Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Α	For t	the 2021 calend	dar year, or tax	year begi	nning 7/()1	, 202	1, and endin	g 6/	30	,	20 2022	
В	Check	if applicable:	С							D Employ	er identif	ication number	
	А	Address change	INTERNATI	ONAL CO	YTINUMMC	FOUNDAT	CION			33-	04578	358	
	\square_{N}	lame change	2505 N AV							E Telepho			
	-	nitial return	NATIONAL	CITY, (CA 91950					619	-336-	-2250	
	\vdash	inal return/terminated								017	330	2230	
	-	mended return								G Gross re		. 10 420	0 E 1
	\vdash	1	F Name and addr	roce of princip	al officer:			I	H(a) Is this	a group retur			177
	ША	application pending			oai officer.							<u></u> ⊢ . • •	No No
_	Tov	avamet atatua	SAME AS C X 501(c)(3)	501(c) (\ _ (i)	noort no \	4047(0)(1)	or 527	If "No,	I subordinates " attach a list.	See inst	ructions.	Ш.
÷		-exempt status:		. , ,) 	nsert no.)	4947(a)(1)	01 327					
<u>, , , , , , , , , , , , , , , , , , , </u>			W.ICFDN.OI		1	T	1	<u> </u>	(-/	exemption nu			
K		m of organization:	X Corporation	Trust	Association	Other ►		L Year of formati	on: 199	U IMIS	tate of le	gal domicile: CA	L
Pa	rt I	Summar					11 11 11	- 110011 34	2000	DADDED	о по	001111EGE	
	1		be the organiza										
ce		PEOPLE,	IDEAS, ANI	D TNAF?	STMENTS I	N THE T	RANSFOR	WATI VE F	OWER	OF COMP	IONTI	Y	
Activities & Governance										,			
/eri	2	Check this bo	if the	orgonizati	on discontinu		tions or di	onesed of me	ro than (DE 0/ of ito			
30	3		oting members								3	ets.	۵
8	4		dependent votir								4		9
ies	5		of individuals								5		16
ivit	6		of volunteers (6		15
Act	7a		ed business rev								7a		0.
	b	Net unrelated	l business taxal	ble income	e from Form 9	90-T, Part I	l, line 11	.			7b		0.
										Prior Year		Current Y	ear
a)	8	Contributions	and grants (Pa	art VIII, Iind	e 1h))		. 12	2,801,7	31.	18,971	,726.
Revenue	9	Program serv	rice revenue (Pa	art VIII, lin	ne 2g)								•
eve	10		come (Part VIII							930,8	70.	456	,470.
ď	11		e (Part VIII, col							1,5			855.
	12		e – add lines 8							3,734,1		19,429	•
	13		imilar amounts							1,118,7	21.	12,642	,276.
	14		to or for memb										
S	15	Salaries, other	er compensation	n, employe	ee benefits (F	art IX, colu	mn (A), lin	es 5-10)		1,098,3	44.	1,208	,348.
Se	16 a	Professional	fundraising fees	s (Part IX,	column (A),	line 11e)							
Expenses	b	Total fundrais	sing expenses (Part IX. co	olumn (D), lin	e 25) ►		381,457.					
Ě	17		es (Part IX, col		•					2,065,4	66	2,121	112
	18		es. Add lines 13							4,282,5		15,971	
	19		expenses. Sub		•					-548,4		3,457	
- Se		Trevende 1655	скрепаса. Оп.	otract inic	10 110111 11110	12				ng of Curren		End of Ye	
ance	20	Total assets ((Part X, line 16))						9,422,2		32,650	
\sse Bala	21		s (Part X. line 2							2,336,7		4,534	
Net Assets Fund Balance	22	Not accets or	fund balances.	Subtract	lina 21 fram l	line 20						28,116	•
	rt II	Signatur		. Subtract	iiile Zi iioiii i	1116 20			·	7,085,5	22.	28,110	, 183.
comp	er pena olete. D	Declaration of prepa	eclare that I have exa erer (other than office	amined this re er) is based or	eturn, including acc n all information o	companying scr if which prepare	r has any knov	atements, and to t vledge.	the best of r	ny knowleage	and belie	et, it is true, correct	i, and
Cic	ın	Signatu	re of officer						D	ate			
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110			ISA AURORA print name and title		<u> </u>				PKES	IDENT 8	x CEC)	
		31	reparer's name		Preparer's sign	nature		Date		Chools	ie F	PTIN	
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US	e Oi	Firm's addre		4TH AVE								0783983	
		:: ::			CA 92103	2.0 : :				Phone no.	619-	615-5380	1
iviay	/ tne	IKS discuss th	is return with th	ne prepare	er snown abov	/e / See inst	tructions					X Yes	No

Par		Check if Schedule O contains a response or note to any line in this Part III	Χ
1	Brief	fly describe the organization's mission:	لثثا
		FALYZE CHARITABLE GIVING INTERNATIONALLY WITH AN EMPHASIS ON LATIN AMERICA.	
	D: 1.1		
2		he organization undertake any significant program services during the year which were not listed on the prior	
		n 990 or 990-EZ?	0
		the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X N	^
3		es," describe these changes on Schedule O.	0
4	Desc	cribe the organization's program service accomplishments for each of its three largest program services, as measured by expenses	ŝ.
	Sect	ion 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses revenue, if any, for each program service reported.	,
	anu	revenue, il any, for each program service reported.	
Δa	(Coc	le:) (Expenses \$ 14,336,978. including grants of \$ 12,236,895.) (Revenue \$ 855	
		CCHEDITE	<u>·</u> ′
	<u> </u>	2CHEDOTE 0	
4 b	(Coc	le:) (Expenses \$ 405,381. including grants of \$ 405,381.) (Revenue \$)
	ICI	F PROVIDED OPERATIONAL AND PROGRAMMATIC SUPPORT TO THE ICF CENTER FOR CROSS-BORDER	
	PH:	LANTHROPY (DBA OLIVEWOOD GARDENS & LEARNING CENTER), THE INTERNATIONAL COMMUNITY	
		JNDATION'S TYPE 1 SUPPORTING ORGANIZATION. OLIVEWOOD CONNECTS AND MOTIVATES	
		JDENTS AND FAMILIES FROM DIVERSE BACKGROUNDS IN THE SAN DIEGO REGION THROUGH	
		GANIC GARDENING, ENVIRONMENTAL STEWARDSHIP, AND NUTRITION EDUCATION, WHILE	
	<u>EMI</u>	POWERING THEM TO BE HEALTHY AND ACTIVE CITIZENS.	
4 c	(Coc	le:) (Expenses \$ including grants of \$) (Revenue \$)
4 d		er program services (Describe on Schedule O.)	
1.0	` '	nenses \$ including grants of \$) (Revenue \$) I program service expenses ► 14.742.359.	
40	TULA	I DI QUI ALLI 3 SERVICE CAUCHSES F 14. 147. 339.	

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

Form 990 (2021) INTERNATIONAL COMMUNITY FOUNDATION Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i> .	23	X	
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		X
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		X
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	former officer, director, trusteé, key employee, créator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	instructions for applicable filing thresholds, conditions, and exceptions):			
	a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 'Yes,' complete Schedule L, Part IV	28a		Χ
	b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b		X
	c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Х	
	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b	Х	
36	organization? Îf 'Yes,' complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	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 V			
	Oncer it ochequie o contains a response of flote to any fine fit this halt v		Yes	No
	a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		. ,,,	
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
D A /	(gambling) winnings to prize winners?	1 c	X 000 (0001

Form 990 (2021) INTERNATIONAL COMMUNITY FOUNDATION

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

			Yes	No
2 8	a 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 16			
ŀ	of If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.			
3 a	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
	b If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</i>	3 b		
4 8	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
	o If 'Yes,' enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 -	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		21
	-	36		
	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
	of If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
	Organizations that may receive deductible contributions under section 170(c).			
á	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a	X	
ı	a If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	X	
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	7 0	71	
,	Form 8282?	7 c		Х
(d If 'Yes,' indicate the number of Forms 8282 filed during the year			
•	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
Ģ	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ł	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
á	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
ŀ	bid the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
ŀ	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
á	a Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
	benter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
(Enter the amount of reserves on hand			
14 a	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
ŀ	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		17
	excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.	16		Х
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		

Part VI Governance, Management, and Disclosure. For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year..... 9 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent..... 9 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... X 8a **b** Each committee with authority to act on behalf of the governing body?.... X 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule Q..... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?.... 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?.... _____ c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe on Schedule O how this was done ... SEE SCHEDULE . O Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official.. SEE . SCHEDULE..Q...... 15 a **b** Other officers or key employees of the organization..... 15 b X If 'Yes' to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year?..... 16 a **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?... 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website Another's website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records

ELIZABETH CORROW 2505 N AVENUE NATIONAL CITY CA 91950 619-336-2250

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

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

See the instructions for the order in which to list the p	CISOIIS ab	ovc.									
Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.											
				(C)					7		
(A) Name and title	(B) Average hours	Pos thar is	s both	an o	ot che unles fficer truste	eck moss s pers and a ee)	ore son	(D) Reportable compensation from	(E) Reportable compensation from related organizations	(F) Estimated amount of other	
	per week (list any hours for related organiza- tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W.2/1999- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations	
(1) MARISA AURORA QUIROZ	$-\frac{40}{0}$	•		.,				126 405	0	20.002	
PRESIDENT & CEO (2) ANNE MCENANY	40			X				136,495.	0.	20,083.	
FMR PRES & CEO	$-\frac{40}{0}$	•		X				115,000.	0.	11,400.	
(3) YAMILETT CARRILLO GUERRERO DIR INNOV & PER	<u> 40</u> _ 0)			Х		101,846.	0.	10,986.	
(4) EMILY YOUNG, PHD	1_										
BOARD MEMBER	0	Х						0.	0.	0.	
	0	Х		Χ				0.	0.	0.	
(6) GABRIELA MANRIQUEZ	1	21		21				0.	0.	<u></u>	
SECRETARY	0	Х		Х				0.	0.	0.	
(7) ATUL PATEL INTERIM TREAS	10	Х		Х				0.	0.	0.	
(8) YURI A. CALDERON	1							<u> </u>	<u> </u>	<u> </u>	
BOARD MEMBER	0	Х						0.	0.	0.	
(9) DONNA MANNING	1										
BOARD MEMBER	0	Χ						0.	0.	0.	
(10) DAVID O'BRIEN TREAS TO 3/22	$-\frac{1}{0}$	Х		Х				0.	0.	0.	
(11) GUSTAVO A. DE LA FUENTE	1	21		21				0.	0.	<u> </u>	
CHAIR	0	Х		Χ				0.	0.	0.	
(12) ALEJANDRA MIER Y TERAN	1										
BOARD MEMBER	0	Χ						0.	0.	0.	
(13) PATRICIA MACHADO BOARD MEMBER	$-\frac{1}{0}$	Х						0.	0.	0	
(14)	U	Λ	H					0.	0.	0.	
<u></u>		1									

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Tart VII Section A. Officers, Directors, 110			,			5, u.	T Trigitost Con	ipensatea Emp	loyees (continued)
	(B)	Position (do not check more than one							
(A)	Average	(do	not ch	Posit eck n	tion nore th	nan one	(D)	(E)	(F)
Name and title	hours per	offic	er and	s pers l a dir	son is rector/	both ar (trustee)	compensation from	Reportable compensation from	Estimated amount of other
	week (list any	or Inc	JS.	♀ .	₹e m	E C	the organization (W-2/1099-	related organizations (W-2/1099-	compensation from the organization
	hours for	Individual or director		Officer	y en	Former Highest	MISC/1099-NEC)	MISC/1099-NEC)	and related organizations
	related organiza	Individual trustee or director	institutional trustee	1	employee Key employee	Con			organizations
	- tions below	rust	<u>a</u>]	vee ee	nper			
	dotted line)	æ	Sic			Former Highest compensated			
						ö			
(15)	l								
(16)	l								
(17)									
(18)	l								
(19)									
(20)									
(21)									
						4			
(22)							•		
(02)									
(23)									
(24)			_)				
(24)				•					
(25)) 		-	-			
(25)		7							
1 b Subtotal						•	353,341.	0.	42,469.
c Total from continuation sheets to Part VII, Secti							0.	0.	42,409.
d Total (add lines 1b and 1c)							353,341.	0.	42,469.
Total number of individuals (including but not limited									
from the organization > 3		.0.00		٠,			ta	or reportable comp	
									Yes No
3 Did the organization list any former officer, direc	tor trusts	ما مم	w am	nlo	V00	or hic	thest compensated	employee	
on line 1a? If 'Yes,' complete Schedule J for suc	h individu	ial			,			· · · · · · · · · · · · · · · · · · ·	. 3 Х
4 For any individual listed on line 1a, is the sum of	f renortah	le cor	mner	nsati	ion a	ind of	her compensation	from	
the organization and related organizations greate	er than \$1	50,00	00? /:	f 'Ye	es,' c	compl	ete Schedule J for	11 0111	4
such individual									. 4 X
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e comper	satio	n fro	m a	ny ur	nrelat	ed organization or	individual	. 5 X
Section B. Independent Contractors	s, comple	16 00	neuu	ile J	101 3	sucii į	0613011		· 3 A
1 Complete this table for your five highest compen	sated ind	epend	dent	cont	tracto	ors th	at received more t	nan \$100,000 of	
compensation from the organization. Report compen	sation for	the ca	alend	ar ye	ear ei	nding	with or within the or	ganization's tax year	
Name and business add	****						Description (of convious	(C) Compensation
Name and business add									
CIRCULATE CAPITAL LLC 15 W 26TH ST	NEW Y	YORK	(, N	JY	100	18	PROGRAM COI	NSULTING	100,000.
	,						1		
2 Total number of independent contractors (including to		ited to	thos	e lis	sted a	above)	wno received more	tnan	
\$100,000 of compensation from the organization	- 0								E 000 (0001)

456,470

0

Form 990 (2021) INTERNATIONAL COMMUNITY FOUNDATION 33-0457858 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII.... (B) Related or (A) Total revenue (D) Unrelated Revenue exempt excluded from tax business under sections 512-514 function revenue revenue 1 a Federated campaigns 1 a Gifts, Grants, ilar Amounts **b** Membership dues..... 1 b c Fundraising events..... 1 c d Related organizations..... 1 d e Government grants (contributions) Contributions, and Other Sin f All other contributions, gifts, grants, and similar amounts not included above . . . 1 f 18,971,726 **q** Noncash contributions included in lines 1a-1f. 235,362 h Total. Add lines 1a-1f 18,971,726 **Business Code** Program Service Revenue b **f** All other program service revenue. . . g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 365,794 365,794 Income from investment of tax-exempt bond proceeds Royalties.... (i) Real (ii) Personal 6 a Gross rents 6a **b** Less: rental expenses 6b c Rental income or (loss) 6c d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory **b** Less: cost or other basis 7a 90,676 7b and sales expenses c Gain or (loss). 7с 90,676 d Net gain or (loss) 90,676 90,676. 8 a Gross income from fundraising events Revenue (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a Other 8b **b** Less: direct expenses..... c Net income or (loss) from fundraising events **9 a** Gross income from gaming activities. See Part IV, line 19. 9a **b** Less: direct expenses..... 9b c Net income or (loss) from gaming activities..... **10 a** Gross sales of inventory, less..... returns and allowances. I O a 10b **b** Less: cost of goods sold. . . . **c** Net income or (loss) from sales of inventory..... **Business Code** Miscellaneous 11a OTHER INCOME 900099 855 855 Revenue d All other revenue.

429

051

855

e Total. Add lines 11a-11d.

Total revenue. See instructions......

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a	esponse or note to any			
Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	2,192,152.	2,192,152.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	2, 232, 202	2,192,102		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	10,450,124.	10,450,124.		
4 5	Benefits paid to or for members	202,949.	82,238.	44,707.	76,004.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	202,949.	02,230.	0.	70,004.
7	Other salaries and wages	825,240.	478,260.	174,442.	172,538.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	14,612.	8,468.	3,089.	3,055.
9	Other employee benefits	82,797.	47,984.	17,502.	17,311.
10	Payroll taxes	82,750.	45,110.	17,637.	20,003.
	Fees for services (nonemployees):	02,730.	43,110.	17,057.	20,003.
	Management	63,000.		63,000.	
	b Legal	49,632.		49,632.	
	: Accounting	93,236.		93,236.	
	Lobbying	33,230.		33,230.	
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)	127,377.	3,159.	84,274.	39,944.
13	Office expenses	3,589. 2,947.		2 047	3,589.
14	Information technology			2,947. 98,788.	21 005
15	Royalties	119,883.		90,700.	21,095.
16	Occupancy				
17	Travel	41,120.	23,850.	822.	16,448.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	41,120.	23,630.	022.	10,440.
19	Conferences, conventions, and meetings	3,780.		3,780.	
20	Interest	42,520.		42,520.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,024.		4,024.	
23	Insurance	37,799.		37,799.	
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.)				
ā	CHARITABLE EXPENSE	1,394,109.	1,394,109.		
ŀ	P BANK FEES	70,184.		70,184.	
(TELEPHONE	10,526.	5,738.	2,244.	2,544.
C	DUES	10,185.	6,882.	1,578.	1,725.
•	All other expenses	47,201.	4,285.	35,715.	7,201.
25	Total functional expenses. Add lines 1 through 24e	15,971,736.	14,742,359.	847,920.	381,457.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2021) INTERNATIONAL COMMUNITY FOUNDATION

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing.		1	
	2	Savings and temporary cash investments.	4,620,619.	2	8,877,802.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	512,562.	4	94,538.
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net.		7	
တ	7	Inventories for sale or use.		8	
ě	8				222 250
Assets	9	Prepaid expenses and deferred charges	62,740.	9	233,358.
		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation		10 c	6,069.
	11	Investments — publicly traded securities.		11	13,072,618.
	12	Investments – other securities. See Part IV, line 11		12	10,261,859.
	13	Investments – program-related. See Part IV, line 11		13	104,631.
	14	Intangible assets.		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	29,422,268.	16	32,650,875.
	17	Accounts payable and accrued expenses		17	249,142.
	18	Grants payable	1,447,940.	18	2,092,458.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	2,192,492.
	26	Total liabilities. Add lines 17 through 25.	2,336,746.	26	4,534,092.
ses		Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.	=, 333, 1231		
aŭ	27	Net assets without donor restrictions	12,832,225.	27	11 020 547
3al	28	Net assets with donor restrictions.		28	11,839,547.
핕	20	Organizations that do not follow FASB ASC 958, check here	14,253,297.	20	16,277,236.
Net Assets or Fund Balances		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds $\ldots \ldots$		31	
¥ 16	32	Total net assets or fund balances	27,085,522.	32	28,116,783.
ž	33	Total liabilities and net assets/fund balances	29,422,268.	33	32,650,875.

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Par	t XI	Reconciliation of Net Assets				
		Check if Schedule O contains a response or note to any line in this Part XI				
1	Total	revenue (must equal Part VIII, column (A), line 12)	1	19,	429,	051.
2	Total	expenses (must equal Part IX, column (A), line 25)	2	15,	971,	736.
3	Rever	nue less expenses. Subtract line 2 from line 1	3		457,	
4	Net as	ssets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		085,	
5	Net u	nrealized gains (losses) on investments	5		426,	
6	Donat	ted services and use of facilities	6			
7	Invest	tment expenses	7			
8	Prior	period adjustments	8			
9	Other	changes in net assets or fund balances (explain on Schedule O)	9			0.
10		ssets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
		in (B))	10	28,	116,	783.
Par	t XII	Financial Statements and Reporting				
		Check if Schedule O contains a response or note to any line in this Part XII				
					Yes	No
1	Accou	unting method used to prepare the Form 990: Cash X Accrual Other				
	If the	organization changed its method of accounting from a prior year or checked 'Other,' explain thedule O.				
2 a	Were	the organization's financial statements compiled or reviewed by an independent accountant?		2	а	Х
	s <u>ep</u> ar	s,' check a box below to indicate whether the financial statements for the year were compiled or reviewed ate basis, consolidated basis, or both: Separate basis Both consolidated and separate basis	ed on a			
b	Were	the organization's financial statements audited by an independent accountant?		2	b X	
	If 'Yes	s,' check a box below to indicate whether the financial statements for the year were audited on a separa , consolidated basis, <u>or</u> both:	ite			
		Separate basis X Consolidated basis Both consolidated and separate basis				
C		s' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, v, or compilation of its financial statements and selection of an independent accountant?		2	c X	
	on Sc	organization changed either its oversight process or selection process during the tax year, explain the dule O.				
3 a	As a r Audit	esult of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Act and OMB Circular A-133?		3	а	Х
b		s,' did the organization undergo the required audit or audits? If the organization did not undergo the required aud	it	9	h	

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

2021

Open to Public Inspection

Name of the organization Employer identification number INTERNATIONAL COMMUNITY FOUNDATION 33-0457858 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). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 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: 5 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.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on 12 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 I, Type II, 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 organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

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

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

Sec	Section A. Public Support											
begi	ndar year (or fiscal year nning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total					
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	13756399.	12209343.	24831190.	12801731.	18971726.	82,570,389.					
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.					
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.					
4	Total. Add lines 1 through 3	13756399.	12209343.	24831190.	12801731.	18971726.	82,570,389.					
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)				22,		24,823,633.					
6	Public support. Subtract line 5 from line 4				-6		57,746,756.					
Sec	tion B. Total Support						· · · · · · · · · · · · · · · · · · ·					
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total					
7	Amounts from line 4	13756399.	12209343.	24831190.	12801731.	18971726.	82,570,389.					
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	294,873.	395,510.	449,581.	297,025.	394,083.	1,831,072.					
9	Net income from unrelated business activities, whether or not the business is regularly carried on	·	2150	·	·	·	0.					
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI	7,762.	8,906.	1,500.	1,500.	855.	20,523.					
11	Total support. Add lines 7 through 10	.0					84,421,984.					
12	Gross receipts from related active	ities, etc. (see ins	structions)			12	0.					
13	First 5 years. If the Form 990 is organization, check this box and	for the organization stop here	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)	▶					
Sec	tion C. Computation of Pul											
	Public support percentage for 20						68.40 %					
15	Public support percentage from 2	2020 Schedule A,	Part II, line 14			15	70.17 %					
16a	33-1/3% support test—2021. If the and stop here. The organization	ne organization di qualifies as a pub	d not check the b dicly supported or	ox on line 13, and ganization	d line 14 is 33-1/3	% or more, check	k this box					
b	33-1/3% support test—2020. If the and stop here. The organization	e organization dic qualifies as a pul	I not check a box olicly supported o	on line 13 or 16arganization	, and line 15 is 33	3-1/3% or more, o	check this box					
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-ar	nd-circumstances	test, check this b	oox and stop here	. Explain in Part	VI how					
	10%-facts-and-circumstances to or more, and if the organization organization meets the facts-and	meets the facts-a l-circumstances te	nd-circumstances est. The organizat	test, check this to ion qualifies as a	oox and stop here publicly supporte	Explain in Part d organization	VI how the ►					
ı8	Private foundation. If the organiz	zation did not che	ck a box on line l	3, 16a, 16b, 1/a	, or 17b, check thi	s box and see in:	Structions					

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

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

Sec	tion A. Public Support						
	lar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	(a) 2017	(6) 2010	(0) 2013	(u) 2020	(6) 2021	(i) rotal
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				Ó		
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons				COX		
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.			CUR	/		
С	Add lines 7a and 7b			~			
8	Public support. (Subtract line 7c from line 6.)			J			
Sec	tion B. Total Support		-				
Calen	dar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		O,				
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	8					
	Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	7					
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is organization, check this box and	stop here		third, fourth, or f	ifth tax year as a	section 501(c)(3)	>
	tion C. Computation of Pul			ma 12 activities (0	`	1 4 = 1	o
	Public support percentage for 20	•	***		•	<u> </u>	<u>%</u> %
	Public support percentage from 2					16	<u> </u>
	tion D. Computation of Inv					1451	0
17		•	• • •	-			% o,
	Investment income percentage f					<u> </u>	% d line 17
	33-1/3% support tests—2021. If it is not more than 33-1/3%, check 33-1/3% support tests— 2020. If the support tests— 2020. If	this box and sto l	p here. The orgar	nization qualifies a	as a publicly supp	orted organization	
	33-1/3% support tests—2020. If the line 18 is not more than 33-1/3% Private foundation. If the organization of the organiz	, check this box a	and stop here. Th	e organization qu	alifies as a public	ly supported organ	nization ►

BAA TEEA0403L 08/31/21 Schedule A (Form 990) 2021

Part IV Supporting Organizations

(Complete only if you checked a box in 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. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe			
	the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was			
	described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization			
	made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
C	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the			
	supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
	Time Law Time II cally. Was any added as substituted absorbed association next of a class already decimated in the			
D	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of			
	the filing organization's supported organizations? If 'Yes,' provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If 'Yes,' complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons,			
	as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI .	9b		
C	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI.	9с		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,'			
	answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	1 0 b		

BAA TEEA0404L 08/31/21 Schedule A (Form 990) 2021

Pa	rt IV Supporting Organizations (continued)		
11	Has the organization accepted a gift or contribution from any of the following persons?	Yes	s No
	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?		
	b A family member of a person described on line 11a above? 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	-	
	- 1100 /0 dollatelled charged a person december of the december 1100 /0 dollatelled charged at the transfer of the december of	<u>; </u>	
<u> 5ec</u>	ction B. Type I Supporting Organizations	Yes	s 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 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.		
2			
Sec	ction C. Type II Supporting Organizations		
		Yes	s No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
<u>-</u>	ction D. All Type III Supporting Organizations		
360	Stion B. All Type III Supporting Organizations	Yes	s No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
	organization's governing documents in effect on the date of notification, to the extent not previously provided:		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
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.		
Sec	ction E. Type III Functionally Integrated Supporting Organizations		
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a The organization satisfied the Activities Test. Complete line 2 below. b The organization is the parent of each of its supported organizations. Complete line 3 below. c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).	ructic	ns).
2	Activities Test. Answer lines 2a and 2b below.	Yes	s No
		16:	110
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
	b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.)	
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If 'Yes' or 'No,' provide details in Part VI .	1	
	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If 'Yes,' describe in Part VI the role played by the organization in this regard.</i> 31	,	

SCITE	Edule A (FORM 990) 2021 INTERNATIONAL COMMUNITY FOUNDAT		33-04	5/858 Page
Pai	₹ V Type III Non-Functionally Integrated 509(a)(3) Supporting Organization † V Type III Non-Functionally Integrated 509(a)(3) Supporting Organization † V Type III Non-Functionally Integrated 509(a)(3) Supporting Organization † V Type III Non-Functionally Integrated 509(a)(3) Supporting Organization † Description † Descriptio	aniza	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on N ns mu	lov. 20, 1970 (explain in st complete Sections A	Part VI). See through E.
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
ŀ	Average monthly cash balances	1b)_	
(: Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
•	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
_ 7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		

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

6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).

BAA Schedule A (Form 990) 2021

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Pa	lpha V $$ Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (cont	inued)					
Sec	Section D – Distributions						
1	Amounts paid to supported organizations to accomplish exempt purposes	1					
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2					
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3					
4	Amounts paid to acquire exempt-use assets	4					
5	Qualified set-aside amounts (prior IRS approval required — provide details in Part VI)	5					
6	Other distributions (describe in Part VI). See instructions.	6					
7	Total annual distributions. Add lines 1 through 6.	7					
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8					
9	Distributable amount for 2021 from Section C, line 6	9					
10	Line 8 amount divided by line 9 amount	10					

•		(1)	
Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required — <i>explain in Part VI</i>). See instructions.		-0	
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019	. Q-Y		
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

BAA Schedule A (Form 990) 2021

33-0457858

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Part VI

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

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE			2021		2020		2019	_	2018		2017
OTHER	TOTAL	\$ \$	855. 855.	\$ \$	1,500. 1,500.	\$ \$	1,500. 1,500.	\$ \$	8,906. 8,906.	\$ \$	7,762. 7,762.

PUBLIC DISCLOSURE. COPY

PUBLIC DISCLOSURE.

BAA TEEA0408L 08/31/21 Schedule A (Form 990) 2021

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

INTERNATIONAL COMMUNITY FOUNDATION

			33-0457858
Par	t I Organizations Maintaining Donor	Advised Funds or Other Similar Fu	nds or Accounts.
	Complete if the organization answ	ered 'Yes' on Form 990, Part IV, line	e 6.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	62	143
2	Aggregate value of contributions to (during year)	4,098,043.	4,462,092.
3	Aggregate value of grants from (during year)	5,785,248.	4,265,152.
4	Aggregate value at end of year	5,643,555.	5,838,016.
5	Did the organization inform all donors and donor are the organization's property, subject to the organization	rganization's exclusive legal control?	X Yes No
6	Did the organization inform all grantees, donors for charitable purposes and not for the benefit impermissible private benefit?	s, and donor advisors in writing that grant fun of the donor or donor advisor, or for any othe	ds can be used only r purpose conferring X Yes No
Par	t II Conservation Easements.		<u> </u>
		ered 'Yes' on Form 990, Part IV, line	27.
1	Purpose(s) of conservation easements held by	the organization (check all that apply).	
	Preservation of land for public use (for example	e, recreation or education) Preservat	on of a historically important land area
	Protection of natural habitat	Preservat	ion of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution in the for	m of a conservation easement on the
	last day of the tax year.		
	Total complex of a consequention and a consequent		Held at the End of the Tax Year
	a Total number of conservation easements		2a
	Total acreage restricted by conservation easem		1
	Number of conservation easements on a certific		
	Number of conservation easements included in structure listed in the National Register		2d
3	Number of conservation easements modified, trans tax year ►	ferred, released, extinguished, or terminated by	the organization during the
4	Number of states where property subject to conserve	vation easement is located ►	<u>_</u>
5	Does the organization have a written policy reg and enforcement of the conservation easement		
6	Staff and volunteer hours devoted to monitoring, in	specting, handling of violations, and enforcing co	onservation easements during the year
7	Amount of expenses incurred in monitoring, inspec ▶\$	ting, handling of violations, and enforcing conser	vation easements during the year
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of se	ection 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization repoinclude, if applicable, the text of the footnote to conservation easements.		
Par	t III Organizations Maintaining Collec	tions of Art, Historical Treasures, or	r Other Similar Assets.
	Complete if the organization answ	ered 'Yes' on Form 990, Part IV, line	
1 a	If the organization elected, as permitted under historical treasures, or other similar assets held Part XIII the text of the footnote to its financial	I for public exhibition, education, or research	tatement and balance sheet works of art, in furtherance of public service, provide in
k	b If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items:	public exhibition, education, or research in furth	erance of public service, provide the
	(i) Revenue included on Form 990, Part VIII, li		
_	(ii) Assets included in Form 990, Part X		·
2	If the organization received or held works of art, his amounts required to be reported under FASB A	SC 958 relating to these items:	
-	Revenue included on Form 990 Part VIII line 1		▶ \$

▶\$

Part III Organizations Maintai	ning Collection	15 Of Art, HISTO	ricai i reas	sures, or C	tner Similar Asse	ets (contil	пиеа)					
3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):												
a Public exhibition		d Loan	or exchange	program								
b Scholarly research		e Other										
c Preservation for future generation	ations											
4 Provide a description of the organize Part XIII.	ation's collections a	nd explain how they	further the or	rganization's e	xempt purpose in							
5 During the year, did the organizat to be sold to raise funds rather the	nan to be maintain	ed as part of the o	rganization's	collection?		Yes	No					
Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.												
1 a Is the organization an agent, trus on Form 990, Part X?	tee, custodian or o	other intermediary	for contributi	ons or other	assets not included	Yes	No					
b If 'Yes,' explain the arrangement	on Form 990, Part X? Yes No b If 'Yes,' explain the arrangement in Part XIII and complete the following table:											
						Amount						
c Beginning balance					1 c							
d Additions during the year					1 d							
e Distributions during the year					1 e							
f Ending balance					7f							
2a Did the organization include an a					count liability?	Yes	No					
b If 'Yes,' explain the arrangement												
Part V Endowment Funds. Co	omplete if the o	organization an	swered 'Y	es' on Forn	n 990 Part IV lin	e 10						
	(a) Current year	(b) Prior year		wo years back	(d) Three years back	(e) Four y	ears back					
1 a Beginning of year balance	10,867,996			111,178.	8,903,097.		1,927.					
b Contributions	140,100			20,060.	9,105.	 	0,000.					
	110/100	3,7,1		20,000.	3,100.	1,00	0,000.					
c Net investment earnings, gains, and losses	-1,422,643	. 2,023,3	36	298,084.	596,876.	48	4,291.					
d Grants or scholarships	348,005			311,627.	267,245.		3,010.					
e Other expenditures for facilities	340,000	. 232,4	70.	JII, 027.	201,243.	25	3,010.					
and programs	56,244	. 15,9	81.	2,279.	130,655.	2	0,111.					
f Administrative expenses		5										
g End of year balance	9,181,204			115,416.	9,111,178.	8,90	3,097.					
2 Provide the estimated percentage	e of the current yea	ar end balance (lin	ie 1g, columr	n (a)) held as	:							
a Board designated or quasi-endowme		> %										
b Permanent endowment ►	80.67											
c Term endowment ► 19	.33 %											
The percentages on lines 2a, 2b, ar	nd 2c should equal 1	00%.										
3 a Are there endowment funds not in the	he nossession of the	organization that a	are held and a	dministered fo	ir tha							
organization by:	ne possession of the	organization that t	ire ricia aria a	arriiriisterea ro	i tic	Yes	No					
(i) Unrelated organizations						3a(i)	X					
(ii) Related organizations						3a(ii)	Х					
b If 'Yes' on line 3a(ii), are the rela	ted organizations	isted as required of	on Schedule	R?		3b						
4 Describe in Part XIII the intended	l uses of the organ	ization's endowme	ent funds.	SEE PART	XIII							
Part VI Land, Buildings, and I												
Complete if the organization		d 'Yes' on Forr	n 990, Par	t IV, line 1	1a. See Form 990	D, Part X,	line 10.					
Description of property	(a) Co	ost or other basis (investment)	(b) Cost of basis (c	or other	(c) Accumulated depreciation	(d) Book						
1 a Land	+	, ,	(-									
b Buildings												
c Leasehold improvements			1	1,056.	6,327.		4,729.					
d Equipment				4,867.	53,527.		$\frac{4,725.}{1,340.}$					
e Other				-, 00/·	33,321.		1,040.					
Total. Add lines 1a through 1e. (Colum		orm 990 Part X	column (R) I	ine 10c)	>		6,069.					
RAA	(a) mast equal t	5 550, 1 art A, (, , , , , , , , , , , , , , , , , , ,	100./		ıle D (Form [©]						

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i dit vii	Investments — Other Securities. Complete if the organization answered	'Yes' on Form 99	1 Part IV line 11h See Form	990 Part X line 12
(a) Desc	ription of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	
	ial derivatives	.,,	.,	
` '	y held equity interests.			
	MONEY MKT & COMMERCIAL PAPER	10,261,859.	END OF YEAR MARKET VALUE	IJF.
				<u>-</u>
(A) (B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(l)				
Total. (Colun	nn (b) must equal Form 990, Part X, column (B) line 12.) 🕨	10,261,859.		
	Investments – Program Related.		N/A	
	Complete if the organization answered		0, Part IV, line 11c. See Form	990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation. Cost or er	nd-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)			O _V	
(7)				
(8)				
(9)		<u>~</u>		
(10)	nn (b) must equal Form 990, Part X, column (B) line 13.) 🕨	$\overline{}$		
Part IX	Other Assets.	N/A		
	Other Assets.	IN/E		
	Complete if the organization answered	'Yes' on Form 99	0, Part IV, line 11d. See Form	
	Complete if the organization answered	'Yes' on Form 99 scription	0, Part IV, line 11d. See Form	990, Part X, line 15. (b) Book value
(1)	Complete if the organization answered	'Yes' on Form 99	0, Part IV, line 11d. See Form	
(1) (2)	Complete if the organization answered	'Yes' on Form 99	0, Part IV, line 11d. See Form	
(1) (2) (3)	Complete if the organization answered	'Yes' on Form 99	0, Part IV, line 11d. See Form	
(1) (2) (3) (4)	Complete if the organization answered	'Yes' on Form 99	0, Part IV, line 11d. See Form	
(1) (2) (3)	Complete if the organization answered	'Yes' on Form 99	0, Part IV, line 11d. See Form	
(1) (2) (3) (4) (5) (6) (7)	Complete if the organization answered	'Yes' on Form 99	0, Part IV, line 11d. See Form	
(1) (2) (3) (4) (5) (6) (7) (8)	Complete if the organization answered	'Yes' on Form 99	0, Part IV, line 11d. See Form	
(1) (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization answered	'Yes' on Form 99	0, Part IV, line 11d. See Form	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Complete if the organization answered (a) Des	'Yes' on Form 99	0, Part IV, line 11d. See Form	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	Complete if the organization answered (a) Des	'Yes' on Form 99	0, Part IV, line 11d. See Form	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	Complete if the organization answered (a) Des	'Yes' on Form 99	0, Part IV, line 11d. See Form	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	Complete if the organization answered (a) Des	'Yes' on Form 990 scription B) line 15.)	0, Part IV, line 11d. See Form	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (B) Other Liabilities. Complete if the organization answered 'Yes' on Fig. (a) Description	'Yes' on Form 99	0, Part IV, line 11d. See Form	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (E) Other Liabilities. Complete if the organization answered 'Yes' on Form (a) Description (b) Description (c)	'Yes' on Form 990 scription B) line 15.)	0, Part IV, line 11d. See Form	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X 1. (1) Fede (2) EID	Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (E) Other Liabilities. Complete if the organization answered 'Yes' on Form (a) Description (b) Description (c)	'Yes' on Form 990 scription B) line 15.)	0, Part IV, line 11d. See Form	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X 1. (1) Fede (2) EID (3) REF (4)	Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (E) Other Liabilities. Complete if the organization answered 'Yes' on Formal income taxes LOAN	'Yes' on Form 990 scription B) line 15.)	0, Part IV, line 11d. See Form	(b) Book value 25. (b) Book value 2,000,000.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X 1. (1) Fede (2) EID (3) REF (4) (5)	Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (E) Other Liabilities. Complete if the organization answered 'Yes' on Formal income taxes LOAN	'Yes' on Form 990 scription B) line 15.)	0, Part IV, line 11d. See Form	(b) Book value 25. (b) Book value 2,000,000.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X 1. (1) Fede (2) EID (3) REF (4) (5) (6)	Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (E) Other Liabilities. Complete if the organization answered 'Yes' on Formal income taxes LOAN	'Yes' on Form 990 scription B) line 15.)	0, Part IV, line 11d. See Form	(b) Book value 25. (b) Book value 2,000,000.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X 1. (1) Fede (2) EID (3) REF (4) (5) (6) (7)	Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (E) Other Liabilities. Complete if the organization answered 'Yes' on Formal income taxes LOAN	'Yes' on Form 990 scription B) line 15.)	0, Part IV, line 11d. See Form	(b) Book value 25. (b) Book value 2,000,000.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X 1. (1) Fede (2) EID (3) REF (4) (5) (6) (7) (8)	Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (E) Other Liabilities. Complete if the organization answered 'Yes' on Formal income taxes LOAN	'Yes' on Form 990 scription B) line 15.)	0, Part IV, line 11d. See Form	(b) Book value 25. (b) Book value 2,000,000.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X 1. (1) Fede (2) EID (3) REF (4) (5) (6) (7) (8) (9)	Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (E) Other Liabilities. Complete if the organization answered 'Yes' on Formal income taxes LOAN	'Yes' on Form 990 scription B) line 15.)	0, Part IV, line 11d. See Form	(b) Book value 25. (b) Book value 2,000,000.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X 1. (1) Fede (2) EID (3) REF (4) (5) (6) (7) (8) (9) (10)	Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (E) Other Liabilities. Complete if the organization answered 'Yes' on Formal income taxes LOAN	'Yes' on Form 990 scription B) line 15.)	0, Part IV, line 11d. See Form	(b) Book value 25. (b) Book value 2,000,000.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X 1. (1) Fede (2) EID (3) REF (4) (5) (6) (7) (8) (9) (10) (11)	Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (E) Other Liabilities. Complete if the organization answered 'Yes' on Foral income taxes LOAN UNDABLE ADVANCE	'Yes' on Form 99 scription B) line 15.) Drm 990, Part IV, line 1 ption of liability	1e or 11f. See Form 990, Part X, line 2	(b) Book value 25. (b) Book value 2,000,000. 192,492.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X 1. (1) Fede (2) EID (3) REF (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column	Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (E) Other Liabilities. Complete if the organization answered 'Yes' on Formal income taxes LOAN	'Yes' on Form 990 scription B) line 15.) Drm 990, Part IV, line 1 ption of liability	1e or 11f. See Form 990, Part X, line 2	(b) Book value 25. (b) Book value 2,000,000. 192,492.

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn. N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains (losses) on investments	
b Donated services and use of facilities	
c Recoveries of prior year grants	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d.	2 e
3 Subtract line 2e from line 1	3
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.)	
c Add lines 4a and 4b	4 c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return. N/A
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	Return. N/A
	Return. N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	T
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	T
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	T
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	T
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. 2 a 2 b	T
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d.	T
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.).	1
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 2 e
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a	1 2 e
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a b Other (Describe in Part XIII.) 4 b	1
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a	1 2 e

Part XIII Supplemental Information.

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

PART V. LINE 4 - INTENDED USES OF ENDOWMENT FUND

THE FOUNDATION HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO PROGRAMS SUPPORTED BY ITS ENDOWMENT WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS.

ENDOWMENT ASSETS INCLUDE THOSE ASSETS OF DONOR-RESTRICTED FUNDS THAT THE FOUNDATION MUST HOLD IN PERPETUITY. ACTUAL RETURNS IN ANY GIVEN YEAR MAY VARY.

BAA Schedule D (Form 990) 2021

PART X - FASB ASC 740 FOOTNOTE

THE FOUNDATION AND ITS SUPPORTING ORGANIZATION ARE EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SECTION 23701 (D) OF THE STATE REVENUE AND TAXATION CODE. THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ISSUED ACCOUNTING STANDARDS CODIFICATION (ASC) NO. 740-10, ACCOUNTING FOR UNCERTAINTIES IN INCOME TAX, WHICH SETS A MINIMUM THRESHOLD FOR FINANCIAL STATEMENT RECOGNITION OF THE BENEFIT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE FOUNDATION HAS REVIEWED ITS POSITIONS FOR ALL OPEN TAX YEARS AND HAS DETERMINED THAT PUBLIC DISCLOSURE. IT HAS NO UNCERTAIN TAX POSITIONS REQUIRING ACCRUAL OR DISCLOSURE.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization				Employer identi	fication number
INTERNATIONAL COMMUN	NITY FOUNDAT	'ION		33-04578	358
Part I General Informat	tion on Activiti	es Outside th	e United States. Complet		
on Form 990, Pai	rt IV, line 14b.				
1 For grantmakers. Does the the grantees' eligibility for	e organization mai the grants or assi	intain records to stance, and the s	substantiate the amount of its gelection criteria used to award	grants and other assista the grants or assistand	ence, ee?XYes No
2 For grantmakers. Describe i United States. PART		zation's procedure	s for monitoring the use of its gra	nts and other assistance	outside the
3 Activities per Region. (The	e following Part I, I	line 3 table can b	e duplicated if additional space	e is needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) NORTH AMERICA			GRANTMAKING	8.	8,023,427.
(2) CENTRAL AMERICA			GRANTMAKING	9	649,336.
(3) SOUTH AMERICA			GRANTMAKING		1,685,894.
(4) CARIBBEAN			GRANTMAKING		725.
(5) ASIA			GRANTMAKING		90,742.
(6)					
(7)		(5))		
(8)		0,10			
(9)		\mathcal{O}			
(10)	8	*			
(11)	0V.				
(12)					
(13)					
(14)					
(15)					
(16)					
(17) 3 a Subtotal					10,450,124.
		l .			10,430,124.

b Total from continuation sheets to Part I..... c Totals (add lines 3a and 3b).

10,450,124.

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
				SEE					
			SEE ATTACHED	ATTACHED	10,450,124.	CHECK/WIRE			
						4			
					S				
				C)				
				-C)					
				*					
			8						
		X							

TEEA3502L 10/28/21

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.....

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BAA

Schedule F (Form 990) 2021

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)				رن			
(5)				4.			
(6)				2~			
(7)			S				
(8)							
(9)			,CV				
(10)							
(11)		.6					
(12)							
(13)							
(14)	0						
(15)							
(16)							
(17)							
(18)							
BAA				l		Schedule F	(Form 990) 2021

00	Section (1997) 2521 INIBIAMILIONIA COMMONITI I CONDITION	0437030	. ugo
Pai	rt IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926).	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471).	ı Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualifie electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).		X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No
	PUBLIC DISCLOSURIES PUBLIC DI		
	Q		

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I. LINE 2 - GRANTMAKERS EXPLANATION FOR MONITORING USE OF FUNDS OUTSIDE US

- 1. WE RECEIVE THE GRANT RECOMMENDATION FORM COMPLETED AND SIGNED BY A FUND ADVISOR.
- 2. WE VERIFY NONPROFIT STATUS OF THE GRANTEE AND REQUEST FORMAL NONPROFIT DOCUMENTATION. THE FOLLOWING ARE REQUESTED FOR ALL GRANTEES:
- -501 (C) (3) OR FOREIGN EQUIVALENT DOCUMENTATION PROVIDED BY THE TREASURY DEPARTMENT OR TAX AUTHORITY FROM THE GOVERNMENT OF THE GRANTEE IN QUESTION
- -BY-LAWS
- -DETERMINATION LETTER FOR TAX EXEMPT STATUS
- -LIST OF BOARD OF GOVERNORS AND THEIR AFFILIATION
- -A BRIEF DESCRIPTION OF THE GRANTEE'S ORGANIZATION (MISSION, VISION, OBJECTIVES, CURRENT PROGRAMS) AND ANNUAL OPERATING BUDGET
- -GRANTEE'S FINANCIAL INSTITUTION ACCOUNT NAME AND NUMBER

 VARIOUS WEBSITES ARE CHECKED FOR BLOCKED PERSON AND ORGANIZATIONS

 RISK ASSESSMENT EVALUATED
- 3. IN ADDITION TO BACKGROUND INFORMATION, FOR EACH NEW GRANT, WE REQUEST A PROPOSAL FOR EACH SPECIFIC PROJECT FROM THE GRANTEE.
- 4. GRANT RECOMMENDATION IS SUBMITTED TO INTERNATIONAL COMMUNITY FOUNDATION GRANT MANAGER (UP TO \$25,000) OR BOARD OF DIRECTORS (OVER \$25,000) FOR APPROVAL. GRANTS APPROVED BY MANAGER ARE REPORTED TO THE BOARD OF DIRECTORS QUARTERLY.
- 5. UPON APPROVAL, ICF ISSUES AN AWARD LETTER-CONTRACTUAL AGREEMENT TO THE GRANTEE TO RECEIVE FUNDING.

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2 - GRANTMAKERS EXPLANATION FOR MONITORING USE OF FUNDS OUTSIDE US (CONTINUED

AND RETURNED TO OUR FOUNDATION.

- 7. A WIRE TRANSFER (OR CHECK) IS SENT TO THE RECIPIENT ORGANIZATION.
- 8. FUND ADVISOR IS NOTIFIED BY EMAIL OR TELEPHONE CALL THAT FUNDS WERE SENT TO THE GRANTEE.
- 9. ICF PERFORMS FOLLOW UP AND EVALUATION WITH THE GRANTEE. THIS VARIES FROM PROJECT TO PROJECT.
- 10. GRANTEE SUBMITS A COMPLETE REPORT FOR FUNDING RECEIVED 6 MONTHS TO A YEAR AFTER THE FUNDING WAS AWARDED (NARRATIVE AND FINANCIAL).
- 11. SITE VISITS ARE DONE ON AN AD HOC BASIS.

BAA TEEA3504L 10/28/21 Schedule F (Form 990) 2021

Name of Organization Fundación Margarita Barrientos Fundacion las Rosas de Ayuda Fraterna ANET - Amigos de los Niños Excepcionales Tarija Bororé Social Promotion Center Unidos Para Sonreir Charles Darwin Foundation for the Galapagos Centro Amazonico de Antropologia y Aplicacion Practica - CAAP Centro Amazonicode Antropologia y Aplicacion Practica (CAAAP)	Region Argentina Argentina Bolivia Brazil Colombia Ecuador Peru Peru	Purpose of Grant Charitable Purposes	8,300 16,833 8,300 8,300 1,609,405 9,500	Manner of cash disbursement Check/Wire Check/Wire Check/Wire Check/Wire Check/Wire Check/Wire Check/Wire Check/Wire
Caritas del Peru	Peru	Charitable Purposes	·	Check/Wire
SOUTH AMERICA TOTAL			1,685,894	
BarbudanGO CARIBBEAN TOTAL	Barbuda	Charitable Purposes	725 725	Check/Wire
Coorperativa de Consumo y Servicos Varios Sibana, R.L.	Guatemala	Charitable Purposes	11,270	Check/Wire
Cooperativa Integral de Ahorro y Crédito Champel, R.L.	Guatemala	Charitable Purposes	15,445	Check/Wire
Cooperativa Integral de Comercialización La Máquina C-2 Responsabilidad Limitada (CINCOM	Guatemala	Charitable Purposes	20,400	Check/Wire
Cooperativa Integral de Comercialización "Agricultores Unidos", Responsabili dad Limitada	Guatemala	Charitable Purposes	12,900	Check/Wire
Fundacion Guatemala	Guatemala	Charitable Purposes	30,000	Check/Wire
Asociacion Centro Regional de Formacion para el Desarollo Comunitario (CERFOR)	Guatemala	Charitable Purposes	30,837	Check/Wire
Empresarios por la Educacion	Guatemala	Charitable Purposes	30,000	Check/Wire
Fundacion Cristo Renovado en Amor - FUNDACREA	Guatemala	Charitable Purposes	30,000	Check/Wire
Asociacion Coalicion Costarricense de Iniciativas de Desarrollo (CINDE)	Costa Rica	Charitable Purposes	182,000	Check/Wire
Fundación Ayúdenos Para Ayudar	Costa Rica	Charitable Purposes	30,000	Check/Wire
Fundación Nacional de Solidaridad contra el Cáncer de Mama -FUNDESO	Costa Rica	Charitable Purposes	40,000	Check/Wire
Asociación Roblealto Pro Bienestar del Niño	Costa Rica	Charitable Purposes	42,500	Check/Wire
Centro de Incidencia Ambiental	Panama	Charitable Purposes	173,984	Check/Wire
CENTRAL AMERICA TOTAL			649,336	
Ablarque Tomporal Casa Aragiris A C	Movies	Charitable Durneses	4.000	Chook /Miro
Ablergue Temporal Casa Arcoiris, A.C. ACHAMAR	Mexico Mexico	Charitable Purposes Charitable Purposes		Check/Wire Check/Wire
		·		Check/Wire
Albergue Temporal Casa Arcoiris, A.C.	Mexico	Charitable Purposes Charitable Purposes	•	•
Alianza FC Mexico, A.C.	Mexico	Charitable Purposes Charitable Purposes		Check/Wire
Alianza para la Seguridad Alimentaria de BCS	Mexico	•		Check/Wire
Alma Migrante, A.C.	Mexico	Charitable Purposes	11,500	Check/Wire

				Manner of cash
Name of Organization	Region	Purpose of Grant	Amount of cash grant	disbursement
Amigos de los Niños de Cabo San Lucas, AC	Mexico	Charitable Purposes	93,730	Check/Wire
Amigos para la Conservacion de Cabo Pulmo, A.C.	Mexico	Charitable Purposes	180,000	Check/Wire
Andale La Paz, A.C.	Mexico	Charitable Purposes	109,646	Check/Wire
Andale Para Oír Padres de Niños Sordos A.C	Mexico	Charitable Purposes	65,500	Check/Wire
Asociacion para los Niinos de Tijuana, A.C. (Ciudad de los Ninos)	Mexico	Charitable Purposes	5,000	Check/Wire
Asociacion Pro Bomberos de Tijuana, A.C.	Mexico	Charitable Purposes	2,000	Check/Wire
Asylum Access Mexico	Mexico	Charitable Purposes	7,500	Check/Wire
Atentamente Consultores, S.C.	Mexico	Charitable Purposes	3,930	Check/Wire
Banco de Alimentos de Tijuana, A.C.	Mexico	Charitable Purposes	20,000	Check/Wire
BCScicletos Colectivo de Ciclismo Urbano, A.C.	Mexico	Charitable Purposes	1,450	Check/Wire
Biblioteca Publica de San Miguel de Allende, A.C.	Mexico	Charitable Purposes	11,500	Check/Wire
Bomberos Voluntarios Pescadero, A.C.	Mexico	Charitable Purposes	30,093	Check/Wire
Cabet, Cultura y Ambiente, A.C.	Mexico	Charitable Purposes	4,000	Check/Wire
Campeones de la Vida Nariz Roja, A.C.	Mexico	Charitable Purposes	100,000	Check/Wire
Cara Adelante, A.C.	Mexico	Charitable Purposes	32,000	Check/Wire
Casa Albergue Temporal Para Ninos, IBP	Mexico	Charitable Purposes	10,000	Check/Wire
Casa de Luz SD	Mexico	Charitable Purposes	4,000	Check/Wire
Casa Eudes Promocion a la Mujer	Mexico	Charitable Purposes	48,000	Check/Wire
Casa Hogar Alegria, IAP	Mexico	Charitable Purposes	112,351	Check/Wire
Casa Hogar Santa Julia Don Bosco, A.C.	Mexico	Charitable Purposes	7,000	Check/Wire
Casa Hogar SIMNSA, A.C.	Mexico	Charitable Purposes	13,578	Check/Wire
Casa Migrante San Juan Diego y San Francisco de Asis, A.C.	Mexico	Charitable Purposes	39,253	Check/Wire
Centro de Biodiversidad Marina y la Conservacion, A.C.	Mexico	Charitable Purposes	20,000	Check/Wire
Centro de Comunidad, A.C.	Mexico	Charitable Purposes	8,187	Check/Wire
Centro de Energia Renovable y Calidad Ambiental (CERCA)	Mexico	Charitable Purposes	110,580	Check/Wire
Centro de Investigacion Cientifica y de Educacion Superior de Ensenada	Mexico	Charitable Purposes	9,000	Check/Wire
Centro de Servicios CSER A.C.	Mexico	Charitable Purposes	752	Check/Wire
Centro de Servicos SER, A.C.	Mexico	Charitable Purposes	4,000	Check/Wire
Centro Humanistico de Cultura, Medicina y Psicologia Sagrada, A.C.	Mexico	Charitable Purposes	25,000	Check/Wire
Centro Mexicano de Derecho Ambiental, A.C. (CEMDA)	Mexico	Charitable Purposes	439,704	Check/Wire
Centro Mexicano para la Defensa del Medio Ambiente, A.C. (DAN)	Mexico	Charitable Purposes	320,000	Check/Wire
Centro Mujeres, A.C.	Mexico	Charitable Purposes	115,000	Check/Wire
Centro para la Biodiversidad Marina y la Conservación A.C.	Mexico	Charitable Purposes	200,900	Check/Wire
Club de Ninos y Ninas de BCS, A.C.	Mexico	Charitable Purposes	71,723	Check/Wire
Club de Niños y Niñas de Nuevo León, ABP	Mexico	Charitable Purposes	5,000	Check/Wire

				Manner of cash
Name of Organization	Region	Purpose of Grant	Amount of cash grant	disbursement
Club de Niños y Niñas Tijuana, A.C.	Mexico	Charitable Purposes	9,770	Check/Wire
COBINA, A.C.	Mexico	Charitable Purposes	18,595	Check/Wire
Codigo Felicidad, A.C.	Mexico	Charitable Purposes	68,000	Check/Wire
Comite de Ayuda a Desatres y Emergencias Nacionales, A.C.	Mexico	Charitable Purposes	7,000	Check/Wire
Como Vamos La Paz, A.C.	Mexico	Charitable Purposes	160,745	Check/Wire
Comunidad Maijanu, A.C.	Mexico	Charitable Purposes	30,000	Check/Wire
Comunidad Metropolitana, A.C.	Mexico	Charitable Purposes	9,000	Check/Wire
Comunidad y Biodiversidad, A.C.	Mexico	Charitable Purposes	353,700	Check/Wire
Conservación de Fauna del Noroeste, A.C.	Mexico	Charitable Purposes	23,800	Check/Wire
COPROBEC, A.C.	Mexico	Charitable Purposes	10,000	Check/Wire
Corporativa de Fundaciones, A.C.	Mexico	Charitable Purposes	4,977	Check/Wire
Corredor Historico CAREM, A.C.	Mexico	Charitable Purposes	8,233	Check/Wire
Cruz Roja Mexicana, IAP	Mexico	Charitable Purposes	8,300	Check/Wire
Derechos Humanos Integrales en Accion, A.C.	Mexico	Charitable Purposes	264,286	Check/Wire
Derechoscopio, A.C.	Mexico	Charitable Purposes	8,900	Check/Wire
East Cape Community Urgent Care Clinic	Mexico	Charitable Purposes	54,000	Check/Wire
Eco-Alianza de Loreto, A.C.	Mexico	Charitable Purposes	420,000	Check/Wire
Eco-rrrevolucion, A.C.	Mexico	Charitable Purposes	60,884	Check/Wire
EDUPAM Bluhm	Mexico	Charitable Purposes	10,000	Check/Wire
Enseno Por Mexico IAP	Mexico	Charitable Purposes	6,000	Check/Wire
Escuela de Educacion Especial de San Miguel de Allende, A.C.	Mexico	Charitable Purposes	7,500	Check/Wire
Espacio Migrante, A.C.	Mexico	Charitable Purposes	25,000	Check/Wire
Eunime Por Tijuana, A.C.	Mexico	Charitable Purposes	9,000	Check/Wire
Feed the Hungry, A.C.	Mexico	Charitable Purposes	6,000	Check/Wire
Fondo Unido, IAP	Mexico	Charitable Purposes	54,300	Check/Wire
Foundacion Mozcalti	Mexico	Charitable Purposes	8,000	Check/Wire
Frontera Con Justicia, A.C.	Mexico	Charitable Purposes	19,253	Check/Wire
Fronteras con Justicia, A.C.	Mexico	Charitable Purposes	20,000	Check/Wire
Frontereas Unidas Pro Salud, A.C.	Mexico	Charitable Purposes	111,150	Check/Wire
Fundación Appleseed México, A.C.	Mexico	Charitable Purposes	2,425	Check/Wire
Fundacion Astra	Mexico	Charitable Purposes	1,700	Check/Wire
Fundacion Ayuda Ninos La Paz, A.C.	Mexico	Charitable Purposes	13,000	Check/Wire
Fundación Ayuda Niños La Paz, A.C.	Mexico	Charitable Purposes	46,000	Check/Wire
Fundacion Baraquiel D. Fimbres, A.C.	Mexico	Charitable Purposes	5,000	Check/Wire
Fundacion COI, A.C.	Mexico	Charitable Purposes	2,000	Check/Wire

				Manner of cash
Name of Organization	Region	Purpose of Grant	Amount of cash grant	disbursement
Fundacion Dance Ability Tijuana, A.C.	Mexico	Charitable Purposes	11,715	Check/Wire
Fundacion de Agentes Aduanales para la Asistencia Infantil A.C. (CAAAREM)	Mexico	Charitable Purposes	35,000	Check/Wire
Fundacion Dibujando un Manana, A.C.	Mexico	Charitable Purposes	33,718	Check/Wire
Fundación Internacional de la Comunidad, A.C.	Mexico	Charitable Purposes	102,182	Check/Wire
Fundacion John Langdon Down	Mexico	Charitable Purposes	4,550	Check/Wire
Fundacion Mozcalti, A.C.	Mexico	Charitable Purposes	43,311	Check/Wire
Fundacion Olga y Rufino Tamayo	Mexico	Charitable Purposes	20,000	Check/Wire
Fundacion Sarahuaro, A.C.	Mexico	Charitable Purposes	1,665	Check/Wire
Fundacion Tijuana Sin Hambre, A.C.	Mexico	Charitable Purposes	43,408	Check/Wire
Fundación Tu mas Yo, A.C.	Mexico	Charitable Purposes	900	Check/Wire
FundacionMozcalti	Mexico	Charitable Purposes	19,114	Check/Wire
Fundcaion de Apoyo Infantil Guanajuato	Mexico	Charitable Purposes	10,000	Check/Wire
Gala de Danza, AC	Mexico	Charitable Purposes	15,000	Check/Wire
Grupo Ambiental del Corredor Cerralvo A.C.	Mexico	Charitable Purposes	4,650	Check/Wire
Grupo Ecologico Sierra Gorda I.A.P	Mexico	Charitable Purposes	30,000	Check/Wire
Grupo Ecologista Antares, A.C.	Mexico	Charitable Purposes	30,000	Check/Wire
Grupo Tortuguerode las Californias, A.C.	Mexico	Charitable Purposes	25,000	Check/Wire
Impulsando al Golf de Alto Rendimiento Mexicano A.C.	Mexico	Charitable Purposes	26,590	Check/Wire
inSite Proyectos de Arte, A.C.	Mexico	Charitable Purposes	35,000	Check/Wire
Instituto de Madre Asunta, A.C.	Mexico	Charitable Purposes	2,500	Check/Wire
Instituto Madre Assunta, AC	Mexico	Charitable Purposes	7,200	Check/Wire
Instituto Todos Educando, A.C.	Mexico	Charitable Purposes	11,190	Check/Wire
Integracion Social Veter, A.C.	Mexico	Charitable Purposes	25,000	Check/Wire
Jovenes Adelante, A.C.	Mexico	Charitable Purposes	10,000	Check/Wire
Los Cabos Children's Foundation, A.C	Mexico	Charitable Purposes	50,000	Check/Wire
Los Cabos Coastkeeper, A.C.	Mexico	Charitable Purposes	25,000	Check/Wire
Los Cabos Humane Society, A.C.	Mexico	Charitable Purposes	25,000	Check/Wire
Mitigare Cuidados Paliativos, A.C.	Mexico	Charitable Purposes	11,000	Check/Wire
Noroeste Sustentable, A.C.	Mexico	Charitable Purposes	45,000	Check/Wire
Oceanides Conservación y Desarrollo Marino, A.C.	Mexico	Charitable Purposes	40,000	Check/Wire
Ojala Niños, A.C.	Mexico	Charitable Purposes	7,000	Check/Wire
Palapa Society of Todos Santos, A.C.	Mexico	Charitable Purposes	200,000	Check/Wire
Pasitos Pre Escolar Especial, A.C.	Mexico	Charitable Purposes	8,500	Check/Wire
Patronato Pro Hospital Civil de Tijuana AC	Mexico	Charitable Purposes	2,000	Check/Wire
Pedacito de Cielo en Construccion, A.C.	Mexico	Charitable Purposes	22,500	Check/Wire

Name of Organization	Dogion	Dumass of Cuant	Amount of each arout	Manner of cash disbursement
Name of Organization Pelegios Kakunja, A.C.	Region Mexico	Purpose of Grant Charitable Purposes	Amount of cash grant	Check/Wire
Ponguinguiola, A.C.	Mexico	Charitable Purposes	·	Check/Wire
Prevencasa, A.C.	Mexico	Charitable Purposes	·	Check/Wire
Pro Esteros	Mexico	Charitable Purposes	•	Check/Wire
Programa YMCA de Desarollo Comunitario y Asistencia Social, A.C.	Mexico	Charitable Purposes	·	Check/Wire
Pronatura Noroeste, A.C.	Mexico	Charitable Purposes	·	Check/Wire
Proyecto Salesiano Tijuana, A.C.	Mexico	Charitable Purposes	•	Check/Wire
ProyectoFronterizo de Educacion Ambiental	Mexico	Charitable Purposes	•	Check/Wire
Puente a la Salud Comunitaria, A.C.	Mexico	Charitable Purposes	•	Check/Wire
Raiz de Fondo Jardines y Educacion, A.C.	Mexico	Charitable Purposes	·	Check/Wire
Red de Observadores Ciudadanos, A.C.	Mexico	Charitable Purposes	175,000	Check/Wire
Registro de Cancer de BCS, AC	Mexico	Charitable Purposes	98,250	Check/Wire
Reinserta un Mexicano, A.C.	Mexico	Charitable Purposes	10,000	Check/Wire
Restauremos El Colorado, A.C.	Mexico	Charitable Purposes	9,300	Check/Wire
Sistemas Naturales y Desarollo, A.C.	Mexico	Charitable Purposes	10,000	Check/Wire
Sociedad de Historia Natural Niparaja, A.C.	Mexico	Charitable Purposes	432,810	Check/Wire
Solidaridad en Exodo, A.C.	Mexico	Charitable Purposes	29,253	Check/Wire
Studio Dance Ability Tijuana Mexico, A.C.	Mexico	Charitable Purposes	770	Check/Wire
Terra Peninsular, A.C.	Mexico	Charitable Purposes	143,643	Check/Wire
The American School Foundation, A.C.	Mexico	Charitable Purposes	10,000	Check/Wire
The Palapa Society of Todos Santos, A.C Tierralegre A.C. Transplante y Vida IAP Unidos Somos Familia, A.C.	Mexico	Charitable Purposes	265,000	Check/Wire
Tierralegre A.C.	Mexico	Charitable Purposes	8,600	Check/Wire
Transplante y Vida IAP	Mexico	Charitable Purposes	7,500	Check/Wire
Unidos Somos Familia, A.C.	Mexico	Charitable Purposes	8,000	Check/Wire
Via International	Mexico	Charitable Purposes	2,500	Check/Wire
Voces y Visiones de Malinalco, A.C.	Mexico	Charitable Purposes	52,000	_Check/Wire
NORTH AMERICA TO	OTAL		8,023,427	
Future Generation, Inc	China	Charitable Purposes	90,742	Check/Wire
ASIA TO	OTAL		90,742	_
Т	OTAL		10,450,124	_

SCHEDULE I (Form 990)

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

OMB No. 1545-0047 2021

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization Employer identification number 33-0457858 INTERNATIONAL COMMUNITY FOUNDATION Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?..... No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC section (if applicable) (b) EIN (d) Amount of cash grant (e) Amount of noncash (f) Method of valuation 1 (a) Name and address of organization (a) Description of (h) Purpose of grant or government (book, FMV, appraisal, noncash assistance or assistance assistance (1) SEE ATTACHMENT 2505 N AVENUE FAIR MARKET 501 (C) (3) O. VALUE NATIONAL CITY, CA 91950 2,192,152 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 34 3 Enter total number of other organizations listed in the line 1 table.....

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
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2					
3					
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Part IV | Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

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

- 1. WE RECEIVE THE GRANT RECOMMENDATION FORM COMPLETED AND SIGNED BY A FUND ADVISOR.
- 2. WE VERIFY NONPROFIT STATUS OF THE GRANTEE AND REQUEST FORMAL NONPROFIT DOCUMENTATION. THE FOLLOWING ARE REQUESTED FOR ALL GRANTEES:
- -501 (C) (3) OR FOREIGN EQUIVALENT DOCUMENTATION PROVIDED BY THE TREASURY DEPARTMENT
- OR TAX AUTHORITY FROM THE GOVERNMENT OF THE GRANTEE IN QUESTION
- -BY-LAWS
- -DETERMINATION LETTER FOR TAX EXEMPT STATUS
- -LIST OF BOARD OF GOVERNORS AND THEIR AFFILIATION
- -A BRIEF DESCRIPTION OF THE GRANTEE'S ORGANIZATION (MISSION, VISION, OBJECTIVES,

2021

SCHEDULE I, PART IV - SUPPLEMENTAL INFORMATION PAGE 3

CLIENT 03695

INTERNATIONAL COMMUNITY FOUNDATION

33-0457858

5/11/23

11:28AM

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

CURRENT PROGRAMS) AND ANNUAL OPERATING BUDGET

- -A PROPOSAL FOR EACH NEW GRANT
- -GRANTEE'S FINANCIAL INSTITUTION ACCOUNT NAME AND NUMBER
- 3. VARIOUS WEBSITES ARE CHECKED FOR BLOCKED PERSONS AND ORGANIZATIONS, AND A RISK ASSESSMENT IS MADE FOR EACH GRANTEE.
- 4. GRANT RECOMMENDATION IS SUBMITTED TO INTERNATIONAL COMMUNITY FOUNDATION BOARD OF DIRECTORS FOR APPROVAL.
- 5. UPON BOARD APPROVAL (MAJORITY MUST APPROVE), ICF WILL ISSUE AN AWARD LETTER-CONTRACTUAL AGREEMENT TO THE GRANTEE TO RECEIVE FUNDING.
- 6. THE AWARD LETTER IS SIGNED BY GRANTEE'S EXECUTIVE DIRECTOR OR FINANCIAL OFFICER AND RETURNED TO OUR FOUNDATION.
- 7. A CHECK (OR WIRE TRANSFER) IS SENT TO THE RECIPIENT ORGANIZATION.
- 8. FUND ADVISOR IS NOTIFIED BY EMAIL OR TELEPHONE CALL THAT FUNDS WERE SENT TO THE GRANTEE.
- 9. ICF PERFORMS FOLLOW UP AND EVALUATION WITH THE GRANTEE. THIS VARIES FROM PROJECT TO PROJECT.
- 10. GRANTEE SUBMITS A COMPLETE REPORT FOR FUNDING RECEIVED 6 MONTHS TO A YEAR AFTER THE FUNDING WAS AWARDED (NARRATIVE AND FINANCIAL).

2021

SCHEDULE I, PART IV - SUPPLEMENTAL INFORMATION

CLIENT 03695

INTERNATIONAL COMMUNITY FOUNDATION

33-0457858

PAGE 4

5/11/23

11:28AM

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

11. SITE VISITS ARE DONE ON AN AD HOC BASIS.



International Community Foundation EIN 33-0457858 2021 IRS Form 990 Attachment for Schedule I, Part II, Line 1

Organization Name	Address	Address 2	IRC Section	Grant Amount
Baja Community Foundation	300 Lakeside Ave	Seattle, WA, 98144	501(c)(3)	3,420
Yes We Can World Foundation	P.O. Box 14	Burbank, CA, USA 91503	501(c)(3)	31,900
World Central Kitchen	655 New York Ave NW, 6th Floor	Washington DC 20001	501(c)(3)	71,894
WildCoast	925 Seacoast Drive	Imperial Beach, CA, 91932	501(c)(3)	12,500
We the Women	4700 Wilshire Blvd	Los Angeles, CA, 90010	501(c)(3)	1,000
Via International	1955 Julian Avenue	San Diego, CA, 92113	501(c)(3)	10,000
US-Mexico Border Philanthrophy Partnership	2508 Historic Decatur Road, Suite 130	San Diego, CA, 92106	501(c)(3)	8,800
University of Miami	4600 Rickenbacker Causeway	Key Biscayne, FL, 33149	501(c)(3)	580,000
UC Berkeley Foundation	2080 Addison Street	Berkeley, CA, 94720-4200	501(c)(3)	100,000
The Satyana Institute	PO Box 17904	Boulder, CO, 80308	501(c)(3)	20,000
The Mathile Institute for the Advancement of Human Nutrition	6450 Sand Lake Road	Dayton, OH, 45402	501(c)(3)	30,000
Southern California Coastal Water Research Project Authority	22165 Chuck Wagon Rd	Ramona, CA, 92065	501(c)(3)	21,446
Sonoran Institute	100 N Stone Ave Ste 1001	Tucson, AZ, 85701	501(c)(3)	40,080
Seawatch, Inc.	2929 North Suttle Rd #12	Portland, OR, 97217	501(c)(3)	40,000
Seattle International Foundation	1601 5th Avenue, Suite 1900	Seattle, WA, 98101	501(c)(3)	5,000
Scripps Institution of Oceanagraphy	9500 Gilman Drive MC 0210	La Jolla, CA, 92093-0210	501(c)(3)	160,872
Refugee Health Alliance	8861 Villa La Jolla Dr. #12062	La Jolla, CA, 92037	501(c)(3)	5,000
Projecto Amigo	936 B 7th St #168	Novato, CA 94945	501(c)(3)	166,750
Olivewood Gardens & Learning Center	2525 N Avenue	National City, CA, 91950	501(c)(3)	405,381
MigraMar	PO BOX 370	Forest Knolls, CA 94933	501(c)(3)	97,060
Jewish Federation of Greater Portland	9900 SW Greenburg Road, Ste 220	Tigard, OR, 97223	501(c)(3)	4,650
Institute of the Americas	10111 N. Torrey Pines Road	La Jolla, CA, 92037	501(c)(3)	5,000
Immigrant Defenders Law Center	634 South Spring Street 10th Floor	Los Angeles, CA, 90014	501(c)(3)	49,630
Hispanics in Philanthropy	414 13th Street, Suite 200	Oakland, CA, 94612	501(c)(3)	10,000
Global Fund for Children	1101 Fourteenth St., NW Ste 910	Washington, DC, 20005	501(c)(3)	100,000
Funder's Network for Smart Growth and Livable Communities	6705 SW 57th Ave. Ste 700	Coral Gables, FL, 33143	501(c)(3)	5,000
Faith in Practice	7500 Beechnut Street, Suite 208	Houston, TX, 77074	501(c)(3)	25,500
Environmental Law Alliance Worldwide	1877 Garden Avenue	Eugene, OR, 97403	501(c)(3)	40,000
Environmental Health Coalition	2727 Hoover Ave. Suite 202	National City, CA, 91950	501(c)(3)	57,000
Dana-Farber Cancer Institute	450 Brookline Ave	Boston, MA, 02215	501(c)(3)	1,000
Children International	2000 E Red Bridge Rd.	Kansas City, MO, 64131-3610	501(c)(3)	40,000
Catalyst of San Diego & Imperial Counties	5060 Shoreham Place, Ste 350	San Diego, CA, 92122	501(c)(3)	1,000
CAT - Cetacean Action Treasury	PO BOX 332	Cape Neddick, ME, 03902	501(c)(3)	25,000
Brazil Foundation	216 E 45th St Suite 1204	New York City, NY, 10001	501(c)(3)	17,269
Total Grants in the United States				2,192,152

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

► Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

INTERNATIONAL COMMUNITY FOUNDATION

Employer identification number

33-0457858

Pai	rt I Questions Regarding Compensation			
			Yes	No
1 a	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
ı	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain	1 b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/ Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee X Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
	a Receive a severance payment or change-of-control payment?	4 a		Χ
	b Participate in or receive payment from a supplemental nonqualified retirement plan?	4 b		X
•	c Participate in or receive payment from an equity-based compensation arrangement?	4 c		X
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
i	a The organization?	5a		Χ
	b Any related organization?	5 b		X
	If 'Yes' on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
i	a The organization?	6a		Х
	b Any related organization?	6 b		X
	If 'Yes' on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If 'Yes,' describe in Part III	7		Х
0				21
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)?			
	If 'Yes,' describe in Part III	8		Χ
9	If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations			

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

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

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

	(B) Breakdown of W-2 a	ind/or 1099-MISC and/o	r 1099-NEC compensatio	(D) Nontaxable	(F) Compensation		
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
MARTON AURORA OUTROS	104 405	0.000	0	5 (10	1 4 471	156 570	
MARISA AURORA QUIROZ	134,495.	<u>2,000</u> .	0.	5,612.	14,471.	156,578.	0.
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16 (i)						(F 000) 0001

BAA

TEEA4102L 10/27/21

Schedule J (Form 990) 2021

Part III Supplemental Information

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



TEEA4103L 10/27/21

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.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number 33-0457858

INT	TERNATIONAL COMMUNITY FOUNDATION			33-	0457858	8		
Pai	t I Types of Property							
	•	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Metho noncash o	(d d of d contrib	l) letermin oution ar	ing mounts
1	Art — Works of art							
2	Art — Historical treasures							
3	Art — Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded	Х	10	1,235,362.	FMV			
10	Securities — Closely held stock							
11	Securities — Partnership, LLC, or trust interests .							
12	Securities — Miscellaneous							
13	Qualified conservation contribution — Historic structures		12					
14	Qualified conservation contribution — Other							
15	Real estate – Residential		S					
16	Real estate — Commercial							
17	Real estate — Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens	·						
24	Archeological artifacts							
25	Other ()							
26	Other ► ()							
27	Other ► ()							
28	Other ► ()							
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part V, Dones				29			
					_		Yes	No
302	During the year, did the organization receive by contri	ibution any pr	onerty reported in Part I	lines 1 through 28 that				
500	it must hold for at least three years from the date for exempt purposes for the entire holding period	of the initial	contribution, and which	ch isn't required to be u	sed	30 a		Х
b	If 'Yes,' describe the arrangement in Part II.				ļ.			
	Does the organization have a gift acceptance poli	cy that requi	es the review of any n	nonstandard contribution	ns?	31	Х	
	Does the organization hire or use third parties or contributions?	related organ	izations to solicit, prod	cess, or sell noncash		32 a		Х
۲	of lf 'Yes,' describe in Part II.					5_ u		- 11
	If the organization didn't report an amount in colu	ımn (c) for a	type of property for wh	nich column (a) is chec	ked,			

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

Schedule M (Form 990) 2021

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

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SCHEDULE 0 (Form 990)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

INTERNATIONAL COMMUNITY FOUNDATION

Employer identification number

33-0457858

FORM 990. PART III. LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

THE INTERNATIONAL COMMUNITY FOUNDATION IS AN INTERNATIONAL NONPROFIT ORGANIZATION WITH A VISION OF COMMUNITIES AS SELF-SUSTAINING ECOSYSTEMS OF CHANGE.

ICF'S PURPOSE IS TO STRENGTHEN HUMANITY WITH COMMUNITY, WORKING ACROSS BORDERS TO CONNECT PEOPLE, IDEAS, AND INVESTMENTS IN THE TRANSFORMATIVE POWER OF COMMUNITY. ICF HAS OVER 30 YEARS OF EXPERIENCE IN BUILDING RELATIONSHIPS AND TRUST WITH GRANTEES, FUNDERS, AND OTHER PARTNERS TO FORM ALLIANCES, AND RESPOND QUICKLY AND EFFECTIVELY TO CURRENT AND FUTURE EVENTS. THE ICF TEAM SERVES AS FINANCIAL AND PHILANTHROPIC ADVISORS WITH UNIQUE CULTURAL INSIGHTS AND KNOWLEDGE OF THE COMMUNITIES AND PROGRAMS THEY SUPPORT.

IN FY22, ICF GRANTED \$12.2 MILLION TO ORGANIZATIONS WORKING THROUGHOUT THE AMERICAS AND WORKED ON DOZENS OF SPECIAL INITIATIVES IN EDUCATION, HEALTH, HUMAN SERVICES, HUMAN RIGHTS AND MIGRATION, AND ENVIRONMENT THAT SEEK INNOVATIVE SOLUTIONS TO COMPLEX ISSUES. SOME HIGHLIGHTS:

IN EDUCATION, ICF WORKS TO KEEP KIDS IN SCHOOL AND IMPROVE THE QUALITY OF EDUCATION IN MEXICO AND OTHER LATIN AMERICAN COUNTRIES, THROUGHOUT SCHOLARSHIPS, PROFESSIONAL FELLOWSHIPS, AND INNOVATIVE ART, MUSIC, LIBRARY, AND SPORTS PROGRAMS.

FOR THE ENVIRONMENT, ICF FOCUSES ON COASTAL, MARINE AND TERRESTRIAL AREAS OF HIGH BIODIVERSITY AND NATIVE AND MIGRATORY SPECIES. ICF HELPS TACKLE TOUGH ISSUES LIKE CLEAN AIR, GROUNDWATER PROTECTION, URBAN MOBILITY AND LAND-USE ZONING IN COASTAL COMMUNITIES.

Name of the organization

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

IN HEALTH, ICF SEEKS CREATIVE AND FAR-REACHING PARTNERSHIPS TO SOLVE CHRONIC AND COMMUNICABLE DISEASES, SUCH AS CANCER AND DENGUE, AND WORKS TO IMPROVE ACCESS TO QUALITY HEALTHCARE FOR COMMUNITIES IN MEXICO.

IN SUPPORTING HUMAN RIGHTS/MIGRATION, ICF WORKS TO RAISE AWARENESS AND PROVIDE FUNDING TO CIVIL SOCIETY ORGANIZATIONS DEALING WITH SEPARATED/REUNIFIED CHILDREN AND FAMILIES AT THE U.S.-MEXICO BORDER.

FOR INNOVATION IN FOOD SYSTEMS, ICF LAUNCHED THE "NORTHERN BAJA FOOD SECURITY"

INITIATIVE TO SUPPORT IMMEDIATE FOOD RELIEF WHILE FINDING WAYS TO STRATEGICALLY

STRENGTHEN THE ECOSYSTEM OF ORGANIZATIONS WORKING TO CREATE ENDURING ACCESS TO FOOD

INTO THE FUTURE. ICF GRANTED OVER \$300,000 TO SUPPORT COMMUNITY-LED FOOD ASSISTANCE

PROGRAMS, FOOD BANKS, GARDENING AND NUTRITION EDUCATION PROGRAMS AND MIGRANT

SHELTERS, AND TO CONVENE REGIONAL ORGANIZATIONS AND LEADERS COMMITTED TO PROMOTING

FOOD EQUITY AND JUSTICE.

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

THE PRESIDENT AND CEO REVIEWS THE IRS FORM 990 AND IT IS THEN SENT TO THE AUDIT COMMITTEE FOR APPROVAL. THE 990 IS THEN MADE AVAILABLE FOR REVIEW AT A BOARD OF DIRECTORS MEETING PRIOR TO THE FILING OF THE RETURN.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

THE INTERNATIONAL COMMUNITY FOUNDATION HAS A BOARD-APPROVED CONFLICT OF INTEREST

POLICY THAT COVERS ALL ASPECTS OF ITS OPERATIONS AND APPLIES TO BOARD, STAFF, AND

STANDING BOARD COMMITTEE MEMBERS. THE CONFLICT OF INTEREST POLICY IS SIGNED BY ALL

BOARD, STAFF AND STANDING COMMITTEE MEMBERS ON AN ANNUAL BASIS.

Name of the organization Employer identification number 33-0457858

THE COMPENSATION COMMITTEE OBTAINED COMPENSATION SUMMARIES FROM COUNCIL ON FOUNDATIONS. THE CURRENT COMPENSATION SURVEY FOR NONPROFITS IN THE SOUTHERN

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

CALIFORNIA REGION SERVED AS A DATA POINT FOR DETERMINING EXECUTIVE COMPENSATION.

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

INTERNATIONAL COMMUNITY FOUNDATION

THE INTERNATIONAL COMMUNITY FOUNDATION HAS AN ANNUAL REPORT THAT SHOWS SUMMARY FINANCIAL INFORMATION. THE FULL FORM 990 AND ANNUAL AUDITED FINANCIALS ARE ON THE ARI COI COI PRILICO DISCILOSURE. COI PUBLICO DISCILOSURE. COI PRILICO D ICF WEBPAGE AT WWW.ICFDN.ORG/WHO-WE-ARE. OTHER DOCUMENTS ARE AVAILABLE UPON REQUEST.

BAA Schedule O (Form 990) 2021

TEEA4902L 08/10/21

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

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

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

INTERNATIONAL COMMUNITY FOUNDATION

Open to Public Inspection Employer identification number

33-0457858

(a) Name, address, and EIN (if applicable) of disregarded er	ntity Primary ac	ctivity Legal dom or foreign	c) nicile (state n country)	(d) Total income	End-of-ye	ear assets D	(f) rect contre entity	olling
(1)			~O ²					
<u>(2)</u>		.0	<u> </u>					
(3)		67027						
Part II Identification of Related Tax-Exempt Or had one or more related tax-exempt organized		1	1	es' on Form 990), Part IV	/, line 34, bec		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	Public charity s (if section 501(status c)(3))	(f) Direct controlling entity	Sec 512 controlle	g) 2(b)(13) ed entity?
(1) ICF CENTER FOR CROSS-BORDER PHILAN 2502 N. AVENUE NATIONAL CITY, CA 91950 26-1640148	SUPPORTING CHARITY	CA	501 C (3)	GOOD STAN	l l	NTERNATIONA	L	NO
(2)								
(3) 								
<u>(4)</u>								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections	(f) Share of total income	(g) Share of end-of-year assets	tioi	h) ropor- nate ations?	amount in box	Gene mana parti	nal or aging ner?	(k) Percentage ownership
		country)		512-514)			Yes	No	1065)	Yes	No	
<u>(1)</u>												
						4						
						0,						
<u>(2)</u>												
					/,							
(2)						•						
(3)												
					S							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	Sec 512 controlled	i) (b)(13) d entity?
(1)		Countryy	entity	or trust)				Yes	No
<u>(1)</u>		\cup							
	.0								
(2)									
	X								
(3)									
(3)									
	<u> </u>								

BAA TEEA5002L 09/21/21 Schedule **R** (Form 990) 2021

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations lis	sted in Parts II-IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a		Х
b Gift, grant, or capital contribution to related organization(s)			1b	Х	
c Gift, grant, or capital contribution from related organization(s)			1с		Χ
d Loans or loan guarantees to or for related organization(s)			1 d		Х
e Loans or loan guarantees by related organization(s)					X
	4				
f Dividends from related organization(s)			1f		Х
g Sale of assets to related organization(s)					X
h Purchase of assets from related organization(s)			1h		Х
i Exchange of assets with related organization(s)					X
j Lease of facilities, equipment, or other assets to related organization(s)			1i		Х
			,		
k Lease of facilities, equipment, or other assets from related organization(s)			1k		Х
Performance of services or membership or fundraising solicitations for related organization(s)					X
m Performance of services or membership or fundraising solicitations by related organization(s)					X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				Χ	21
Sharing of paid employees with related organization(s)				71	Х
o sharing or paid simpleyees man rotated organization(s)			10		Λ
p Reimbursement paid to related organization(s) for expenses			1р		X
q Reimbursement paid by related organization(s) for expenses.				Х	Λ
Treimbarsement paid by related organization(s) for expenses.			14	Λ	
r Other transfer of cash or property to related organization(s)			1r		Х
s Other transfer of cash or property from related organization(s)					X
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered			13		Λ
			(c	1)	
(a) Name of related organization	(b) Transaction	(c) Amount involved	(c) Method of		
	type (a-s)		amount	ınvolv	ed
) ICF CENTER FOR CROSS-BORDER PHILANTHROPY	В	405,381.0	CASH		
2) ICF CENTER FOR CROSS-BORDER PHILANTHROPY	Q	1,900.0	CASH		
		·			
3)					
,					
1)					
7)					
5)					
5)					
AA TEEA5003L 09/21/21		Schedu	le R (Form	1 990)	2021

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unre- lated, excluded	Are all sec 501(organiz	partners tion (c)(3) cations?	Share of total income	(g) Share of end-of-year assets	Dispr tior alloca	h) ropor- nate ntions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana parti	ral or aging ner?	(k) Percentage ownership
			from tax under sections 512-514)	Yes	No			Yes	No	(1 01111 1005)	Yes	No	†
<u>(1)</u>							RY						
<u>(2)</u>							,						
<u>(3)</u>					C								
<u>(4)</u>			C	<u>ر</u> ک									
<u>(5)</u>			CO										
<u>(6)</u>		DUBI											
<u>(7)</u>													
<u>(8)</u>													
BAA			<u>l</u>	E 4 500 41				1		0 - 11-	ıla D /F		20\ 2021

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PUBLIC DISCLOSURE. COPY
PUBLIC DISCLOSURE.

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047

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

Automat	ic 6-Month Extension of Time. Only sub-	mit origin	al (no copies needed).		
	tions required to file an income tax return other th			ps, REMICs, and	trusts must
use Form /	7004 to request an extension of time to file income. Name of exempt organization or other filer, see instructions.	e tax return:	S.	Taxpayer identification	on number (TIN)
Type or					, ,
print	INTERNATIONAL COMMUNITY FOUND	∆ TT∩N		33-0457858	ł
File by the	Number, street, and room or suite number. If a P.O. box, see in			33 0437030	
due date for filing your	2505 N AVENUE				
return. See instructions.	City, town or post office, state, and ZIP code. For a foreign add	dress, see instru	uctions.		
manuchons.	NATIONAL CITY, CA 91950				
Enter the F	Return Code for the return that this application is for	or (file a se	parate application for each return)		01
Application	n	Return Code	Application Is For		Return Code
Form 990 o	or Form 990-EZ	01	Form 1041-A		08
Form 4720	(individual)	03	Form 4720 (other than individual)		09
Form 990-F	PF	04	Form 5227		10
	Γ (section 401(a) or 408(a) trust)	05	Form 6069		11
	(trust other than above)	06	Form 8870		12
Form 990-	Γ (corporation)	07			
If the oIf this is check t	one No. ► 619-336-2250_ rganization does not have an office or place of but so for a Group Return, enter the organization's four this box ► . If it is for part of the group, ension is for.	isiness in th digit Group	Exemption Number (GEN) . I	f this is for the wh	nole group,
for th [2]	lest an automatic 6-month extension of time until e organization named above. The extension is for calendar year 20 or, 20, 20 tax year beginning	the organiz	ng <u>6/30</u> , ²⁰ <u>22</u> .	ization return nal return	
3a If this nonre	application is for Forms 990-PF, 990-T, 4720, or sfundable credits. See instructions	6069, enter	the tentative tax, less any	3a \$	0.
	s application is for Forms 990-PF, 990-T, 4720, or ayments made. Include any prior year overpaymen			3 b \$	0.
c Balar EFTP	nce due. Subtract line 3b from line 3a. Include you 'S (Electronic Federal Tax Payment System). See	ır payment instructions	with this form, if required, by using s	3 c \$	0.
Caution: If payment in	you are going to make an electronic funds withdrastructions.	awal (direct	debit) with this Form 8868, see Form 8	453-TE and Form	8879-TE for

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2022)