ning 8/01	, 2022	, and ending	7/31		, 20 2023	
В	Check	if applicable:	С			·			tification number	
		ddress change	CALIFORNIA TEACH	ING FELLOWS	FOUNDATION			20-0359	1353	
	\mathbf{H}	ame change	7110 N. FRESNO S		TOONDITTON		E	Telephone num		
	-	-	FRESNO, CA 93720					·		
		nitial return						559-224	-9200	
	\mathbf{H}	nal return/terminated							A	
	A	mended return						Gross receipts		
	Α	pplication pending	F Name and address of principa	al officer:				oup return for su		X
			SAME AS C ABOVE				Are all subo If "No," atta	ordinates include ach a list. See in	ed? Yes Structions.	No
<u> </u>	Tax-	-exempt status:	X 501(c)(3) 501(c) () (insert r	o.) 4947(a)(1) oi	r 527				
J	We	ebsite: WW	W.CTFF.US			н	I(c) Group exer	nption number		
K	Forn	n of organization:	X Corporation Trust	Association Ot	ner L	Year of formation	n: 2004	M State of	legal domicile: CA	
Pa	art I	Summar	у		<u>.</u>					
	1	Briefly descri	be the organization's miss	ion or most signif	icant activities:OR	GANIZED	EXCLUSI	VELY FOR	R EDUCATIONA	AL
a		PURPOSES	. THE CORPORATION	N IS A PUBL	IC BENEFIT C	CORPORAT	CON WHIC	CH IDENT	IFIES AND	
ĕ		SUPPORTS	FUTURE EDUCATOR	S THROUGH A	VARIETY OF	ACADEMIC	C, ENRIC	CHMENT,	AND SCHOOL	
Ë		PLACEMEN	T EXPERIENCES TO	ENHANCE PR	OFESSIONALIS	SM AND LI	EADERSHI	[P.		
Š	2	Check this bo	ox if the organization	n discontinued its	s operations or disp	oosed of mor	e than 25%	of its net as	ssets.	
Ğ	3		oting members of the gove		·					7
თ	4		dependent voting member							7
ı≞	5		of individuals employed in	-	•	,			4,	,005
Activities & Governance	6		of volunteers (estimate if							0
Ă			ed business revenue from							0.
	b	Net unrelated	business taxable income	from Form 990-1	, Part I, line 11					0.
								r Year	Current Yea	
<u>o</u>	8		and grants (Part VIII, line					103,263.		000.
Revenue	9		vice revenue (Part VIII, line				28,5	81,219.	44,886,1	165.
ě	10		ncome (Part VIII, column (•	•					
Œ	11		e (Part VIII, column (A), li					92,099.		746.
	12		e – add lines 8 through 11				29,0	76,581.	44,993,9	
	13		imilar amounts paid (Part					95,000.	150,0	<u>)00.</u>
	14		to or for members (Part I							
Ø	15	Salaries, other	er compensation, employe	e benefits (Part I)	X, column (A), lines	s 5-10)	27,0	16,394.	41,377,1	L33.
Se	16a	Professional	fundraising fees (Part IX,	column (A), line 1	1e)					
Expenses	b	Total fundrais	sing expenses (Part IX, co	lumn (D), line 25)					
Ж	17		ses (Part IX, column (A), li				1 6	20 701	2 270 6	5.4.0
	18		es. Add lines 13-17 (must					30,791.	2,378,6	
	_							42,185.	43,905,7	
. "	19	Revenue less	s expenses. Subtract line 1	8 IfOH HITE 12				334,396.	1,088,1	
900	20	Tatal assats	(Dark V. line 10)					f Current Year	End of Year	
sset 3ala	20		(Part X, line 16)es (Part X, line 26)					37,833.	8,878,1	
Net Assets or Fund Balances	21						·	315,137.	4,967,3	
			fund balances. Subtract I	ine 21 from line 2	0		2,8	322,696.	3,910,8	334.
Pa	art II	Signatur	e Block							
Und	er pena	Ities of perjury, I de	eclare that I have examined this return (other than officer) is based on	urn, including accompa	nying schedules and state	ements, and to th	e best of my kn	nowledge and bel	lief, it is true, correct, a	nd
COIII	piete. D	Pecial attort of prepa	diei (other than officer) is based off	all illioillation of which	preparer rias arry knowle	euge.				
		<u> </u>								
Sig He	gn	Signature of	опісег				Date			
He	ere	MIKE S				CE	EO			
		Type or print	t name and title							
		Print/Type p	preparer's name	Preparer's signature		Date	Che	eck if	PTIN	
Pa	id	KIP HU	JDSON	KIP HUDSON	ſ		self	f-employed	P01815018	
	epar	er Firm's name	HHC, INC.	•		•				
Us	e Or	ily Firm's addre		M AVE, STE	102		Firr	m's EIN 81	-1741762	
_	_	addire	FRESNO, CA 9		102				-475-8910	
Ma	v the	IRS discuss th	nis return with the preparer		ee instructions				. X Yes	No
1110	,	albuda li		SHOTTH ADDVC: C	oo moduudidha				.	110

Par	t III	Statement of Program Ser					
	D : 4	Check if Schedule O contains a		ne in this Part III			X
1	-	y describe the organization's miss	on:				
	SEE_	SCHEDULE O					
2	Did the	e organization undertake any signific	ant program services during	the year which were no	t listed on the prior		
_		990 or 990-EZ?				Yes	X No
		s," describe these new services on S					и и
3		ne organization cease conducting,		es in how it conducts.	any program services?	. Yes	X No
		s," describe these changes on Scheo	-	,	31 3		-
4	Section	ribe the organization's program se on 501(c)(3) and 501(c)(4) organiz evenue, if any, for each program s	ations are required to rep	each of its three large ort the amount of gran	est program services, as r ts and allocations to othe	neasured by ers, the total e	expenses. xpenses,
	STUI CON' TEAG CURI PROG CON' SER' CONI	FOUNDATION'S MISSION DENTS MAJORING IN EDU TRACTS WITH ELEMENTAR CHING FELLOWS FOR AFT CHING FELLOWS HELPED RENT FISCAL YEAR. THE GRAMS AT SCHOOL SITES TENT AND PROGRAM EVAL VICES AND GRANTS AND DUCTED IN (BUT IS NOT	CATION AND TO DET Y, JUNIOR HIGH, A ER-SCHOOL EDUCATI OVER 30,000 STUDE FOUNDATION GENER AND CONTRACTS WI JATION. THE FOUND CONTRIBUTIONS. THE LIMITED TO) FRES	DENT TEACHING (VELOP_AFTER-SCH AND HIGH SCHOOL ON AND TUTORIL ENTS EACH MONTH RATES REVENUE I OTHER SERVI DATION IS SUPPO HE FOUNDATION (15	DPPORTUNITIES TO HOOL PROGRAMS. TO HOOL PROGRAMS. TO HOOL SITE AT SCHOOL SITE FROM SERVICE FEE ICE PROVIDERS FOO DRIED PRIMARILY SO PROGRAM IS PRIMARILY INGS, TULARE AND HOOL SITE AND	COLLEGE HE FOUNDA PROVIDE Y 2,000 S DURING S FOR OPE R PROGRAM BY FEES E MARILY MERCED	THE ERATING
		e:) (Expenses \$		grants of \$) (Revenue	\$)
4d		program services (Describe on S) (Dayanus é		`
//-	(Expe		including grants of \$ 39,493,447.) (Revenue \$)
→€	iotai	program sorvice expenses	JJ,4JJ,441.				

			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	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		Χ
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 similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Х	
b	Did the organization report an amount for investments — other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		Х
С	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		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 Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	Χ	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Χ	
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	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 1c and 8a? If "Yes," complete Schedule G, Part II.	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Χ	

Form 990 (2022) CALIFORNIA TEACHING FELLOWS FOUNDATION Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22		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? <i>If "Yes," complete Schedule J.</i>	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 a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	24a		X
b	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 any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
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		Х
	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		X
С	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		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part 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? <i>If "Yes," complete Schedule R, Part I.</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 Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>	37		Х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V		V	. [
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
ВΛΛ	TFFA01041 09/01/22		990 ((0000)

Form 990 (2022) CALIFORNIA TEACHING FELLOWS FOUNDATION

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

				NO
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 4,005			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Χ
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
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		Х
	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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	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		Х
	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).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
•	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	0		
	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.	00		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
	Section 501(c)(7) organizations. Enter:	90		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against 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?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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.			
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			37
	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		
	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		X
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	10		Λ
	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would	17		
	result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	TELLOS	_	000	0000

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 No Yes 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..... 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 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?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 5 Χ Did the organization have members or stockholders?..... 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?..... 7a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7h Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... X 8a X **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..... 9 **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 Χ 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?..... Χ **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. Χ 12a Did the organization have a written conflict of interest policy? If "No," go to line 13....... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Χ Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ Χ 14 Did the organization have a written document retention and destruction policy?..... 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? X a The organization's CEO, Executive Director, or top management official. SEE SCHEDULE. Q. 15a **b** Other officers or key employees of the organization...SEE .SCHEDULE .O..... 15b X If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... 16a X **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 16b organization's exempt status with respect to such arrangements?... Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 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 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 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records.

SUITE 302 FRESNO CA 93720 559-224-9200

TIA YANG 575 E. LOCUST,

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

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

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

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

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

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

				(C)							
	(A) Name and title	(B) Average hours per	thar	one both	box, an c ector	unles officer /truste		on	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
		week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-Ź/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1)	MIKE SNELL CEO	<u>60</u>			Х				211,667.	0.	20 501
(2)	MARTIN SUAREZ	40			Λ				211,007.	0.	30,581.
\ <u>-</u> /	DEPUTY DIRECTOR					Х			182,083.	0.	20,183.
(3)	JUANITA JARAMILLO	40							,		•
	DIRECTOR OF PERSONNEL	0				Χ			153,333.	0.	24,778.
(4)	LEON_VICTOR	40									
	DIRECTOR OF INFORMATION TECHNO	0				Χ			114,377.	0.	14,515.
(5)	TONI MARIE LEWIS DIRECTOR OF LEARNING & DEVELOP	$-\frac{40}{0}$				Х			89,931.	0.	21,139.
(6)	AMANDA MARTINEZ	40				71			05,551.	<u> </u>	21,133.
_<-/-	DIRECTOR OF PROGRAMS	-10-				Х			100,354.	0.	9,410.
(7)	TIA YANG	40							·		
	DIRECTOR OF FINANCE	0				Χ			63,604.	0.	4,696.
(8)	NATALIE DODSON	40									
	DIRECTOR OF COMMUNITY DEVELOPM	0				Χ			37,555.	0.	1,913.
(9)	PAUL HERRICK TREASURER	2	v		v				0	0	0
(10)	KATHY STANTON	2	Х		X				0.	0.	0.
(10)	VICE-CHAIR	- 2 -	Х		Χ				0.	0.	0.
(11)	DONATO MIRELES	2	21		21				0.	· ·	<u> </u>
<u> </u>	CHAIRMAN	0	Х		Х				0.	0.	0.
(12)	JEROME COUNTEE	2									
	BOARD MEMBER	0	Χ						0.	0.	0.
(13)	CARLOS CORTES	2									
44.4	SECRETARY	0	Χ		Χ				0.	0.	0.
(14)	DAVID YANG	2	37						_	•	^
	BOARD MEMBER	0	Χ						0.	0.	0.

Form	990 (2022) CALIFORNIA TEACHING FELT VII Section A. Officers, Directors, Tru	LOWS F	OUN Kev	IDA F n	TIO	OVE	AC :	and	d Highest Com	20-0359353	000	Pa	ige 8
ı a	TVII Occuon A. Omeers, Directors, 110	(B)	l (Cy			C)	C3, (and	i riigiicat con	ipensatea Empi	Оусс	• (conti	писи)
	(A) Name and title	Average hours per	box	i, unle	Po: check	sition more	e than is both or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from		(F)	ount
		week (list any hours for related organiza tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	compe the o and	of other nsation rganizat d relate anization	tion d
(15)	MARK_SALAZAR BOARD MEMBER	2	Х						0.	0.			0.
(16)			- 21						0.	0.			<u> </u>
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
1b	Subtotal								952,904.	0.	1	27.2	215.
С	Total from continuation sheets to Part VII, Section	on A							0.				0.
d	Total (add lines 1b and 1c)								952,904.	0.	1		215.
2	Total number of individuals (including but not limited from the organization 5	to those I	isted	abo	ve) '	who	recei	ved	more than \$100,00	0 of reportable comp	ensatio	n	
												Yes	No
3	Did the organization list any former officer, direct on line 1a? <i>If "Yes,"complete Schedule J for suc.</i>	tor, truste h individu	ee, ke ıal	ey e	mpl	oye	e, or	high	hest compensated	employee	3		Х
4	For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	er than \$1	50,0	00?	If "	ation Yes,	and " con	oth nple	ner compensation ete Schedule J for	from	4	X	
5	Did any person listed on line 1a receive or accrufor services rendered to the organization? If "Yes					any any	unre or su	late	ed organization or	individual	5	Λ	X
Sec	tion B. Independent Contractors										· ·	ı	
1	Complete this table for your five highest compen compensation from the organization. Report compen	sated ind sation for	epen the c	den alen	t co ıdar	ntra year	ctors endi	tha ng v	at received more the with or within the or	nan \$100,000 of ganization's tax year.			
	(A) Name and business add	ress							(B) Description of	of services	() Compe	C) nsatio	n
ERC	4685 N CEDAR AVE., SUITE A FRESNO, CA	93726							EVALUATION &	REPORTING	1	95,2	213.
2	Total number of independent contractors (including b \$100,000 of compensation from the organization	out not lim 1	ited t	o the	ose	liste	d abo	ve)	who received more	than			
RΛΛ			TEEA	2100	00/	01/00					Form	000	(2022)

		Check if Schedule O contains a response or note t	to any line in this Part V	/III		
			(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	1a b c d e f	Federated campaigns				
	- 11	Business Cod	00/000.			
Program Service Revenue	2a b c	SERVICE REVENUE 611710	44,886,165.	44,886,165.		
Ñ	_					
ä	e	All other programs continue				
ğ	T	All other program service revenue				
ō.	g	Total. Add lines 2a-2f	44,886,165.			
	3	Investment income (including dividends, interest, and other similar amounts)				
		Income from investment of tax-exempt bond proceed				
	4	·				
	5	Royalties				
	C-	(i) Real (ii) Persona	31			
		Gross rents 6a				
		Less: rental expenses 6b				
		Rental income or (loss) 6c				
	d	Net rental income or (loss)				
	7a	Gross amount from (i) Securities (ii) Other				
		sales of assets				
	b	other than inventory Less: cost or other basis and sales expenses 7b				
	С	Gain or (loss) 7c				
	d	Net gain or (loss)				
Other Revenue		Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	56.			
<u> </u>		Less: direct expenses 8b 20,5				
ಕ	С	Net income or (loss) from fundraising events	57,746.			57,746.
	9a	Gross income from gaming activities. See Part IV, line 19				
		Less: direct expenses 9b				
	С	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less				
		returns and allowances				
		Less: cost of goods sold 10b				
	С	Net income or (loss) from sales of inventory				
2		Business Cod	е			
<u>ම</u> ත්	11a	OTHER_INCOME611710				
scellaneo Revenue	b					
<u>≅</u> §	С					
Miscellaneous Revenue	_	All other revenue				
Σ	е	Total. Add lines 11a-11d				
	12	Total revenue. See instructions	44 993 911	44.886.165.	0.	57.746.

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 re	esponse or note to any			
Do r 6b, i	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	150,000.	150,000.	-	
2	Grants and other assistance to domestic individuals. See Part IV, line 22	,	,		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,080,119.	259,414.	820,705.	0.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	36,581,605.	35,084,961.	1,496,644.	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	-5,014.	6,257.	-11,271.	
9	Other employee benefits	625,964.	278,317.	347,647.	
10	Payroll taxes	3,094,459.	2,920,901.	173,558.	
11	Fees for services (nonemployees):	,	,	,	
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column	778,835.	276,760.	502,075.	
12	(A), amount, list line 11g expenses on Schedule 0.) Advertising and promotion	86,045.	86,045.	302,013.	
13	_ · · · · · · · ·	68,571.	00,010.	68,571.	
14	·	437.		437.	
15	Royalties	1011		10	
16	Occupancy	169,409.		169,409.	
17	Travel	62,664.	26,194.	36,470.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	,	,	,	
	Conferences, conventions, and meetings				
20	Interest	296,509.		296,509.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	38,068.		38,068.	
23	Insurance	183,677.		183,677.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	PROGRAM EXPENSES	294,236.	294,236.		
b		98,922.		98,922.	
С		82,006.	82,006.		
d	UTILITIES	65,230.		65,230.	
е	All other expenses	154,031.	28,356.	125,675.	
25	Total functional expenses. Add lines 1 through 24e	43,905,773.	39,493,447.	4,412,326.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

		Check if Schedule O contains a response or note to	any line	in this Part X	<u></u>	<u></u>	·	
					(A) Beginning of year		(B) End of year	
	1	Cash — non-interest-bearing			412,946.	1	401,960.	
	2	Savings and temporary cash investments				2		
	3	Pledges and grants receivable, net				3		
	4	Accounts receivable, net	4,110,594.	4	6,704,658.			
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these pe	er officer, I contribut	director, or, or 35%		5		
	6	Loans and other receivables from other disqualified p		-		,		
	0	section 4958(f)(1)), and persons described in section				6		
	7	Notes and loans receivable, net		· · · ·		7		
Ø	8	Inventories for sale or use				8		
Assets	9	Prepaid expenses and deferred charges		 -	46,136.	9	17,476.	
As	_		1 1		40,130.	,	17,470.	
7		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		186,765.				
		Less: accumulated depreciation		75,029.	61,436.	10c	111,736.	
	11	Investments — publicly traded securities		<u> </u>		11		
	12	Investments — other securities. See Part IV, line 11		-		12		
	13	Investments – program-related. See Part IV, line 11.		-		13		
	14	Intangible assets.		-		14		
	15	Other assets. See Part IV, line 11	6,721.	15	1,642,331.			
	16	Total assets. Add lines 1 through 15 (must equal line	33)		4,637,833.	16	8,878,161.	
	17	Accounts payable and accrued expenses			895,575.	17	1,313,117.	
	18	Grants payable		<u> </u> _		18		
	19	Deferred revenue		19				
	20	Tax-exempt bond liabilities		<u> </u>		20		
ě	21	Escrow or custodial account liability. Complete Part I		L		21		
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribu- controlled entity or family member of any of these pe	utor, or 35	5%		22		
_	23	Secured mortgages and notes payable to unrelated the		<u></u>		23		
	24	Unsecured notes and loans payable to unrelated third		<u> </u> _		24		
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to relat plete Par	ed third parties, t X of Schedule D.	919,562.	25	3,654,210.	
	26	Total liabilities. Add lines 17 through 25			1,815,137.	26	4,967,327.	
ıces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	<u> </u>	ζ				
ā	27	Net assets without donor restrictions			2,822,696.	27	3,910,834.	
ã	28	Net assets with donor restrictions				28		
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck here					
ō	29		apital stock or trust principal, or current funds					
इं	30	Paid-in or capital surplus, or land, building, or equipm		<u></u>		30		
SS	31	Retained earnings, endowment, accumulated income,				31		
t A	32	Total net assets or fund balances		<u> </u> _	2,822,696.	32	3,910,834.	
Ş	33	Total liabilities and net assets/fund balances			4,637,833.	33	8,878,161.	
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Form **990** (2022)

Pai	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	44,9	93,9	911.
2	Total expenses (must equal Part IX, column (A), line 25)	2	43,9	05,	773.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,0	88,1	L38.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,8	22,6	596.
5	Net unrealized gains (losses) on investments.	5	•		
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	3,9	10,8	334.
Pai	rt XII Financial Statements and Reporting		•		
	Check if Schedule O contains a response or note to any line in this Part XII				. \square
				Yes	
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 O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both: Separate basis Both consolidated and separate basis	ed on a			
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separabasis, consolidated basis, or both:	ate			
	X Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit review, or compilation of its financial statements and selection of an independent accountant?	, 	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Guidance, 2 C.F.R Part 200, Subpart F?				Х
b	olf "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
BAA	TEEA0112L 09/01/22		Form	990	(2022)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name	Name of the organization Employer identification number										
	CALIFORNIA TEACHING FELLOWS FOUNDATION 20-0359353 Part Reason for Public Charity Status. (All organizations must complete this part.) See instructions.										
								uctions.			
	rga	inization is not a private found	,	•		-	•				
1	_	A church, convention of church				b)(1)(A)((i).				
2	_	A school described in sectio									
3	_	A hospital or a cooperative h					• • •	Fatan Haribaan (4-1)			
4		A medical research organiza name, city, and state:	tion operated in conju	unction with a nospital	aescribe	a in sec	ction 170(b)(1)(A)(III).	Enter the nospital's			
5		An organization operated for	the benefit of a colle	ge or university owned	or oper	ated by	a governmental unit	described in			
6	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).										
7		An organization that normally r in section 170(b)(1)(A)(vi).	eceives a substantial p	part of its support from a	governm	ental un	it or from the general p	public described			
8		A community trust described	•	A)(vi). (Complete Part	II.)						
9		An agricultural research organi									
		or university or a non-land-granuniversity:		e (see instructions). Ente		-	and state of the colleg	e or 			
10	X	An organization that normally from activities related to its	y receives (1) more thexempt functions, sub	nan 33-1/3% of its suppliect to certain exception	oort from	n contrib (2) no r	more than 33-1/3% o	f its support from gross			
		investment income and unre June 30, 1975. See section !	iated business taxabi 509(a)(2). (Complete F	e income (less section Part III.)	511 tax) from D	usinesses acquired b	y the organization after			
11		An organization organized ar	nd operated exclusive	ely to test for public saf	ety. See	section	n 509(a)(4).				
12	_	An organization organized an or more publicly supported o lines 12a through 12d that de	rganizations describe	ed in section 509(a)(1) o	or sectio	n 509(a) (2). See section 509	(a)(3). Check the box on			
а		Type I. A supporting organization organization of the power to recomplete Part IV, Sections A	on operated, supervise gularly appoint or elect								
b		Type II. A supporting organiz	ration supervised or c	ontrolled in connection	with its	support	ted organization(s), b	y having control or			
		management of the supporting must complete Part IV, Secti	organization vested in ions A and C.	the same persons that of	control or	manage	the supported organiz	ration(s). You			
С		Type III functionally integrated organization(s) (see instruction)	A supporting organizations). You must com	tion operated in connection	n with, a A. D. an	nd functi	onally integrated with, i	ts supported			
d		Type III non-functionally integ functionally integrated. The c instructions). You must com	rated. A supporting org	anization operated in co	nnection	with its	supported organization at and an attentivenes	(s) that is not ss requirement (see			
е		Check this box if the organiz	ation received a writte	en determination from	the IRS						
f	Er	integrated, or Type III non-functer the number of supported covide the following information ame of supported organization	organizations	supporting organization	1.						
g	Pr	ovide the following informatio	n about the supported	d organization(s).	1		1	1			
•	i) Na	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	ın your g	s the tion listed poverning ment?	(v) Amount of monetary support (see instructions	(vi) Amount of other support (see instructions)			
					Yes	No					
(A)											
(B)											
(C)											
<u>(D)</u>											
<u>(E)</u>											
Total											

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

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

Sec	tion A. Public Support						
	ndar year (or fiscal year nning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						•
	ndar year (or fiscal year nning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						
	Total support. Add lines 7 through 10						
	Gross receipts from related activ	•	•			12	
	First 5 years. If the Form 990 is organization, check this box and	stop here		, third, fourth, or f	ifth tax year as a	section 501(c)(3)
Sec	tion C. Computation of Pul Public support percentage for 20	blic Support P	ercentage	. 11 (0	<u> </u>	1.4	
14 15	Public support percentage for 20 Public support percentage from 3	ı∠∠ (IINE 6, COIUMI 2021 Schedule ∆	rı (r), divided by li Part II line 14	irie II, column (f))		
	33-1/3% support test—2022. If t	he organization di	id not check the b	oox on line 13, an	d line 14 is 33-1/3	3% or more, che	eck this box
b	and stop here. The organization qualifies as a publicly supported organization. b 33-1/3% support test—2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17a	7a 10%-facts-and-circumstances test—2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						
	b 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						
10	i iivate iouiiuatioii. Ii tile organi.	Zation did Hot CHE	ser a nox on mile	15, 10a, 100, 1/a	, or 17b, CHECK III	is nox allu see	11311 UCUOI13

Schedule 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.)

Sec	tion A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	7,000.	274,004.	751,094.	403,263.	50,000.	1,485,361.
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	27257455.	25780360.	25465024.	28581219.	44886165.	151970223.
4	or business under section 513. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons	27264455.	26054364.	26216118.	28984482.	44936165.	153455584.
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.	0.	0.	0.	0.	0.	0.
	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
	Public support. (Subtract line 7c from line 6.)	0.	0.	0.	0.	0.	153455584.
Sec	tion B. Total Support						100100011
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	27264455.	26054364.	26216118.	28984482.	44936165.	153455584.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						0.
	Unrelated business taxable income (less section 511						
	income (less section 511 taxes) from businesses						
	income (less section 511	0.	0.	0.	0.	0.	<u>0.</u> 0.
С	income (less section 511 taxes) from businesses acquired after June 30, 1975	0.	0.	0.	0.	0.	0.
c 11	income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	10,501.	0. 68,006.	69,322.	92,099.	0. 57,746.	0.
c 11	income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI.	10,501.	68,006.	69,322.	92,099.	57,746.	0. 0. 0. 297,674.
11 12 13 14	income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE TART VI. Total support. (Add lines 9, 10c, 11, and 12.)	10,501. 27274956. for the organizationstop here	68,006. 26122370. on's first, second,	69,322. 26285440. third, fourth, or fi	92,099. 29076581. ifth tax year as a	57,746. 44993911. section 501(c)(3)	0. 0. 297,674. 153753258.
11 12 13 14 Sec	income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI. Total support. (Add lines 9, 10c, 11, and 12.). First 5 years. If the Form 990 is organization, check this box and tion C. Computation of Pul	10,501. 27274956. for the organization stop hereblic Support P	68,006. 26122370. on's first, second, ercentage	69, 322. 26285440. third, fourth, or fi	92,099. 29076581. ifth tax year as a	57,746. 44993911. section 501(c)(3)	0. 0. 297,674. 153753258.
11 12 13 14 Sec 15	income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	10,501. 27274956. for the organization stop here blic Support P	68,006. 26122370. on's first, second, ercentage n (f), divided by lii	69, 322. 26285440. third, fourth, or fi	92,099. 29076581. ifth tax year as a	57,746. 44993911. section 501(c)(3)	0. 0. 0. 297,674. 153753258.
11 12 13 14 Sec 15 16	income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	10,501. 27274956. for the organization stop hereblic Support P 122 (line 8, column 2021 Schedule A,	68,006. 26122370. on's first, second, ercentage n (f), divided by line Part III, line 15.	69,322. 26285440. third, fourth, or fine 13, column (f)	92,099. 29076581. ifth tax year as a	57,746. 44993911. section 501(c)(3)	0. 0. 0. 297,674. 153753258.
11 12 13 14 Sec 15 16 Sec	income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	10,501. 27274956. for the organization stop here	68,006. 26122370. on's first, second, ercentage on (f), divided by lint Part III, line 15. one Percentage	69, 322. 26285440. third, fourth, or fine 13, column (f)	92,099. 29076581. ifth tax year as a	57,746. 44993911. section 501(c)(3)	0. 0. 297,674. 153753258.
11 12 13 14 Sec 15 16 Sec 17	income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI. Total support. (Add lines 9, 10c, 11, and 12.)	10,501. 27274956. for the organization stop here blic Support P 122 (line 8, column 2021 Schedule A, estment Incomo 100 or 2022 (line 10c,	68,006. 26122370. on's first, second, ercentage on (f), divided by ling Part III, line 15. one Percentage column (f), divided	69, 322. 26285440. third, fourth, or fine 13, column (f)	92,099. 29076581. ifth tax year as a	57,746. 44993911. section 501(c)(3)	0. 0. 297,674. 153753258.
11 12 13 14 Sec 15 16 Sec 17 18	income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI. Total support. (Add lines 9, 10c, 11, and 12.)	10,501. 27274956. for the organization stop here blic Support P 122 (line 8, column 2021 Schedule A, estment Incomor 2022 (line 10c, rom 2021 Schedul	68,006. 26122370. on's first, second, ercentage on (f), divided by ling Part III, line 15. one Percentage column (f), divided le A, Part III, line	69, 322. 26285440. third, fourth, or fine 13, column (f)	92,099. 29076581. ifth tax year as a	57,746. 44993911. section 501(c)(3)	0. 0. 297,674. 153753258.
11 12 13 14 Sec 15 16 Sec 17 18 19a	income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	10,501. 27274956. for the organizatios top here blic Support P 122 (line 8, column 2021 Schedule A, estment Incomor 2022 (line 10c, rom 2021 Schedule the organization de this box and stop	68,006. 26122370. on's first, second, ercentage of, divided by ling Part III, line 15. ne Percentage column (f), divided le A, Part III, line lid not check the beathere. The organ	69, 322. 26285440. third, fourth, or fine 13, column (f) ed by line 13, column 17	92,099. 29076581. ifth tax year as a summ (f))	57,746. 44993911. section 501(c)(3)	0. 0. 297,674. 153753258.
11 12 13 14 Sec 17 18 19a b	income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI. Total support. (Add lines 9, 10c, 11, and 12.)	10,501. 27274956. for the organizatios top here blic Support P 122 (line 8, column 2021 Schedule A, estment Incomor 2022 (line 10c, rom 2021 Schedule the organization dentities box and stop), check this box and stop, check this box and stop, check this box and stop, check this box and stop).	68,006. 26122370. on's first, second, ercentage of (f), divided by ling Part III, line 15. ne Percentage column (f), divided de A, Part III, line id not check the beat on the column of the co	69, 322. 26285440. third, fourth, or fine 13, column (f) ed by line 13, column 17	92,099. 29076581. ifth tax year as a summ (f))	57,746. 44993911. section 501(c)(3)	0. 0. 297,674. 153753258.

20-0359353

CALIFORNIA TEACHING FELLOWS FOUNDATION

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4 a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
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).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b		
С	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 .	9с		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

	edule A (Form 990) 2022 CALIFORNIA TEACHING FELLOWS FOUNDATION 20-035935	3	F	age 5
Pai	rt IV Supporting Organizations (continued)		Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c		Ц
Sec	ction B. Type I Supporting Organizations			
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? 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	Yes	No
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	ction 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	ction D. All Type III Supporting Organizations	I		
	7		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	1		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
ä	The organization satisfied the Activities Test. Complete line 2 below.			
ı	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
(The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instru	uctions	5).
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
á	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
I	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.			
á	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .	3a		
ı	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b		

Schedule A (Form 990) 2022 CALIFORNIA TEACHING FELLOWS FOUNDATION

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 20-0359353

1	Check here if the organization satisfied the Integral Part Test as a qualifying trusi instructions. All other Type III non-functionally integrated supporting organization	t on Nov	v. 20, 1970 (explain ir complete Sections A	n Part VI). See . through E.
Sec	tion A — Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
á	Average monthly value of securities	1a		
ŀ	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
•	e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	grated	Type III supporting or	ganization

BAA Schedule A (Form 990) 2022

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (conti	nued)	
Sec	tion D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required — provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8	
9	Distributable amount for 2022 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 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:			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. 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, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

BAA Schedule A (Form 990) 2022

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Part VI

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

PART III, LINE 12 - OTHER INCOME

NATURE AND SOURCE		2022		2021		2020		2019		2018
OTHER INCOME	TAL \$	57,746. 57,746.	\$ \$	92,099. 92,099.	\$ \$	69,322. 69,322.	\$ \$	68,006. 68,006.	\$ \$	10,501. 10,501.

BAA TEEA0408L 09/09/22 Schedule A (Form 990) 2022

SCHEDULE D (Form 990)

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.

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection
Employer identification number

CAI	IFORNIA TEACHING FELLOWS FOU	NDATION		20-03	359353
Pai	t I Organizations Maintaining Do	onor Advised Funds or Othe	r Similar F	unds or Accoun	ts.
	Complete if the organization answered	I "Yes" on Form 990, Part IV, line 6.			
		(a) Donor advised fund	ds	(b) Funds an	nd 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 do are the organization's property, subject to the				Yes No
6	Did the organization inform all grantees, don for charitable purposes and not for the benefimpermissible private benefit?	ors, and donor advisors in writing t it of the donor or donor advisor, or	hat grant fun for any othei	ds can be used only r purpose conferring	☐ Yes ☐ No
Pai	t II Conservation Easements.				<u> </u>
	Complete if the organization answered	I "Yes" on Form 990, Part IV, line 7.			
1	Purpose(s) of conservation easements held I	by the organization (check all that a	apply).		
	Preservation of land for public use (for exam	nple, recreation or education)	Preservat	ion of a historically in	nportant land area
	Protection of natural habitat		Preservat	ion of a certified histo	oric structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization	held a qualified conservation contribu	ition in the for	m of a conservation ea	sement on the
	last day of the tax year.			Hald at th	ha Fud af tha Tay Vasu
	Total number of conservation easements				he End of the Tax Year
	Total number of conservation easements				
	Number of conservation easements on a cer				
				 	
•	Number of conservation easements included historic structure listed in the National Regist	terto acquired after July 25, 2006	and not on a	2d	
3	Number of conservation easements modified, tra				the
	tax year				
4	Number of states where property subject to o			<u></u>	
5	Does the organization have a written policy r				□vaa □ Na
_	and enforcement of the conservation easeme				Yes No
6	Staff and volunteer hours devoted to monitoring,	inspecting, nandling of violations, an	a enforcing co	onservation easements	during the year
7	Amount of expenses incurred in monitoring, insp	pecting, handling of violations, and en	forcing conser	vation easements durin	ng the year
8	Does each conservation easement reported and section 170(h)(4)(B)(ii)?	on line 2(d) above satisfy the requir	rements of se	ection 170(h)(4)(B)(i)	Yes No
9	In Part XIII, describe how the organization re include, if applicable, the text of the footnote conservation easements.	ports conservation easements in it to the organization's financial state	s revenue an ements that o	d expense statement describes the organiz	and balance sheet, and ation's accounting for
Pai		ollections of Art, Historical 7 I "Yes" on Form 990, Part IV, line 8.	reasures,	or Other Similar	Assets.
1 a	If the organization elected, as permitted under historical treasures, or other similar assets he Part XIII the text of the footnote to its financial treasures.	eld for public exhibition, education,	or research	tatement and balance in furtherance of pub	e sheet works of art, lic service, provide in
ı	If the organization elected, as permitted undi- historical treasures, or other similar assets held following amounts relating to these items:	for public exhibition, education, or res	search in furth	erance of public service	e, provide the
	(i) Revenue included on Form 990, Part VIII	, line 1			\$
	(ii) Assets included in Form 990, Part X				\$
2	If the organization received or held works of art, amounts required to be reported under FASE	3 ASC 958 relating to these items:			following
	Revenue included on Form 990, Part VIII, lin	е І			۵ ۲
					3

Part III Organizations Maintaining Co	llections of Art, His	storical Treasures,	or Other Similar A	ssets (continued
3 Using the organization's acquisition, accession, a items (check all that apply):	and other records, check a	ny of the following that n	nake significant use of its	collection
a Public exhibition	d Loan	or exchange program		
b Scholarly research	e Other			
c Preservation for future generations				
4 Provide a description of the organization's collect Part XIII.	ions and explain how they	further the organization	's exempt purpose in	
5 During the year, did the organization solicit or to be sold to raise funds rather than to be ma	intained as part of the o	rganization's collection	1?	Yes No
Part IV Escrow and Custodial Arrang reported an amount on Form 990, Part	ements. Complete if th X, line 21.	ne organization answere	d "Yes" on Form 990, Pa	t IV, line 9, or
1 a Is the organization an agent, trustee, custodia	an or other intermediary	for contributions or oth	er assets not included	
on Form 990, Part X?				Yes No
b If "Yes," explain the arrangement in Part XIII and	I complete the following ta	ible:	Г	
5				Amount
c Beginning balance				
d Additions during the year.				
e Distributions during the year				
f Ending balance				Ves Ne
b If "Yes," explain the arrangement in Part XIII.			•	
bili res, explain the arrangement in Fart Alli.	Check here it the expla	mation has been provid	ieu on Fait Aiii	
Part V Endowment Funds. Complete if	the organization answers	d "Ves" on Form 990 Pa	art IV ling 10	
(a) Current				(e) Four years back
1 a Beginning of year balance	t year (b) i nor yea	(c) Two years bac	(u) Three years back	(c) I our years back
b Contributions				
c Net investment earnings, gains, and losses				
d Grants or scholarships				
e Other expenditures for facilities				-
and programs				
f Administrative expenses				
g End of year balance				
2 Provide the estimated percentage of the curre	ent year end balance (lir	ne 1g, column (a)) held	as:	
a Board designated or quasi-endowment	%			
b Permanent endowment	5			
c Term endowment %				
The percentages on lines 2a, 2b, and 2c should 6	equal 100%.			
3 a Are there endowment funds not in the possession	n of the organization that a	are held and administered	d for the	<u></u>
organization by: (i) Unrelated organizations				Yes No
(ii) Related organizations				3a(i)
b If "Yes" on line 3a(ii), are the related organizations.				3a(ii) 3b
4 Describe in Part XIII the intended uses of the	·			. 30
Part VI Land, Buildings, and Equipme		ont farias.		
Complete if the organization answered		IV, line 11a. See Form 9	990, Part X, line 10.	
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land	, , , , ,	` ' '		
b Buildings				
c Leasehold improvements				
d Equipment		148,650.	63,016.	85,634
e Other		38,115.	12,013.	26,102
Total. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X,			111,736
DAA		•	Calaad	lula D (Farm 900) 202

Schedule D (Form 990) 2022

Part VII	Investments — Other Securities. Complete if the organization answered "Yes" o	n Form 990 Part IV lin	N/A e 11h See Form 990 Part X line 12	
(a) Descr	iption of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-vear market value
	al derivatives	* *	(O) modica di Tanadasin Cost di Sila	or your manner raise
	held equity interests.			
(3) Other				
(A) (B) (C) (D) (E)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(l)				
Total. (Colum	n (b) must equal Form 990, Part X, column (B) line 12.)			
Part VIII	Investments — Program Related.	E 000 B 1 W 1	N/A	
	Complete if the organization answered "Yes" of the Organization answered "Yes" of the Organization answered of the Organization and Organ		e 11c. See Form 990, Part X, line 13. (c) Method of valuation: Cost or end	d of wood models of wolve
	(a) Description of investment	(b) Book value	(c) Method of Valuation: Cost of end	1-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7) (8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, column (B) line 13.)			
Part IX	Other Assets.	• 1		
	Complete if the organization answered "Yes" of		e 11d. See Form 990, Part X, line 15.	
(1) DED		escription		(b) Book value
(1) DEP(ASSETS			35,382. 1,606,949.
(3)	ASSEIS			1,000,949.
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	umn (b) must equal Form 990, Part X, column	(B) line 15.)		1,642,331.
Part X	Other Liabilities.	n Form 000 Port IV lin	a 11a ar 11f Can Form 000 Part V lina	25
1	Complete if the organization answered "Yes" o	cription of liability	e Tie of Tii. See Form 990, Part X, line	(b) Book value
1. (1) Feder	ral income taxes	inplion of hability		(b) Book value
	TOMER DEPOSITS			1,810.
	SE LIABILITY			1,606,949.
	E OF CREDIT			2,045,451.
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)	(h) and and France 200 B 1 V 1 (B) 11 (C)			2 (54 012
	in (b) must equal Form 990, Part X, column (B) line 25.) uncertain tax positions. In Part XIII, provide the text of the			3,654,210.
	UNCERTAIN LAX DUSTRIVITS. III FALL ATIL DEUVIUE LITE LEXT OF LITE	outhough to the undanization S	manciai statements mat repults the organization :	s navinty for unicertain

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn.	ı
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	45,014,421.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
c Recoveries of prior year grants		
e Add lines 2a through 2d.	2 e	20,510.
3 Subtract line 2e from line 1	3	44,993,911.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	44,993,911.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	rn.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	43,926,283.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses. 2c		
d Other (Describe in Part XIII.) SEE PART XIII 2d 20,510.		
e Add lines 2a through 2d.	2 e	20,510.
3 Subtract line 2e from line 1.	3	43,905,773.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b.	4 c	42 005 770
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	43,905,773.

Part XIII Supplemental Information.

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

PART X - FASB ASC 740 FOOTNOTE

THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND APPLICABLE STATE LAW. THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THAT GUIDANCE, THE FOUNDATION MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE

TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES BASED ON THE BAA

Schedule D (Form 990) 2022

Part XIII Supplemental Information (continued)

PART X - FASB ASC 740 FOOTNOTE (CONTINUED)

TECHNICAL MERITS OF THE POSITION. EXAMPLES OF TAX POSITIONS INCLUDE THE TAX-EXEMPT STATUS OF THE FOUNDATION AND VARIOUS POSITIONS RELATED TO THE POTENTIAL SOURCES OF UNRELATED BUSINESS TAXABLE INCOME ("UBTI"). THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THERE WERE NO UNRECOGNIZED TAX BENEFITS IDENTIFIED OR RECORDED AS LIABILITIES FOR THE FISCAL YEAR END. THE FOUNDATION FILES TAX FORMS IN THE U.S. FEDERAL JURISDICTION AND THE STATE OF CALIFORNIA. THE FOUNDATION IS GENERALLY NO LONGER SUBJECT TO EXAMINATION BY THE U.S. FEDERAL JURISDICTION AND THE STATE OF CALIFORNIA THREE AND FOUR YEARS AFTER FILING, RESPECTIVELY.

SCHEDULE D, PART XI, LINE 2D OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990

FUNDRAISING EXPENSES IN EXPENSES IN FSTOTAL	<u>\$</u> \$	20,510. 20,510.
SCHEDULE D, PART XII, LINE 2D OTHER EXPENSES AND LOSSES PER AUDITED F/S		
FUNDRAISING EXPENSES IN EXPENSES IN FS	\$ \$	20,510. 20,510.

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

2022

Open to Public Inspection

Employer identification number

20-0359353 CALIFORNIA TEACHING FELLOWS FOUNDATION **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key Yes X No **b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (vi) Amount paid to (iii) Did fundraiser (i) Name and address of individual (iv) Gross receipts (or retained by) (ii) Activity (or retained by) or entity (fundraiser) have custody or control of contributions? from activity fundraiser listed in organization column (i) Yes No 1 2 3 5 6 7 9 10 Total. 0. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Page 2

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

			(a) Event #1 SCHOLARSHIP GA (event type)	(b) Event #2	(c) Other events NONE (total number)	(d) Total events (add column (a) through column (c))
nue			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	78,256.			78,256.
Ж	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	78,256.			78,256.
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	9,191.			9,191.
Expe	7	Food and beverages				
irect	8	Entertainment	100.			100.
	9	Other direct expenses	11,219.			11,219.
	10	Direct expense summary. Add lines 4 thr	• ,			=0,0=0.
D	11	Net income summary. Subtract line 10 fro				- ,
Par	T III	Gaming. Complete if the organiza than \$15,000 on Form 990-EZ, lin	e 6a.	s" on Form 990, Pa	art IV, line 19, or re	eportea more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
R	1	Gross revenue				
rses	2	Cash prizes				
Exper	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
Д	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes%	Yes%	
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d)			
	8	Net gaming income summary. Subtract li	ne 7 from line 1. colum	nn (d)		
a b	Is th	er the state(s) in which the organization co	anducts gaming activitieg activities in each of the	es: nese states?		
		es," explain:				

Sch	edule G (Form 990) 2022 CALIFORNIA TEACHING FELLOWS FOUNDATION 20	0-0359353	Page 3
11	Does the organization conduct gaming activities with nonmembers?	····· Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	Yes	No
	Indicate the percentage of gaming activity conducted in: a The organization's facility.		%
	b An outside facility		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	:	
	Name		
	Address		
	a Does the organization have a contract with a third party from whom the organization receives gaming revenue.	e? Yes ne amount	No
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
i	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	Yes	No
	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in organization's own exempt activities during the tax year \$		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, col and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide an information. See instructions.		(v);

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 Schedule G (Form 990) 2022

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Employer identification number

CALIFORNIA TEACHING FELLOWS						20-035935	53
Part I General Information on G							
Does the organization maintain records the selection criteria used to award the	ne grants or assistand	e?					X Yes No
2 Describe in Part IV the organization's pro-		-				PART IV	
Form 990, Part IV, line 21,							
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CSU FRESNO TEACHING SCHOLARS 4910 N CHESTNUT AVE							TEACHING SCHOLARS
FRESNO, CA 93726			150,000.	0.	FAIR VALUE		PROGRAM
<u>(2)</u>							
(3)							
<u>(4)</u>							
<u>(5)</u>							
<u>(6)</u>							
<u>(7)</u>							
(8)							
2 Enter total number of section 501(c)(33 Enter total number of other organizat	· -	-					1

can be duplicated if additiona	to Domestic Individi I space is needed.	uals. Complete if t	he organization an	swered "Yes" on Form S	990, Part IV, line 22. Part III
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					

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

PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.

THE ORGANIZATION RECEIVES NOTIFICATION OF USE OF FUNDS BY THE END OF THE DONOR'S FISCAL YEAR END.

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.

20-0359353

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

CALIFORNIA TEACHING FELLOWS FOUNDATION

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

Part 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 Tax indemnification and gross-up payments 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 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 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/ Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee 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: **4**a Χ **b** Participate in or receive payment from a supplemental nonqualified retirement plan?..... 4b Χ c Participate in or receive payment from an equity-based compensation arrangement?..... 4c Χ 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. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?..... 5a Χ 5h Χ If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization?..... 6a Χ 6b Χ If "Yes" on line 6a or 6b, describe in Part III. 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 Χ 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. If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?....

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

Schedule J (Form 990) 2022

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

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

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

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation				(D) Nontaxable	(E) Total of columns(B)(i)-(D)	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	benefits	columns(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
MIKE SNELL	(i)	211,667.	0.	0.	10,583.	19,998.	242,248.	0.
	(ii)	<u>Z</u> <u>I</u> I, <u>UU</u> 0.	$\frac{0}{0}$.	0 .	0.	0.	0.	0.
	(i)	182,083.	0.	0.	9,104.	11,079.	202,266.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	153,333.	0.	0.	7,667.	17,111.	178,111.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)		- – – – – – –				 	
	(ii)							
	(i)						 	
7	(ii)							
	(i)							
8	(ii)							
9	(i)						 	
	(ii)							
	(i) (ii)				 		 	
	(i)							
	(ii)						+	
	(i)							
	(ii)						 	
	(i)							_
	(ii)						+	
	(i)							
	(ii)				 		†	
	(i)							
	(ii)						†	
	(i)							
	(ii)						T	
DAA			TEE \(\lambda \) 1 0 2 1 0 7 1 2 1	/22		•	Calcadada	(Farm 000) 2022

BAA TEEA4102L 07/25/22 Schedule J (Form 990) 2022

Part III Supplemental Information

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

TEEA4103L 07/25/22

SCHEDULE L (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.

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number CALIFORNIA TEACHING FELLOWS FOUNDATION 20-0359353 **Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (b) Relationship between disqualified person and (d) Corrected? 1 (c) Description of transaction (a) Name of disqualified person organization Yes No (1) (2) (3)(4) (5) (6) Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (c) Purpose of (b) Relationship with organization (d) Loan to or (a) Name of interested person (e) Original principal amount (f) Balance due (a) In default? (h) Approved (i) Written organization? То From Yes No Yes No Yes No (1) (2)(3) (4) (5) (6) (7) (8) (9) (10)Total Part III **Grants or Assistance Benefiting Interested Persons.** Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between interested person and the organization (c) Amount of assistance (e) Purpose of assistance (a) Name of interested person (d) Type of assistance (1) (2) (3) (4) (5) (6) (7)(8) (9) (10)

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

Schedule L (Form 990) 2022

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction		(e) Sharing of organization's revenues?	
				Yes	No	
(1) ERC	BOARD MEMBER	195,213.	GRANT WRITING & EVALUATN		Х	
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						

Part V Supplemental Information.

Provide additional information for responses to questions on Schedule L (see instructions).

BAA Schedule L (Form 990) 2022

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

CALIFORNIA TEACHING FELLOWS FOUNDATION

Employer identification number 20-0359353

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

ORGANIZED EXCLUSIVELY FOR EDUCATIONAL PURPOSES. THE CORPORATION IS A PUBLIC BENEFIT CORPORATION WHICH IDENTIFIES AND SUPPORTS FUTURE EDUCATORS THROUGH A VARIETY OF ACADEMIC, ENRICHMENT, AND SCHOOL PLACEMENT EXPERIENCES TO ENHANCE PROFESSIONALISM AND LEADERSHIP.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

FORM 990 IS REVIEWED BY THE CEO AND THE TREASURER BEFORE FILING AND PRESENTED TO THE BOARD OF DIRECTORS AFTER THEIR REVIEW PRIOR TO FILING.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT BOARD APPROVED PAY AND RATES FOR CEO.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

COMPENSATION OF OFFICERS/KEY EMPLOYEES IS EVALUATED USING COMPARABLE COMPENSATION

FOR ORGANIZATIONS OF SIMILIAR SIZE AND NATURE OF OPERATIONS AT THE TIME OF HIRING

AND REVIEWED PERIODICALLY THEREAFTER. RECORDS ARE MAINTAINED OF THE COMPENSATION

EVALUATION AND DELIBERATIONS THERETO.

FORM 990. PART VI. LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

ALL GOVERNING DOCS, POLICIES AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST.