Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

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

2023
Open to Public Inspection

X Yes No

Form 990 (2023)

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information. For the 2023 calendar year, or tax year beginning 07/01/23, and ending 06/30/24 C Name of organization D Employer identification number Check if applicable: THE CALIFORNIA 4-H FOUNDATION Address change Doing business as 23-7327765 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite 530-750-1389 2801 2ND ST Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/ DAVIS CA 95616 1,634,669 G Gross receipts \$ Amended return Name and address of principal officer. H(a) Is this a group return for subordinates? Application pending CAROLYN WARNE 2801 SECOND STREET H(b) Are all subordinates included? If "No." attach a list. See instructions DAVIS 95618 X 501(c)(3) 501(c) 4947(a)(1) or 527 Tax-exempt status:) (insert no.) WWW.CA4H.ORG Website: H(c) Group exemption number Form of organization: X Corporation Trust Association Year of formation: 1993 CA M State of legal domicile Part I Summary 1 Briefly describe the organization's mission or most significant activities: ENGAGES YOUTH IN REACHING THEIR FULLEST POTENTIAL WHILE ADVANCING THE FIELD Governance OF YOUTH DEVELOPMENT. 2 Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 14 3 **Activities** 4 Number of independent voting members of the governing body (Part VI, line 1b) 14 4 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 0 5 6 Total number of volunteers (estimate if necessary) 14 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 7a b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) 1,645,346 1,535,369 9 Program service revenue (Part VIII, line 2g) 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 111,235 99,300 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,756,581 1,634,669 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,533,573 1,697,524 1,533,573 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,697,524 223,008 19 Revenue less expenses. Subtract line 18 from line 12 -62,855Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 2,133,795 2,244,665 21 Total liabilities (Part X, line 26) 0 22 Net assets or fund balances. Subtract line 21 from line 20 2,133,795 2,244,665 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. awby Nowan 3 February 2025 Sign Signature of office Here CAROLYN WARNE 4-H FNDTION DIRECTOR Type or print name and title Print/Type preparer's name Preparer's signature if PTIN Check Paid BRETT V. HUSTON BRETT V. HUSTON 01/28/25 self-employed P00846006 Preparer FECHTER & COMPANY, CPA'S Firm's name 20-8710580 Firm's EIN **Use Only** 3445 AMERICAN RIVER DR STE A SACRAMENTO, CA 95864 916-333-5360 Firm's address Phone no.

May the IRS discuss this return with the preparer shown above? See instructions

orm 990 (2023) THE CAL			23-7327765	Page :
	Program Service Accordule O contains a respons		in this Part III	X
Briefly describe the organiz		oc or note to any mile	in this i talk in	I THE TANK OF THE PARTY OF THE
SEE SCHEDULE O				
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3 not on the second management of the second				
2 Did the organization underta prior Form 990 or 990-EZ? If "Yes," describe these new	*************************	vices during the year whic	n were not listed on the	Yes X No
3 Did the organization cease services?	conducting, or make significant	changes in how it conduc	ts, any program	Yes X No
If "Yes," describe these cha Describe the organization's	anges on Schedule O. program service accomplishme	nts for each of its three is	raget program capicae ac ma	accured by
expenses. Section 501(c)(3)) and 501(c)(4) organizations ar enue, if any, for each program	e required to report the ar		
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4d Other program services (De	escribe on Schedule O.)			
(Expenses \$	including grants) (Revenue \$)
4e Total program service expe	nses 1,469,	155		

0.041		_	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		x	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization regale in direct or indirect political campaign activities on behalf of or in opposition to			
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	25.000		
O.S.	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	125555		
	assessments, or similar amounts as defined in Rev. Proc. 98-197 If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	22722		
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	1. 1		
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			1
	complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
C	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	*17.441		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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		X
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
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 17 If "Yes," complete Schedule I, Parts I and II	21		X

_ [art IV Checklist of Required Schedules (continued)				T	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individ	uals on	1		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		81070-0111-01111			
	organization's current and former officers, directors, trustees, key employees, and highest compens	ated				
	employees? If "Yes," complete Schedule J		25.00.000000000000000000000000000000000	23		X
24a						
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer	lines 2	4b			١.,
N.	through 24d and complete Schedule K. If "No," go to line 25a			24a		X
D	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception			24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the defease any tax-exempt bonds?	ie year		24c		
d		17		24d		
25a		E. P. (2. 4.)	nefit	William		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I			25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person	in a pn	or			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	990-E	Z?			
	If "Yes," complete Schedule L, Part I	4.23.4		25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to a	ny cum	ent			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%					
^7	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II			26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trus employee, creator or founder, substantial contributor or employee thereof, a grant selection committee.	And the Control of th	ву			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of the					
	persons? If "Yes," complete Schedule L, Part III	636		27		х
28	Was the organization a party to a business transaction with one of the following parties? (See the Se	chedule	•			-
V.	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).				١.,	
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contribution	utor? If	·			
	"Yes," complete Schedule L, Part IV	3.86.165		28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	O(HA)oras		28b		X
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?	? If				.,
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedu	do M		28c	Х	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or quali	0.0		29	Λ.	_
00	conservation contributions? If "Yes," complete Schedule M	lieu		30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Scheol	lule N.	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,		Vert 1 - 51 - 54 - 54	*******		
	complete Schedule N, Part II	i. Ceta e eradore		32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Re	gulation	ns			
	sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	E- 5155-		33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pa	rt II, III,			- 1	
25-	or IV, and Part V, line 1	2.5 10 5 5 10		34		X
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with	9		35a		<u>X</u>
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, limit			35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charita	11.0.0	15-11-11-11-20-11-2	335		
	related organization? If "Yes," complete Schedule R, Part V, line 2			36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	anizatio	on			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	Part V	7	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines	11b ar	nd			
-	19? Note: All Form 990 filers are required to complete Schedule O.	*****			X	
ra	rt V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part \	,				
	Check is observable of contains a response of note to any line in this Part		*************		Yes	No.
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	0		168	No
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and		limit .			
	reportable gaming (gambling) winnings to prize winners?	octores	****	1c		
DAA				Form	990	(2023)

Pa	art V Statements Regarding Other IRS Filings and Tax Compliance (contin	ued)			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0	_		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ms?	1160 11110 11110 11110 11110 111	2b		
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	000-000		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		Northern Control of the Control of t	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authori	ty over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial	l accoi	int)?	4a		X
b	If "Yes," enter the name of the foreign country	0.0000000	***************************************	-		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accoun	its (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	1-2-11		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?		5b		Х
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		C254 100 PM T 100 PM T 100 PM T	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	е				v
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	HIS OF		eh		
7	gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c).			6b		-
7	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	nonde				
a	and services provided to the payor?	joods		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ıs		- 10		
	required to file Form 8282?			7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file For		9 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h	l l	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine					
	sponsoring organization have excess business holdings at any time during the year?	agregia		8		
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the sponsoring organization make any taxable distributions under section 4966?	cresoro		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		_		
11	Section 501(c)(12) organizations. Enter:	1 1				
a	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources	l l				
-	against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		***************************************	12a		_
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		 - .	. 1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			42-		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.		XX * 1 (* X * 1 × 1) (* X *	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which					
b	the constitution in the word to force smalled broth plans	13ь		1 1		
_	Enter the amount of reserves on hand	13c		-	- 1	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	136		14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule	0.0	*************	14b	-	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner	2.0.0		140		
	excess parachute payment(s) during the year?			15		х
	If "Yes," see instructions and file Form 4720, Schedule N.			10		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incom	e?	16		X
15-50	If "Yes," complete Form 4720, Schedule O.	viii				
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activ	ities				
150	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

Part VI

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

 $|\mathbf{X}|$

Form 990 (2023) THE CALIFORNIA 4-H FOUNDATION

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

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

Section A. Governing Body and Management Yes Nο 14 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. 14 1b b Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 X 3 supervision of officers, directors, trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 6 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, Х 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a X a The governing body? X 86 b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses on Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a Х 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 X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c X 13 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a b Other officers or key employees of the organization 15b 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 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 17 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 | X | Another's website | X | Upon request | Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records. THE CALIFORNIA 4-H FOUNDATION 2801 SECOND STREET CA 95618 530-750-1389 DAVIS Form 990 (2023)

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 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.

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

(A) Name and title	(B) Average hours per week	box	x, unk icera	Pos check ess pe	rson i	than one is both an or/trustee)	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	organization (W-2# 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) CYNTHIA LYDON									
) ::	0.20			l					
CHAIR	0.00	X		X			0	0	0
(2) DR. STEVE OLMOS	0.20								
VICE CHAIR	0.00	X		X			0	0	0
(3) JUNE COLEMAN, ES									
***************************************	0.20								
SECRETARY/TREASURER	0.00	X		X			0	0	0
(4) CASEY ANDERSON	0.20								
MEMBER	0.00	X					0	0	0
(5) MARY THIELEKE JA	CKSON,	MB/	1						
	0.20								
MEMBER	0.00	X					0	0	0
(6) DR. GLENDA HUMIS	0.20						2		
MEMBER	0.00	X					0	0	0
(7) LYNN HUNTSINGER	0.20						100		
MEMBER	0.00	X					0	0	0
(8) JULIANNA LYDON	0.20	Ī							
MEMBER	0.00	X					0	0	0
(9) LYNN SCHMITT-MC		1					0		
MEMBER	0.00	x					0	0	0
(10) PATRICK HENLEY	0.00	1							
	0.20								
MEMBER	0.00	X					0	0	0
(11) GEOFFREY HOLBROO									
MEMBER	0.20	x					o	0	0

F0571 01/28/2025 12:14 PM Form 990 (2023) THE CZ												Page	e {
Part VII Section A. O	micers, Directors, 110	stee	s, n	(C)	oyee	S, a	nd Highest Compensated	Employees (continued)				_
(A)	(B)			check		than o		(D) Reportable	(E) Reportable	Foti	(F) mated a	mou sol	
Name and title	Average hours					is both or/trust		compensation from the	compensation from related		of othe	5	
	per week (list any	o in	3	Officer	\$	碧	Former	organization (W-2/	organizations (W-2/		from th	В	
	hours for related	Individual or director	Institutional	ª	епрюуве	oyse o	戛	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)		anization d organ		
	organizations below	trustee	estant le		yee	Highest compensated employee							
	dotted line)	ă	98			page							
(12) ELISABETH								iic.					
(12) MEMBER	0.20	x						0	0	,			0
(13) GARY CUSUM		_											_
(13)	0.00												
LIFE TIME MEMBER	0.00	X		_				0	0			*)	0
(14) GAIL KAUTZ	0.00												
(14) LIFE TIME MEMBER	0.00	х						0	0				0
	5,55												
(15)								-5					
(16)													
(17)													
	FILL HALL COLUMN												_
(18)	5 4 × 45 4 4 1 4 2 4 5 2 5 4 1 (5 2 5 5 5 5 5												
(19)	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX												
4b Oubtestel						Ш	_						_
1b Subtotal c Total from continuation	n sheets to Part VII.												_
d Total (add lines 1b and	1 1c)					5012	9						
 Total number of individure reportable compensation 			d to	thos	e lis	led a	bove	e) who received more than	\$100,000 of				
reportable compensation	I HOITI the organization	_	<u> </u>									res N	0
3 Did the organization list employee on line 1a? If								ee, or highest compensate	d		3	١,	K.
4 For any individual listed	on line 1a, is the sum	of re	eport	able	con	pens	atio	n and other compensation			-		
organization and related individual	organizations greater	than	\$15	0,00	07/	f "Ye.	s," c	omplete Schedule J for su	ch en		4		C
	line 1a receive or acc	crue	com	pens	ation	fron	n an	y unrelated organization or	individual	0-19344 -	-		
for services rendered to		es,	com	plete	Sci	hedul	e J	for such person			5	>	<
1 Complete this table for y	your five highest comp	ensa	ted i	nder	pend	ent c	ontr	actors that received more	than \$100,000 of				
	organization. Report co (A) ame and business address	mpe	nsat	ion f	or th	e ca	end	ar year ending with or with		ear.		(C)	
N	ame and business address							Descript	(B) ion of services		Com	(C) ensation	_
		_				_		3					_
-							,						
2 Total number of independence of independe								e listed above) who	0				

Form 990 (2023) THE CALIFORNIA 4-H FOUNDATION

		Check II	Sche	edule U cont	airis a	respons	e or note	to any line in this			
								(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from lax under sections 512-514
nts	1a	Federated camp	paigns		1a						
000	b	Membership du	es	************	1b	45					
A		Fundraising eve	0.00		1c						
<u>a</u>	d	Related organiz	ations		1d					100	
SES		Government grants (of All other contributions,			1e						
100	•	and similar amounts no			1f	1,5	35,369				
and Other Similar Amounts	g	Noncash contributions lines 1a-1f			1g \$	•	180,262				
al	h	Total. Add lines			THE IS			1,535,369			
	-						Business Code				
: و	2a										
5 60	b	V									
Revenue	C										
8	d										
	e			,							
		All other program									
	3	Total. Add lines Investment inco			7	The same of the sa	375,451164				V .
	Ť	other similar am	COLUMN TAKEN	P PARTICIPATION OF THE PARTICI	CARLOGUES.	CONTRACTOR CO.		93,979			93,979
- 9	4	Income from inv	A								
	5	Royalties					*********				
				(i) Real		(ii) Pe	ersonal				
- -	6a	Gross rents	6a					-			
	b	Less: rental expenses	6b								
-1		Rental inc. or (loss)	6c	100							
		Net rental incom Gross amount from	e or (-			20000000				
	-	sales of assets	l _	(i) Securities	,321	(11) (Other		3		
	h	other than inventory	7a	3	,321						
Ž	D	Less: cost or other basis and sales exps.	7b								
Other Revenue	_	Gain or (loss)	7c	5	, 321						
<u> </u>		Net gain or (loss		241 12 20 20				5,321	-		5,321
5 1		Gross income from	•	ising events	ГТ		(3,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0				
		(not including \$		-	1 1						
		of contributions rep	orted or	n line	1 1						
		1c). See Part IV, lir	ne 18		8a						
		Less: direct exp			8b						
		Net income or (I			events						
!	9a	Gross income fr			2						
		activities. See P		line 19	9a						
		Less: direct exp			9b		_				
1.		Net income or (vities	233717632					
10	ua	Gross sales of in returns and allow			10a						
	h	Less cost of go		A R SA B B B B B B	10b						
		Net income or (I		******							
		The state of the					Business Code				
₀ 1	1a										
E C	b	~ 000000000000000000000000000000000000									
Revenue	C	4.0000000000000000000000000000000000000			mercari						
		All other revenue			0.000	*******					
		Total. Add lines	_								
1:	2	Total revenue.	See in	structions				1,634,669	0	0	99,300

Statement of Functional Expenses Part IX

Do .	Check if Schedule O contains a response not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to domestic organizations		expenses	general expenses	ехрензез
•	and domestic governments. See Part IV, line 21				
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				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
	Fees for services (nonemployees):				
11	A A CONTRACTOR OF THE CONTRACT				
a	Management				
b	Legal	11,875		11,875	
C	Labelea	11,073		11,075	
d	Lobbying Designed fundaciona con ince. See Dest N./ line 17				
-	Professional fundraising services. See Part IV, line 17	-			
f	Investment management fees				
9	Other. (If line 11g amount exceeds 10% of line 25, column		Í		
	(A) amount, list line 11g expenses on Schedule O.)	22 226			22.226
12	Advertising and promotion	22,336			22,336
13	Office expenses	2,613			2,613
14	Information technology				
15	Royalties				
16	Occupancy	122			100
17	Travel	133			133
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	1 (50 050	1 460 455		100.004
21	Payments to affiliates	1,658,959	1,469,155		189,804
22	Depreciation, depletion, and amortization	000		005	
23	Insurance	807		807	
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.)	F00			
a	EDUCATION AND TRAINING	503		503	
b	DUES AND SUBSCRIPTIONS	200		200	
C	SUPPLIES	86			86
d	BANK SERVICE CHARGES	12		12	
e	All other expenses				
25	Total functional expenses, Add lines 1 through 24e	1,697,524	1,469,155	13,397	214,972
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				
DAA	following SOP 98-2 (ASC 958-720)				- 000

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 278,978 236,027 1 Cash-non-interest-bearing 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 173,681 3 135,008 4 Accounts receivable, net 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 7 Notes and loans receivable, net 8 8 Inventories for sale or use 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 10a basis. Complete Part VI of Schedule D 10b b Less: accumulated depreciation 10c 11 Investments—publicly traded securities 11 1,681,136 1,873,630 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 15 Other assets. See Part IV, line 11 2,133,795 2,244,665 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 0 26 X Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 1,899,818 27 Net assets without donor restrictions 1,871,352 233,977 28 Net assets with donor restrictions 373,313 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds 31 2,133,795 32 Total net assets or fund balances 2,244,665 2,133,795 Total liabilities and net assets/fund balances 2,244,665

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

Form 990 (2023)

3a

X

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

Open to Public Inspection

Employer identification number Name of the organization THE CALIFORNIA 4-H FOUNDATION 23-7327765 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 12 one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported (iv) is the organization (iii) Type of organization (v) Amount of monetary (vi) Amount of organization (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) (A) (B) (C) (D) (E)

Total

Page 2

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,083,569	1,315,863	1,389,966	1,645,346	1,535,369	6,970,113
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	1,083,569	1,315,863	1,389,966	1,645,346	1,535,369	6,970,113
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						4 505 050
•	AND COMPANY OF THE PARTY OF THE						1,695,059
Sec	Public support. Subtract line 5 from line 4				4		5,275,054
_	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	1,083,569	1,315,863	1,389,966	1,645,346	1,535,369	6,970,113
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	72,258	76,486	75,759	94,106	93,979	412,588
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.)						
11	Total support. Add lines 7 through 10						7,382,701
12	Gross receipts from related activities, etc.	(see instructions)				12	461,590
13	First 5 years. If the Form 990 is for the or	ganization's first, se	cond, third, fourth,	or fifth tax year as	a section 501(c)	CONTRACTOR -	
_	organization, check this box and stop here					************	
Sec	tion C. Computation of Public Su			WIENLY		(
14	Public support percentage for 2023 (line 6,			(f))		14	71.45 %
15	Public support percentage from 2022 Sche					15	72.36%
16a	33 1/3% support test — 2023. If the organ				33 1/3% or more, o	check this	[22]
Ye.C	box and stop here. The organization quali		100				X
b	33 1/3% support test — 2022. If the organization of this box and stop here. The organization of			to the second se	5 is 33 1/3% or m	ore, check	
17a	10%-facts-and-circumstances test — 20				a or 16b and line	14 is	500 00000000000000000000000000000000000
,,,,	10% or more, and if the organization meet Part VI how the organization meets the fa	s the facts-and-circ	umstances test, ch	eck this box and s	top here. Explain	in	
	organization				a passery suppor	tou	
b	10%-facts-and-circumstances test — 20 15 is 10% or more, and if the organization	meets the facts-and	d-circumstances te	st, check this box	and stop here. E	xplain .	XXXIII no
	in Part VI how the organization meets the	facts-and-circumsta	nces test. The org	anization qualifies	as a publicly supp	ported	
18	organization Private foundation. If the organization did	not check a boy or	line 13 16a 16h	17a or 17h choc	k this boy and car		
10	instructions	THO CHOCK & DOX OF	i inic 15, 10a, 10b	Tra, or Tru, cited	n una DOX and See		.00001000

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.)

	tion A. Public Support							
Caler	idar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023		(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose				-			
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons					,		
b	received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	72						
	Add lines 7a and 7b		-	-			-	
8	Public support. (Subtract line 7c from line 6.)	F.						
Sec	tion B. Total Support		l.					
_	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023		(f) Total
9	Amounts from line 6	(4) 2013	(6) 2020	(6) 2021	(4) 2022	(6) 2023	#	(i) Total
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	_						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
c	Add lines 10a and 10b						_	
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on			197				
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
13	Total support. (Add lines 9, 10c, 11,							
14	and 12.) First 5 years. If the Form 990 is for the or	ganization's firet	second third fourt	h or fifth tay year	as a section 501/r	V3)		
14	organization, check this box and stop here	CONTRACTOR OF THE PERSON NAMED IN COLUMN TO PERSON NAMED IN CO.	second, umu, roun	ii, or mur tax year	as a section some	1(3)		
Sec	tion C. Computation of Public Su		tage	******			B33333	اط حسينت
15	Public support percentage for 2023 (line 8,			nn (f))			15	%
16	Public support percentage for 2023 (line 6,	10000		(III (I))	**(**,*,*,*,*,*,*,*,*,*,*,*,*,*,*,*,*,*		16	
_	tion D. Computation of Investme				***************************************			70
17	Investment income percentage for 2023 (li			3. column (f))			17	%
	Investment income percentage from 2022 S					an enconstruction (1	18	%
19a	33 1/3% support tests — 2023. If the orga	Authorities and the same of th		ne 14, and line 15	is more than 33 1/	AND DESCRIPTION OF THE PARTY OF		
	17 is not more than 33 1/3%, check this bo							
b	33 1/3% support tests — 2022. If the orga	anization did not c	heck a box on line	14 or line 19a, an	d line 16 is more t	han 33 1/3%, a		
	line 18 is not more than 33 1/3%, check this				- Interior		(A) (1 = 16 a)	nortestan
20	Private foundation. If the organization did	not check a box	on line 14, 19a, or	19b, check this bo	ox and see instruct	ions		

Schedule A (Form 990) 2023

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 on 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. AI	Supporting	Organ	izations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- 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.
- 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
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes." and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- 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)
- 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).
- 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?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 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).
- 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).
- 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.
- Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- 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.
- 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.
- Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b	(Form 99	

Page 5

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
C	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		
Secti	on B. Type I Supporting Organizations			
		_	Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		1	
Cooti	supervised, or controlled the supporting organization.	2		
Secu	on C. Type II Supporting Organizations	1	Man	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		Yes	No
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	1 1		
	는 것 하게 되었다면 가는 사람들이 있습니다는 사람들이 하시되었다. 그는 이 회사에 되었다. 보고 등을 되고 있었다면 하시고 있는 것은 그는 사람들은 가입니다. 이 전에 가입니다. 그리고 하는 것이다.			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	11		
Secti	on D. All Type III Supporting Organizations			_
	on at the type in employing enganizations		Yes	No
1.	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	140
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	1 1		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	11		
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	1 1		
	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		
Secti	on 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	s)		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see inst	ructions)	V	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,	1 1		
	how the organization was responsive to those supported organizations, and how the organization determined	1 1		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's		I	
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If	1 1	1	
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would	1 1		
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	1 1		
a		1		
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		

1	Check here if the organization satisfied the Integral Part Test as a qualifying t instructions. All other Type III non-functionally integrated supporting organizations.	the state of the state of the state of the	070 (explain in Part VI).	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (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		
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	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		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		
Secti	on 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		

Par	t V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organiza	tions (continued)		1.030
Sect	ion D – Distributions	9			Current Year
1	Amounts paid to supported organizations to accomplish exempt purpo	ses		1	
2	Amounts paid to perform activity that directly furthers exempt purposes organizations, in excess of income from activity	of supported		2	
3	Administrative expenses paid to accomplish exempt purposes of supp	orted organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required-provide deta	ails 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 organizations	ntion is responsive		8	
	(provide details in Part VI). See instructions.				
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023		(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required-explain in Part VI). See instructions.				,
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
c	From 2020				
d	From 2021				
e	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
- 1	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from				
	Section D, line 7: \$				
a	Applied to underdistributions of prior years		(1)		
b	Applied to 2023 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		2)		
7	Excess distributions carryover to 2024. Add lines 3j and 4c.				
8	Breakdown of line 7:				
a	Excess from 2019				
b	Excess from 2020		0		
С	Excess from 2021				
d	Excess from 2022				
е	Excess from 2023				

Schedule A (Form	n 990) 2023	THE	CALIFORNIA	4-H	FOUNDATION	23-	7327765	Page 8
Part VI	Supplemental III, line 12; Part B, lines 1 and 2 3a, and 3b; Pa	Information IV, Section A 2; Part IV, Sec rt V, line 1; Pa	. Provide the exp A, lines 1, 2, 3b, 3 ction C, line 1; Pa art V, Section B, I	lanations Bc, 4b, 4 art IV, Se line 1e; f	s required by Part I c, 5a, 6, 9a, 9b, 9d ection D, lines 2 an Part V, Section D, I itional information.	II, line 10; Part	II, line 17a or d 11c; Part IV, ection E, lines 8; and Part V,	17b; Part Section 1c, 2a, 2b,
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

OMB No. 1545-0047

Open to Public Inspection Employer identification number

T	HE CALIFORNIA 4-H FOUNDATION	23-7327765
Pa	rt I Organizations Maintaining Donor Advised Fu Complete if the organization answered "Yes" on	inds or Other Similar Funds or Accounts Form 990, Part IV, line 6.
		(a) Donor advised funds (b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	**
5	Did the organization inform all donors and donor advisors in writing the	
	funds are the organization's property, subject to the organization's ex	
6	Did the organization inform all grantees, donors, and donor advisors in	
	only for charitable purposes and not for the benefit of the donor or do	
Da	conferring impermissible private benefit? rt II Conservation Easements	
F a	Complete if the organization answered "Yes" on	Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (chec	
	Preservation of land for public use (for example, recreation or ed	
	Protection of natural habitat	Preservation of a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified cons	ervation contribution in the form of a conservation
	easement on the last day of the tax year.	Held at the End of the Tax Ye
a		2a 2a
b	Total acreage restricted by conservation easements	
	Number of conservation easements on a certified historic structure in	VANDENCE CONTROL DE CONTRA DE LA LA CARTA DE LA CARTA DEL CARTA DEL CARTA DE LA CARTA DEL CARTA DEL CARTA DE LA CARTA DE LA CARTA DE LA CARTA DEL CARTA DEL CARTA DEL CARTA DE LA CARTA DE LA CARTA DE LA CARTA DE LA CARTA DEL CARTA DELA
d	Number of conservation easements included on line 2c acquired after	The Mark of the Ma
_	on a historic structure listed in the National Register	
3	Number of conservation easements modified, transferred, released, e	xtinguished, or terminated by the organization during the
7	tax year	No. of the last of
4	Number of states where property subject to conservation easement is	
5	Does the organization have a written policy regarding the periodic mo	viliconing, inspection, nandling of
	violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling	FOR NOTICE OF MADE OF PROGRAMMENT OF THE SECOND CONTROL OF THE SEC
O	Stati and volunteer flours devoted to monitoring, inspecting, narrolling	or violations, and enforcing conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of vi	plations and enforcing conservation assements during the year
•	Amount of expenses incurred in monitoring, inspecting, harding of vi-	olations, and enforcing conservation easements during the year
8	Does each conservation easement reported on line 2d above satisfy	the requirements of section 170(h)(4)(B)(i)
ŭ	and section 170(h)(4)(B)(ii)?	Yes N
9	In Part XIII, describe how the organization reports conservation easer	
	sheet, and include, if applicable, the text of the footnote to the organi	
	organization's accounting for conservation easements.	
Pa	rt III Organizations Maintaining Collections of Art Complete if the organization answered "Yes" on	Historical Treasures, or Other Similar Assets Form 990, Part IV, line 8.
1a	If the organization elected, as permitted under FASB ASC 958, not to	report in its revenue statement and balance sheet works
	of art, historical treasures, or other similar assets held for public exhib	
	service, provide in Part XIII the text of the footnote to its financial stat	
b	If the organization elected, as permitted under FASB ASC 958, to rep	
	art, historical treasures, or other similar assets held for public exhibition	
	provide the following amounts relating to these items.	
		\$
		S S S S S S S S S S S S S S S S S S S
2	If the organization received or held works of art, historical treasures, of	
	following amounts required to be reported under FASB ASC 958 relat	
a		*
b	Assets included in Form 990, Part X	A STATE OF THE PROPERTY OF THE

	Collections of			- C41	Cimel	A		00-17		age a
Part III Organizations Maintaining							sets (contin	uea)	
Using the organization's acquisition, accessic collection items (check all that apply).	on, and other records	s, check any or the ic	mowing that m	ake signino	ant use	OI IIS				
a Public exhibition	4 🗍	Loop or ovehange pr	oarona							
The second second		Loan or exchange pro Other								
and the second of the second o	•	Other			100000	00000				
Preservation for future generations Provide a description of the organization's co	olloctions and avalain	how they further the	organization's	overnet e	umaca ii	a Dort				
XIII.	mechons and explain	now they further the	organizations	exempt be	urpose ii	i Pait				
5 During the year, did the organization solicit of	or receive denations	of art historical trace	iree or other	cimilar						
assets to be sold to raise funds rather than t								□ v _i	es l	☐ No
Part IV Escrow and Custodial Art		out of the organization	II 3 CONOCUOITI			HILL KA				140
Complete if the organization 990, Part X, line 21.		on Form 990, Pa	art IV, line 9	, or repo	rted ar	am	ount on	Forn	a	
1a Is the organization an agent, trustee, custodi	ian or other intermed	iary for contributions	or other asset	s not						
included on Form 990, Part X?		,						□ Ye	es [No
b If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table.					3-300-0			
TANGLED CO. C.	A CONTROL OF CONTROL WAS A STATE OF THE STAT	Pro-Sunday Community Str.					1	Amoun	t	_
c Beginning balance	wa wewwerm					1c				
d Additions during the year						1d				
Distributions during the year						1e				
f Ending balance						1f				
2a Did the organization include an amount on F					-512-31			Ye	18	No
b If "Yes," explain the arrangement in Part XIII.				Company of the Compan		*1 *** 1	birerel			1
Part V Endowment Funds										
Complete if the organization	answered "Yes"	on Form 990, Pa	art IV, line 1	0.						
	(a) Current year	(b) Prior year	(c) Two year	rs back	(d) Three	e years	back	(e) Fou	r years	back
1a Beginning of year balance										
b Contributions										
c Net investment earnings, gains, and										
losses										
d Grants or scholarships										
e Other expenditures for facilities and										
programs							4			
f Administrative expenses										
g End of year balance										
2 Provide the estimated percentage of the curr	ent year end balance	(line 1g. column (a))	held as							
a Board designated or quasi-endowment		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
b Permanent endowment %										
c Term endowment %		*.								
The percentages on lines 2a, 2b, and 2c sho	ould equal 100%				27					
3a Are there endowment funds not in the posse		tion that are held and	administered	for the						
organization by:	and at the organization	and the same		ioi uio				ſ	Yes	No
(i) Unrelated organizations?								3a(i)	100	140
(ii) Related organizations?	erecentario i tra lateri re	0.004% (0046470100221046)					2.5.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2	3a(ii)		
b If "Yes" on line 3a(ii), are the related organiza	ations listed as requir	ed on Schedule R?			eser sees:		restre :	3b	_	
4 Describe in Part XIII the intended uses of the				01500111111		10000	Section :			,
Part VI Land, Buildings, and Equi		MILLIAN IGNOS.				_				
Complete if the organization		on Form 990 Pa	rt IV line 1	la See l	Form 9	an r	Part X	line 1	n	
Description of property	(a) Cost or other b				cumulated	50, 1		d) Book		
	(investment)	(oth	01833		eciation		· `	u) Dook	THING	
1a Land		χο		- Lapi			-			
b Buildings						_				
c Leasehold improvements							-			
CONTRACTOR AND									_	_
d Equipment e Other							-			_
Total. Add lines 1a through 1e. (Column (d) must e	agual Form 900 - Dost	Y line 100 column f	R))							
Total. Add lines to unough re. (Column (a) must e	quai roitti 990, Patt	A, IIII TUC, COIUITIN (I	U))							

	Investments – Other Securities Complete if the organization answered "Yes" on Fe	orm 990. Part IV. line	11b. See Form 990. Part X line 12.
	(a) Description of security or category	(b) Book value	(c) Method of valuation:
	(including name of security)		Cost or end-of-year market value
Financial	derivatives		
Closely he	eld equity interests	457007	
Other I	NVESTMENT - OTHER SECURITIES	1,873,630	MARKET
(A)	1111 - 112 1 - 1110103 - 111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
(B)			
(C)			
(D)			
(E)			
(F)			
(G) (H)	FOR THE PROPERTY OF THE PROPER		
	n (b) must equal Form 990, Part X, line 12, col. (B))	1,873,630	
Part VIII	Investments - Program Related	2/0.0/000	
art viii	Complete if the organization answered "Yes" on Fe	orm 990. Part IV. line	11c. See Form 990. Part X. line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation:
	The second of the second		Cost or end-of-year market value
1)	:		
2)			
3)			
1)			
5)			
6)			
7)			
B)			
9)	Man Control of the Co		
tal (Colum			
	n (b) must equal Form 990, Part X, line 13, col. (B))		
	Other Assets	orm 000 Part IV line	11d Soc Form 000 Dort V line 15
	Other Assets Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line	
Part IX	Other Assets	orm 990, Part IV, line	11d. See Form 990, Part X, line 15.
Part IX	Other Assets Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line	
Part IX	Other Assets Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line	
Part IX	Other Assets Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line	
Part IX	Other Assets Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line	
Part IX	Other Assets Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line	
Part IX 1) 2) 3) 4) 5)	Other Assets Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line	
Part IX	Other Assets Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line	
Part IX	Other Assets Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line	
Part IX (1) (2) (3) (4) (5) (7) (8) (9) (1) (1) (2) (3) (4) (5) (5) (7) (6) (7) (7) (8) (7) (8) (8) (9) (9) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	Other Assets Complete if the organization answered "Yes" on Form (a) Description (a) Description (b) must equal Form 990, Part X, line 15, col. (B))	orm 990, Part IV, line	
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Sche	Edule D (Form 990) 2023 THE CALIFORNIA 4-H FOUND	ATION 23		Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial S Complete if the organization answered "Yes" on Form		nue per Return	
1	Total revenue, gains, and other support per audited financial statements	((*1.0*)(*1.0*)(*1.0*)(*1.0*)	25.11.11.11.11.11.11.11.11.11.11.11.11.11	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	F 187		
a	Net unrealized gains (losses) on investments			
b		2b		
C	PART P	2c		
d	URAN - AND A - A CONTROL - A CONTROL - AND A C	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		X111.01.51.11.151	
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			
b	Other (Describe in Part XIII.)	4b	4.	
C	Add lines 4a and 4b			
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12. art XII Reconciliation of Expenses per Audited Financial		>-0000101000000	
Г	Complete if the organization answered "Yes" on Form		enses per Keturn	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	i ii		
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIII.)			
	Add lines 2a through 2d		2e	
3			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	(2)		
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4a 4b		
b	Other (Describe in Part XIII.) Add lines 4a and 4b	4b	4c	
b c 5	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	4b	4c 5	
b c 5	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1 Int XIII Supplemental Information	4b 8)	5	
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Schedule D (Form 990) 2023 THE CALIFORNIA 4-H FOUNDATION	23-7327765	Page 5
Part XIII Supplemental Information (continued)		
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SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

90, Part IV, lines 29 or 30.

Department of the Treasury Internal Revenue Service Name of the organization

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

Open To Public Inspection

OMB No. 1545-0047

THE CALIFORNIA 4-H FOUNDATION 23-7327765 Types of Property Part I (a) (b) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art -- Works of art 2 Art - Historical treasures 3 Art - Fractional interests Books and publications 5 Clothing and household goods Cars and other vehicles 7 Boats and planes R intellectual property 9 Securities — Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, 11 or trust interests 12 Securities — Miscellaneous Qualified conservation 13 contribution — Historic structures Qualified conservation contribution — Other Real estate - Residential Real estate - Commercial 16 17 Real estate - Other 18 Collectibles 19 Food inventory Drugs and medical supplies 20 **Taxidemy** 21 22 Historical artifacts 23 Scientific specimens Archeological artifacts 24 25 Other (IN KIND SERVICE) 1 180,262 26 Other (27 Other (28 Other (29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a X b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? X 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X 32a If "Yes," describe in Part II, If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Schedule M (For	m 990) 2023 THE	CALIFORNIA	4-H	FOUNDATION	23-73277	65 Pa	age 2
Part II	Supplemental the organization	Information. Pro	ovide the art I, colu	information require ımn (b), the numb	ed by Part I, lines 30b, 33 er of contributions, the n	2b, and 33, and whether umber of items received,	
;	or a combinatio	n of both. Also co	ompiete ti	nis part for any ac	Iditional information.		
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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.

2023

Inspection

Open to Public

Department of the Treasury Internal Revenue Service

THE CALIFORNIA 4-H FOUNDATION

Employer identification number

23-7327765

FORM 990 - ORGANIZATION'S MISSION

THE MISSION OF THE CALIFORNIA 4-H FOUNDATION IS TO STRENGTHEN THE IMPACT OF LOCAL 4-H EFFORTS THROUGHOUT CALIFORNIA BY RAISING FUNDS FOR ACTIVITIES OF THE UNIVERSITY OF CALIFORNIA 4-H YOUTH DEVELOPMENT PROGRAM STATEWIDE, AND IN COUNTIES AND CITIES ACROSS CALIFORNIA. THE UNIVERSITY OF CALIFORNIA 4-H YOUTH DEVELOPMENT PROGRAM ENGAGES YOUTH IN REACHING THEIR FULLEST POTENTIAL WHILE ADVANCING THE FIELD OF POSITIVE YOUTH DEVELOPMENT.

FORM 990 - ADDITIONAL INFORMATION

OTHER INFORMATION RELATING TO DESIGNATED DONATIONS AND OPERATING COSTS:

A MAJORITY OF THE OF DONATIONS MADE TO THE CALIFORNIA 4-H FOUNDATION GO

BACK TO THE 4-H COUNTY, PROGRAM, COUNCIL, OR CLUB WHERE THE DONOR

DESIGNATES. THE CALIFORNIA 4-H FOUNDATION IS AN OFFICIAL SUPPORT GROUP OF

THE UNIVERSITY OF CALIFORNIA. THE UNIVERSITY OF CALIFORNIA SUBSIDIZES A

PORTION OF THE CALIFORNIA 4-H FOUNDATION'S OVERHEAD COSTS INCLUDING STAFF

SALARIES AND OPERATING COSTS. THIS SUBSIDY IS A PERCENTAGE OF THE ESTIMATED

OPERATING COSTS OF THE FOUNDATION.

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT

THE FOUNDATION RAISES PRIVATE FUNDS TO SUPPORT, STRENGTHEN, AND GROW THE

UNIVERSITY OF CALIFORNIA 4-H YOUTH DEVELOPMENT PROGRAM OFFERED IN

COMMUNITIES ACROSS THE STATE. THE FOUNDATION ALSO WORKS WITH 4-H STAFF AND

VOLUNTEERS TO STRENGTHEN FUNDRAISING CAPACITY STATEWIDE AND IN LOCAL

COMMUNITIES BY PROVIDING TRAINING AND ASSISTANCE IN FUNDRAISING AND FUND

DEVELOPMENT PLANNING. THE FOUNDATION PROVIDES MARKETING SUPPORT TO INCREASE For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2023

AWARENESS ABOUT THE DEPTH AND BREADTH OF 4-H PROGRAMING AND THE IMPACTS ACHIEVED BY 4-H FOR INDIVIDUAL CHILDREN, FAMILIES, AND COMMUNITIES IN CALIFORNIA.

THE MISSION OF THE UNIVERSITY OF CALIFORNIA 4-H YOUTH DEVELOPMENT PROGRAM IS TO ENGAGE YOUTH IN REACHING THEIR FULLEST POTENTIAL WHILE ADVANCING THE FIELD OF YOUTH DEVELOPMENT. APPROXIMATELY 60,000 YOUTH BETWEEN THE AGES OF 5 TO 19 SUPPORTED BY OVER 6,400 TEEN AND ADULT VOLUNTEERS PARTICIPATE IN 4-H THROUGH A VARIETY OF PROGRAMS INCLUDING CLUB-BASED PROJECTS, COMMUNITY SERVICE ACTIVITIES, CAMPS, CONFERENCES, AND SCHOOL ENRICHMENT PROGRAMS TAILORED TO MEET THE NEEDS OF DIVERSE COMMUNITIES AND POPULATIONS ACROSS CALIFORNIA.

ALL 4-H PROGRAMS ARE DESIGNED TO CREATE LARGE AND DIVERSE CORPS OF
ARTICULATE AND COMPASSIONATE YOUNG LEADERS GROUNDED IN RESEARCH-BASED
KNOWLEDGE OF THE ISSUES AFFECTING OUR WORLD TODAY, SUCH AS CLIMATE CHANGE,
WATER USAGE, ALTERNATIVE ENERGY, FOOD SAFETY, AGRICULTURAL AND
ENVIRONMENTAL SCIENCE, TECHNOLOGY, AND COMMUNITY ENGAGEMENT. 4-H DEVELOPS
LEADERSHIP, CITIZENSHIP, AND LIFE SKILLS IN ITS PARTICIPANTS AT EVERY LEVEL
FROM THE CHILDREN WHO PARTICIPATE TO THE TEENS AND ADULT VOLUNTEERS WHO
SUPPORT THEM. THE FOCUS OF ALL 4-H PROGRAMS IS POSITIVE YOUTH DEVELOPMENT
THROUGH ACTIVITIES IN SCIENCE, TECHNOLOGY, ENGINEERING, MATH, HEALTHY
LIVING, AND CITIZENSHIP.

- 4-H PROGRAMS ARE DISTINGUISHED BY A COMBINATION OF ESSENTIAL ELEMENTS:
- -PROVIDING OPPORTUNITIES FOR YOUTH AND YOUNG ADULTS TO PRACTICE LEADERSHIP BY BEING A LEADER IN A VARIETY OF CONTEXTS AND SETTINGS;
- -PROMOTING POSITIVE YOUTH-ADULT PARTNERSHIPS THAT FOSTER SHARED DECISION MAKING;
- -LEARNING-BY-DOING THROUGH RESEARCH-BASED ACTIVITIES THAT PROMOTE INQUIRY

PAGE 1 OF 2

Employer identification number

THE CALIFORNIA 4-H FOUNDATION

AND EXPERIENTIAL LEARNING; AND

-PROMOTING AND SUPPORTING CIVIC ENGAGEMENT AND CONTRIBUTION TO ONE'S SELF, COMMUNITY, AND THE WORLD.

FORM 990, PART VI, LINE 3 - MANAGEMENT DELEGATED

THE CALIFORNIA 4-H FOUNDATION, AN INDEPENDENT 501(C)(3) ENTITY, IS AN

OFFICIALLY RECOGNIZED SUPPORT GROUP OF THE UNIVERSITY OF CALIFORNIA AND

OPERATES WITHIN THE DIVISION OF AGRICULTURE AND NATURAL RESOURCES (UCANR).

FOUNDATION STAFF MEMBERS ARE PART OF THE LARGER UCANR DEVELOPMENT SERVICES

TEAM, AND THEREFORE THE UNIVERSITY PROVIDES FUNDING TO SUPPORT THE

OPERATIONS AND FUNDRAISING COSTS OF THE FOUNDATION. THE FOUNDATION'S

PRIMARY ROLE IS TO RAISE PRIVATE SUPPORT FOR THE STATEWIDE AND LOCAL COUNTY

UNIVERSITY OF CALIFORNIA 4-H PROGRAMS. THE FOUNDATION HAS A BOARD OF

DIRECTORS WHO WORKS CLOSELY WITH FOUNDATION DIRECTOR TO HELP RAISE

RESOURCES FOR AND AWARENESS ABOUT THE CALIFORNIA 4-H PROGRAM.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 REVIEW PRIOR TO FILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

ANNUALLY THE BOARD OF DIRECTORS REVIEWS THE POLICY TO VERIFY THERE ARE NO

CONFLICTS AND SIGNS THE POLICY. IF A MEMBER OF THE BOARD HAS A CONFLICT

WITH RESPECT TO A TRANSACTION THEY ARE NOT ALLOWED TO VOTE ON THE

TRANSACTION.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION UPON REQUEST.

Form 990

Two Year Comparison Report

For calendar year 2023, or tax year beginning 07/01/23

, ending 06/30/24

2022 & 2023

Name

Taxpayer Identification Number

3	THE CALIFORNIA 4-H FOUNDATION				3-7327765
			2022	2023	Differences
	1. Contributions, gifts, grants	1.	1,645,346	1,535,3	69 -109,977
	2. Membership dues and assessments	2.			
	3. Government contributions and grants	3.			
9 _	4. Program service revenue	4.			
C	5. Investment income	5.	111,235	93,9	79 -17,256
>	Proceeds from tax exempt bonds	6.			
Ľ	7. Net gain or (loss) from sale of assets other than inventory	7.		5,3	21 5,321
	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	11.			
	12. Total revenue. Add lines 1 through 11	12.	1,756,581	1,634,6	69 -121,912
	13. Grants and similar amounts paid	13.			
	14. Benefits paid to or for members	14.			
SO ON	15. Compensation of officers, directors, trustees, etc.	15.			
8	16. Salaries, other compensation, and employee benefits	16.			
e L	17. Professional fundraising fees	17.			
χ	18. Other professional fees	18.	10,750	11,8	75 1,125
ш	19. Occupancy, rent, utilities, and maintenance	19.			
	20. Depreciation and Depletion	20.			
	21. Other expenses	21.	1,522,823	1,685,6	
	22. Total expenses. Add lines 13 through 21	22.	1,533,573	1,697,5	
	23. Excess or (Deficit). Subtract line 22 from line 12	23.	223,008	-62,8	
	24. Total exempt revenue	24.	1,756,581	1,634,6	69 -121,912
	25. Total unrelated revenue	25.			
Ö	26. Total excludable revenue	26.	111,235	99,3	
Ha	27. Total assets	27.	2,133,795	2,244,6	65 110,870
ğ	28. Total liabilities	28.		7	
드	29. Retained earnings	29.	2,133,795	2,244,6	65 110,870
e C	30. Number of voting members of governing body	30.	12	14	
ō	31. Number of independent voting members of governing body	31.	12	14	
	32. Number of employees	32.	0	0	
	33. Number of volunteers	33.	12	14	

_{Form} 990		Tax F	Tax Return History			2023
Name THE CALIFORNIA		4-H FOUNDATION			Employer 23-7	Employer Identification Number 23-7327765
	2019	2020	2021	2022	2023	2024
Contributions, gifts, grants		1,315,863	1,389,966	1,645,346	1,535,369	
Membership dues						
Program service revenue						
Capital gain or loss					5,321	
Investment income		76,486	350,355	111,235	93,919	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Total revenue		1,392,349	1,740,321	1,756,581	1,634,669	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.						
Other compensation						
Professional fees			10,694	10,750	11,875	
Occupancy costs						
Depreciation and depletion						
Other expenses		1,584,871	1,534,387	1,522,823	1,685,649	
Total expenses		,584,	1,545,081	- N	1,697,524	
Excess or (Deficit)		-192,522	195,240	223,008	-62,855	
Total exempt revenue		1,392,349	1,740,321	1,756,581	1,634,669	
Total unrelated revenue						
Total excludable revenue		76,486	350,355	111,235	99,300	
Total Assets		2,046,955	1,820,991	2,133,795	2,244,665	
Total Liabilities		204,317				
Net Find Balances		1.842.638	1.820.991	2.133.795	2 244 66F	