Extended to August 15, 2022

Form **990**

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

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

ax year beginning OCT 1 . 2020 and ending SEP 30 .

Open to Public Inspection

\overline{A}	For the	2020 calendar year, or tax year beginning $\overline{\text{OCT 1}}$, $\overline{2020}$ and ending	SEP 30, 2021							
			D Employer identifi							
	Check if applicable	:	,							
	Addres	The Pacifica Foundation								
Ē	Name change		94-13470	46						
Ē	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/s								
Ē	Final	3729 Cahuenga Blvd. West	818-985-							
	return/ termin- ated		G Gross receipts \$	11,332,839.						
Г	Ameno		H(a) Is this a group re							
F	Application		for subordinates							
	pendin	same as C above	H(b) Are all subordinates in	—						
$\overline{}$	Tayloye	empt status: X 501(c)(3)		list. See instructions						
		e: www.pacifica.org	H(c) Group exemption							
			Year of formation: 1946							
	Part I	Summary	real of formation. 23 29 p	1 Otate of logal dofficie. 922						
_	T	Briefly describe the organization's mission or most significant activities: Listener	-supported							
Governance	'	non-commercial education and community publ	ic radio orga	nization						
nan		non-commercial, education and community public radio organization. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.								
Veri	2		_	22						
Ó	3			22						
જ	; "	Number of independent voting members of the governing body (Part VI, line 1b)	T	141						
ţį	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)		1000						
Activities	6	Total number of volunteers (estimate if necessary)		0.						
A	/a	Total unrelated business revenue from Part VIII, column (C), line 12		0.						
_	В	Net unrelated business taxable income from Form 990-T, Part I, line 11								
		0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Prior Year 10,746,721.	Current Year 10,569,687.						
ne	8	Contributions and grants (Part VIII, line 1h)		444,384.						
Revenue	9	Program service revenue (Part VIII, line 2g)	539,668.	-						
Be	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	26,290.	3,461.						
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	613,628.	315,307.						
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11,926,307.	11,332,839.						
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.						
	1	Benefits paid to or for members (Part IX, column (A), line 4)	I .	0.						
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	6,475,947.	6,327,387.						
ens	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.						
QX.	- b	Total fundraising expenses (Part IX, column (D), line 25) 1,025,982.	4 760 260	F 011 0F7						
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,760,269.							
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	11,236,216.	22- 22-						
		Revenue less expenses. Subtract line 18 from line 12	690,091.	-205,605.						
Net Assets or	55		Beginning of Current Year	End of Year						
Sset	[20	Total assets (Part X, line 16)	3,689,886.	3,771,697.						
et A	[21 ·	Total liabilities (Part X, line 26)	4,916,323.	5,013,346.						
		Net assets or fund balances. Subtract line 21 from line 20	-1,226,437.	-1,241,649.						
_	art II	Signature Block								
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and st	-	y knowledge and belief, it is						
tru	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which pre								
		Signature of officer	08/11/22							
Si			Date							
He	ere	Stephanie Wells, Executive Director								
		Type or print name and title	I Data I	I DTIN						
_		Print/Type preparer's name Tie Chen CPA Preparer's signature	Date Check Check Check If	PTIN						
Pa		ore chen, CPA	Self-employ							
	eparer	Firm's name Rogers & Company PLIC	Firm's EIN ▶	58-2676261						
Us	e Only	Firm's address 8300 Boone Boulevard, Suite 600	, -	021 002 0200						
_		Vienna, VA 22182	Phone no. (7	03) 893-0300						
Ma	av the IF	RS discuss this return with the preparer shown above? See instructions		X Yes No						

Pai	Check if Schoolule O contains a response or note to any line in this Bort III	
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission:	<u></u>
•	The Pacifica Foundation is a non-commercial, listener-supporte	· D
	education and community public radio organization operating in	various
	markets throughout the country.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(4) organizations are required to report the amount of grants and allocations to other section 501(c)(4) organizations are required to report the section 501(c)(4) organization 501(c)(4) organizatio	expenses, and
_	revenue, if any, for each program service reported.	111 301 /
4a	(Code:) (Expenses \$ 4,901,557. including grants of \$) (Revenue \$ The Pacifica Foundation owns and operates five non-commercial	radio
	stations, and provides copies of radio programs to other non-c	ommercial
	radio stations, schools, colleges, universities, and other ind	
	The Foundation provides archived materials from historical eve	
	previous Pacifica Foundation radio programs, and events to oth	
	commercial and non-commercial media companies, schools, colleg	es,
	universities, and individuals.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
_		
4c	(Code:) (Expenses \$)
4d	Other program services (Describe on Schedule O.)	
чu	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 4,901,557.	ı
		Form 990 (2020)

Form 990 (2020) The Pacifica Foundation Part IV Checklist of Required Schedules

			Yes	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	1	х	
2	If "Yes," complete Schedule A	2	- 21	Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
3	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	<u> </u>		
	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? If "Yes," complete Schedule D, Part II	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	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			٦,
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			3,7
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			₩.
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	4-		v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			₩.
••	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

Form 990 (2020) The Pacifica Foundation

Part IV | Checklist of Required Schedules (continued)

22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current						
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete						
04-	Schedule J	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		Х			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b					
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease						
	any tax-exempt bonds?	24c					
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d					
2 5a	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	200					
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete						
	Schedule L, Part I	25b		Х			
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current						
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%						
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X			
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled						
	entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		х			
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV						
	instructions, for applicable filing thresholds, conditions, and exceptions):						
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			37			
	"Yes," complete Schedule L, Part IV	28a		X			
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	28b		Α.			
·	"Yes," complete Schedule L, Part IV	28c		х			
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х				
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation						
	contributions? If "Yes," complete Schedule M	30		X			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		X			
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		1			
•	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х			
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and						
	Part V, line 1	34		X			
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х			
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b					
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330					
00	If "Yes," complete Schedule R, Part V, line 2	36		х			
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization						
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI						
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v				
Pai	Note: All Form 990 filers are required to complete Schedule 0 t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х				
· al	Check if Schedule O contains a response or note to any line in this Part V						
	entering continues to contain a responde of flote to diffy fill of the V		Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable						
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		77				
	(gambling) winnings to prize winners?	1c	X				

Form 990 (2020) The Pacifica Foundation

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

					Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1	1 [162	NO			
	filed for the calendar year ending with or within the year covered by this return	2a	141						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	Х				
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)								
За				3a		Х			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b					
	At any time during the calendar year, did the organization have an interest in, or a signature or other								
	financial account in a foreign country (such as a bank account, securities account, or other financial	acco	unt)?	4a		Х			
b	If "Yes," enter the name of the foreign country ▶								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5а	5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?								
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?								
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he org	ganization solicit			3,7			
	any contributions that were not tax deductible as charitable contributions?			6a		X			
b	If "Yes," did the organization include with every solicitation an express statement that such contribu		-						
_	were not tax deductible?			6b					
7	Organizations that may receive deductible contributions under section 170(c).	rvicos	provided to the payor?	70		х			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se			7a 7b					
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
·	to file Form 8282?	/a3 1C	quiicu	7c		x			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d							
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?								
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		Х			
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?								
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?								
9	Sponsoring organizations maintaining donor advised funds.								
а	a Did the sponsoring organization make any taxable distributions under section 4966?								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b					
10	Section 501(c)(7) organizations. Enter:	1	1						
	Initiation fees and capital contributions included on Part VIII, line 12	10a							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b							
11	Section 501(c)(12) organizations. Enter:	1440	1						
	Gross income from members or shareholders	11a							
b	amounts due or received from them.)	11b							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		•	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	ı						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?			13a					
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans								
	Enter the amount of reserves on hand								
	la Did the organization receive any payments for indoor tanning services during the tax year?								
	b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O								
15									
	excess parachute payment(s) during the year?								
46	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?								
16		iii ii)C	JITIE!	16		X			
	If "Yes," complete Form 4720, Schedule O.								

Form 990 (2020)

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			X			
Sec	tion A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year la 22						
	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 1b 22						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other						
	officer, director, trustee, or key employee?	2		х			
3	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		х			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X			
6	Did the organization have members or stockholders?	6	Х				
7a	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or	-					
1 a		7a	х				
	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	/a	21				
b		- 1.	Х				
_	persons other than the governing body?	7b	Λ				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		v				
	The governing body?	8a	X				
b	Each committee with authority to act on behalf of the governing body?	8b	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	_		7.7			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)						
			Yes	No			
	Did the organization have local chapters, branches, or affiliates?	10a	Х				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,		37				
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		Х				
12a	2a Did the organization have a written conflict of interest policy? If "No," go to line 13						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe						
	in Schedule O how this was done	12c	X				
13	Did the organization have a written whistleblower policy?	13	Х				
14	Did the organization have a written document retention and destruction policy?	14	Х				
15	Did the process for determining compensation of the following persons include a review and approval by independent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official	15a	X				
b	Other officers or key employees of the organization	15b	X				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a						
	taxable entity during the year?	16a		Х			
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					
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶AK, AL, AR, CA, CT, FL, GA, HI, IL	,KS	, KY	, MA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3						
	for public inspection. Indicate how you made these available. Check all that apply.	, ,					
	X Own website Another's website X Upon request Other (explain on Schedule O)						
19	,						
	statements available to the public during the tax year.						
20	State the name, address, and telephone number of the person who possesses the organization's books and records						
	Tamra Swiderski - 803-978-1582						
	939 South Stadium Road, Columbia, SC 29201						

Form 990 (2020) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) 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.

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

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

(A)	(B)		(C)		(D)	(D) (E)				
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week	\vdash		u a u	10010	17 11 03	1	from	from related	other
	(list any hours for	directo				p		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	ee or	stee			nsate		(W-2/1099-MISC)	(11 2) 1000 111100)	organization
	organizations	Itrus	nal tru		oyee	ombe				and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) Anita Sims	line) 20.00	i E	lus	#0	Ş.	E E	휸			
(I) Anita Sims Interim CFO	20.00	-		х				35,000.	0.	0.
(2) Alex Steinberg	2.00							33,000.	0.	<u> </u>
Chair	2.00	x		Х				0.	0.	0.
(3) Sandra Rawline	2.00									
Vice Chair	2100	x		х				0.	0.	0.
(4) Polina Vasiliev	2.00							-		
Secretary		Х		Х				0.	0.	0.
(5) Chris Cory	2.00									
Treasurer		Х		Х				0.	0.	0.
(6) Vanessa Dixon-Briggs	2.00									
Board Member		Х						0.	0.	0.
(7) Lynden Foley	2.00									
Board Member		Х						0.	0.	0.
(8) Jose S. Gutierrez	2.00								_	_
Board Member		Х						0.	0.	0.
(9) Heather Gray	2.00	ļ								
Board Member		Х						0.	0.	0.
(10) Julie Hewitt	2.00	,,							0	0
Board Member	2 00	Х						0.	0.	0.
(11) Sabrina Jacobs	2.00	\ •						0.	0	0
Board Member	14.00	Х						0.	0.	0.
(12) Wally James	14.00	X						0.	0.	0.
Board Member (13) Dewayne Lark	2.00	^						0.	0.	0.
Board Member	2.00	X						0.	0.	0.
(14) Ali Lexa	2.00							0.	0.	<u> </u>
Board Member	2.00	x						0.	0.	0.
(15) Jim Osborne	2.00									
Board Member		x						0.	0.	0.
(16) Ron Pinchback	2.00	<u> </u>	Н							
Board Member	3.0	х						0.	0.	0.
(17) Ralph Poynter	2.00									
Board Member		Х						0.	0.	0.
	•	•				-				F 000 (2222)

Part VII Section A. Officers, Directors, T (A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average			Pos	ition	1		Reportable	Reportable	,	Fs	timate	ed be
rame and the	hours per					than		compensation	compensation	1		nount (
	week		officer and a director/trustee					from	from relate			other	
	(list any	director						the	organizatior	าร	com	pensa	tion
	hours for	or dire				ted		organization	(W-2/1099-MI	SC)	fr	om the	Э
	related	stee (ruste			suac		(W-2/1099-MISC)				anizati	
	organizations below	al tru	onal t		oloyee	com						d relate	
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	anizatio	JIIS
(18) Lawrence Reyes	2.00												_
Board Member		Х						0.		0.			0.
(19) Shawn Rhodes	2.00	ļ											_
Board Member		Х						0.		0.			0.
(20) James Sagurton	2.00	ļ											^
Board Member	2 00	Х	_					0.		0.			0.
(21) Andrea Turner	2.00	Į.,								_			0
Board Member	2.00	Х			-			0.		0.			0.
(22) Elizabeth von Gunten Board Member	2.00	X						0.		0.			0.
(23) Tom Voorhees	2.00	122											
Board Member	2.00	x						0.		0.			0.
(24) Lydia Brazon	40.00												
Interim Executive Director		1		x				0.		0.	0.		0.
								-					
		1											
1b Subtotal							ightharpoons	35,000.		0.			0.
c Total from continuation sheets to Par	t VII, Section A							0.		0.			0.
d Total (add lines 1b and 1c)								35,000.		0.			0.
2 Total number of individuals (including be		nose	liste	ed a	.bov	e) wl	ho r	eceived more than \$100	0,000 of reportat	ole			0
compensation from the organization	<u> </u>											Yes	0 N o
2 Did the comprise ties list any former offi		1					اما		-1	ı		162	NO
3 Did the organization list any former office	, ,	,	,		,	,	_	, , ,	,		2		Х
line 1a? If "Yes," complete Schedule J for any individual listed on line 1a, is the											3		
and related organizations greater than \$	•							•	•		4		Х
5 Did any person listed on line 1a receive													
rendered to the organization? If "Yes," of	•				•	,					5		Х
Section B. Independent Contractors	•												
1 Complete this table for your five highest	t compensated in	dep	ende	ent c	cont	racto	ors t	that received more than	\$100,000 of cor	npens	ation 1	from	
the organization. Report compensation	the organization. Report compensation for the calendar year ending with or within the organization's tax year.												
(A)								(B)			((
Name and busing	ess address							Description of s	services	С	ompe	nsatio	า
NETA										l			

939 South Stadium Road, Columbia, SC 29201 Accounting/HR Alpert, Barr & Grant 332,365. 6345 Balboa Blvd., Encino, CA 91316 Legal 105,204.

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

Form **990** (2020)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Revenuè éxcluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 10,569,687. 1f 218,069 g Noncash contributions included in lines 1a-1f 1g |\$ 10,569,687 h Total. Add lines 1a-1f **Business Code** 2 a Affiliate income 515100 Program Service Revenue 208,797. 208,797. 515100 124,300 124,300 **b** Sub-carrier income Donor incentive sales 900099 67,045 67,045 900099 44,242. Community Events 44,242. f All other program service revenue g Total. Add lines 2a-2f. 444,384. Investment income (including dividends, interest, and 3,461 3,461 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses ... 6b c Rental income or (loss) d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (ii) Other assets other than inventory 7a **b** Less: cost or other basis Other Revenue 7b and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses _____ c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a Gain on accrued property tax liab 900099 427,677 427,677. **b** Website income 900099 601 601. c Other income 900099 -112,971 -112.971. d All other revenue 315,307 e Total. Add lines 11a-11d 11,332,839. Total revenue. See instructions 444,384. 318,768. 12

Form 990 (2020) The Pacifica Foundation 94

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 respon				
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service	Management and	Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	51,667.	37,322.	10,222.	4,123.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	4,625,585.	3,341,349.	915,103.	369,133.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	65,439.	45,871.	14,340.	5,228.
9	Other employee benefits	1,165,416.	407,679.	719,790.	37,947.
10	Payroll taxes	419,280.	301,357.	83,892.	34,031.
11	Fees for services (nonemployees):				
а	Management				
b	Legal	548,491.		548,491.	
С	Accounting	476,648.		476,648.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	740 100	20 500	F27 072	174 500
	column (A) amount, list line 11g expenses on Sch 0.)	740,100.	28,500.	537,072.	174,528.
12	Advertising and promotion	15,955.	142 220	1,152.	14,803.
13	Office expenses	894,749. 201,206.	143,338.	637,960. 109,372.	113,451. 14,160.
14	Information technology	201,200.	77,674.	109,372.	14,100.
15	Royalties	347,455.	3,136.	344,319.	
16	Occupancy	28,189.	3,638.	24,551.	
17	Travel	20,109.	3,030.	24,331.	
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	284,887.	14,183.	210,216.	60,488.
19	Conferences, conventions, and meetings	215,807.	14,103.	215,807.	00,400
20	Payments to affiliates	213,007.		213,007.	
21 22	Depreciation, depletion, and amortization	202,244.	88,554.	113,586.	104.
23	lan	219,313.	00,0011	219,313.	
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 0.)				
а	Tower rent/ utilities	601,499.	292,464.	309,035.	
b	Direct mail	211,338.	1,412.	15,868.	194,058.
С	Programming costs	187,286.	109,611.	74,100.	3,575.
d	Permits, fines and fili	30,709.	695.	30,014.	-
e	All other expenses	5,181.	4,774.	54.	353.
25	Total functional expenses. Add lines 1 through 24e	11,538,444.	4,901,557.	5,610,905.	1,025,982.
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 X if following SOP 98-2 (ASC 958-720)				
					C 000 (0000)

Ра	ILΛ	Dalance Sheet					
		Check if Schedule O contains a response or not	e to ar	y line in this Part X			<u></u>
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	670,401.	1	793,179.		
	2	Savings and temporary cash investments			1,237,980.	2	665,380.
	3	Pledges and grants receivable, net			218,023.	3	104,573.
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the	se pers	ons		5	
	6	Loans and other receivables from other disquali	fied pe	rsons (as defined			
		under section 4958(f)(1)), and persons describe	d in se	ction 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			44,639.	8	30,901.
Ä	9	Prepaid expenses and deferred charges			12,421.	9	14,570.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	10,441,629.			
	b	Less: accumulated depreciation	10b	1,454,340.	10c	1,422,928.	
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line		12	685,164.		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		52,082.	15	55,002.	
	16	Total assets. Add lines 1 through 15 (must equ	al line 3	33)	3,689,886.	16	3,771,697.
	17	Accounts payable and accrued expenses			1,642,989.	17	1,600,846.
	18	Grants payable				18	
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
es	22	Loans and other payables to any current or form	ner offi	cer, director,			
≣		trustee, key employee, creator or founder, subs	tantial	contributor, or 35%			
Liabilities		controlled entity or family member of any of the			2 165 000	22	2 165 000
_	23	Secured mortgages and notes payable to unrela			3,165,000.	23	3,165,000.
	24	Unsecured notes and loans payable to unrelate		_	108,334.	24	247,500.
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	17-24). Complete Part X			
		of Schedule D		·····	1 016 222	25	F 012 246
	26	Total liabilities. Add lines 17 through 25			4,916,323.	26	5,013,346.
S		Organizations that follow FASB ASC 958, che	ck her	e 🏲 🔼			
20		and complete lines 27, 28, 32, and 33.			-2,049,014.		2 114 212
ala	27				822,577.	27	-2,114,312. 872,663.
P E	28	Net assets with donor restrictions			044,311.	28	0/2,003.
필		Organizations that do not follow FASB ASC 9	58, ch	eck here 🕨 📖			
٥		and complete lines 29 through 33.				00	
ets	29	Capital stock or trust principal, or current funds				29	
\SS.	30	Paid-in or capital surplus, or land, building, or ed				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in			-1,226,437.	31	-1,241,649.
Z	32	Total net assets or fund balances			3,689,886.	32	3,771,697.
	33	Total liabilities and net assets/fund balances			3,009,000.	33	3,111,031.

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI				Ш.		
1 2 3 4 5 6 7 8	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments	1 2 3 4 5 6 7 8	11,33 11,53 -20 -1,22	2,8 8,4 5,6 6,4	<u>44.</u> 05.		
9	Other changes in net assets or fund balances (explain on Schedule O)	9			<u> </u>		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))						
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				X		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.	-	Yes	No		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X		
b	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:						
c	■ Separate basis □ Consolidated basis □ Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit.					
•	review, or compilation of its financial statements and selection of an independent accountant?		2c	х			
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit					
	Act and OMB Circular A-133?		3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>		

Form **990** (2020)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

The Pacifica Foundation 94-1347046 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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.

f	Enter the number of supported	organizations									
g	g Provide the following information about the supported organization(s).										
	(i) Name of supported	(ii) EIN	(iii) Type of organization [in vour		inization listed ing document?	(v) Amount of monetary	(vi) Amount of other				
	organization		(described on lines 1-10 above (see instructions))	Yes No		support (see instructions)	support (see instructions)				
Tota	al										

Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III

functionally integrated, or Type III non-functionally integrated supporting organization.

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	9,939,354.	9,954,338.	11,424,189.	10,746,721.	10,569,687.	52,634,289.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	9,939,354.	9,954,338.	11,424,189.	10,746,721.	10,569,687.	52,634,289.
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)						
	Public support. Subtract line 5 from line 4.						52,634,289.
	ction B. Total Support	1			1		
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 4	9,939,354.	9,954,338.	11,424,189.	10,746,721.	10,569,687.	52,634,289.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	00 424	114 250	00 560	06 000	2 461	000 202
	and income from similar sources	99,434.	114,370.	28,768.	26,290.	3,461.	272,323.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	122 200	01 151	0 205 500	125 710	215 207	2 062 255
	assets (Explain in Part VI.)	132,389.	84,431.	2,395,500.	135,/10.	315,307.	
	Total support. Add lines 7 through 10					10 2	55,969,969. ,904,285.
12	Gross receipts from related activities,						, 904 , 200 •
13	First 5 years. If the Form 990 is for th			•	•	. , . ,	. —
800	organization, check this box and storection C. Computation of Publ		roontago				P
	-			actume (f)		44	94.04 %
	Public support percentage for 2020 (I					15	94.04 %
15	Public support percentage from 2019 33 1/3% support test - 2020. If the company is the company in the company in the company is the company in the company is the company in the company in the company in the company is the company in the company i						
100	stop here. The organization qualifies	J		,		*	
h	33 1/3% support test - 2019. If the o						
	and stop here. The organization qual						
172	10% -facts-and-circumstances tes						
176	and if the organization meets the fact	ū					*
	meets the facts-and-circumstances to		·	•		· ·	
h	10% -facts-and-circumstances tes	•	•		•	 17a and line 15 is	
	more, and if the organization meets the	_					.570 01
	organization meets the facts-and-circ		•				
18	Private foundation. If the organization						s

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.)

Se	ction A. Public Support								
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")								
2	Gross receipts from admissions,								
	merchandise sold or services per-								
	formed, or facilities furnished in								
	any activity that is related to the organization's tax-exempt purpose								
3	Gross receipts from activities that								
_	are not an unrelated trade or bus-								
	iness under section 513								
4									
·	ization's benefit and either paid to								
	or expended on its behalf								
5	The value of services or facilities								
J	furnished by a governmental unit to								
	the organization without charge								
6	Total. Add lines 1 through 5								
7 6	Amounts included on lines 1, 2, and								
ŀ	3 received from disqualified persons 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								
	Add lines 7a and 7b								
	Public support. (Subtract line 7c from line 6.)								
	·	() 0040	(1.) 0047	() 0010	1 (1) 0040	() 0000	(0 T		
	endar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total		
	Amounts from line 6 Gross income from interest,								
IUa	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources								
K	Unrelated business taxable income								
	(less section 511 taxes) from businesses								
	acquired after June 30, 1975								
	Add lines 10a and 10b								
"	Net income from unrelated business activities not included in line 10b,								
	whether or not the business is								
40	regularly carried on								
12	Other income. Do not include gain or loss from the sale of capital								
	assets (Explain in Part VI.)								
	Total support. (Add lines 9, 10c, 11, and 12.)								
14	First 5 years. If the Form 990 is for the	ne organization's fi	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	ion,		
_			•				>		
	ction C. Computation of Publ					1 1			
	Public support percentage for 2020 (15	<u>%</u>		
	Public support percentage from 2019					16	%		
	ction D. Computation of Inves								
17	Investment income percentage for 20					17	%		
18						18	%		
198	a 33 1/3% support tests - 2020. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	17 is not		
	more than 33 1/3%, check this box a	nd stop here. The	organization quali	fies as a publicly s	supported organiza	ation	▶∟		
k	o 33 1/3% support tests - 2019. If the								
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies a	as a publicly suppo	orted organization	▶⊒		
20	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization								

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

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

		Yes	No
	_		
	1		
	2		
	За		
	Ja		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b 5c		
	oc		
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	J		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	46.		
m O	10b 90 or 99	10-E7	2020
9	50 OI 33	,, <u>, , , , , , , , , , , , , , , , , ,</u>	2020

	t IV Supporting Organizations (continued)	1,01	О Ра	age 3
Га	TIV Supporting Organizations (continued)		V	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and	4.4		
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
800	detail in Part VI. tion B. Type I Supporting Organizations	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)	١-		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	structio	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on	Nov. 20, 1970 (explain in I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	t complete	e Sections A through E.	
Sect	ion 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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ılly integrat	ed Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2020

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations _{(continu}	ıed)	
Secti	on D - Distributions		•		Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide 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	he organization is responsiv	е		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	าร	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
С	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2016				
b	Excess from 2017				
С	Excess from 2018				
d	Excess from 2019				
е	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

The Pacifica Foundation

Employer identification number 94 - 1347046

Pai	t I Organizations Maintaining Donor Advise		or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		2 200
	, ,	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in		d funds
	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
			·
Pai			
1	Purpose(s) of conservation easements held by the organizati	ion (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) Preservation of a	historically important land area
	Protection of natural habitat	Preservation of a	certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form o	f a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structur	re
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
	year ▶		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	ervation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservati	on easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement and
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial stateme	nts that describes the
	organization's accounting for conservation easements.	(4 . 11:	
Pai		-	ner Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95	, '	
	of art, historical treasures, or other similar assets held for pul	,	•
	service, provide in Part XIII the text of the footnote to its final		
b	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public	e exhibition, education, or research in furthe	erance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
_	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre	•	gain, provide
	the following amounts required to be reported under FASB A	_	.
	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		> \$

Par	t III Organizations Maintaining C	Collections of Ar	t, Historical Tr	easures, o	r Othei	r Simila	ar Asse	ts (contin	ued)		
3	Using the organization's acquisition, access	on, and other record	s, check any of the	following that	make siç	gnificant	use of its				
	collection items (check all that apply):										
а	Public exhibition	d	Loan or exc	hange prograi	m						
b	Scholarly research	е	Other								
С	Preservation for future generations										
4	Provide a description of the organization's continuous	ollections and explair	n how they further t	he organizatio	n's exem	pt purpo	se in Par	XIII.			
5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets										
	to be sold to raise funds rather than to be m							Yes	No_		
Par	t IV Escrow and Custodial Arran	•	ete if the organizatio	n answered "\	Yes" on F	orm 990	, Part IV,	line 9, or			
	reported an amount on Form 990, Pa	· · · · · · · · · · · · · · · · · · ·									
1a	Is the organization an agent, trustee, custod		•					٦.,	п		
	on Form 990, Part X?							Yes	└── No		
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:								
	5							Amount			
	Beginning balance										
	Additions during the year										
	Distributions during the year										
	Ending balance					1f		Yes	No		
	If "Yes," explain the arrangement in Part XIII.					•					
Par											
		(a) Current year	(b) Prior year	(c) Two years			ears back	(e) Four	years back		
1a	Beginning of year balance	546,877.	536,848.	· · ·	,031.	•	38,562.		490,820.		
	Contributions	223,233					, -				
	Net investment earnings, gains, and losses	166,963. 37,408. 5,910. 18,4					18,469.		47,742.		
	Grants or scholarships						,				
	Other expenditures for facilities										
	and programs	28,677.	27,379.	26	,093.						
f	Administrative expenses										
	End of year balance	685,163.	546,877.	536	,848.	5	57,031.		538,562.		
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1g, column (a	a)) held as:	•						
а	Board designated or quasi-endowment		%								
b	Permanent endowment 100.0000	<u>%</u>									
С	Term endowment >	%									
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.									
За	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administer	ed for the	e organiz	ation	_			
	by:								Yes No		
	(i) Unrelated organizations							3a(i)	X		
	(ii) Related organizations								X		
b	If "Yes" on line 3a(ii), are the related organization							3b			
<u>4</u>	Describe in Part XIII the intended uses of the		wment funds.								
Pai	t VI Land, Buildings, and Equipm) David IV (Bara 44 - 6) F 000	D-+X II	- 10					
	Complete if the organization answere		1	1			-1	(-1) D1			
	Description of property	(a) Cost or of basis (investn		or other (other)	. ,	cumulate eciation	a	(d) Book	value		
4.	Land	``	,	2,428.	чері	Clation		//32	2,428.		
	Land			6,141.	1 9	82,32	27		3,814.		
	Buildings Leasehold improvements			9,465.		$\frac{02}{09}, \frac{3}{4}$		515	0.		
				8,884.		17,80		601	.,080.		
	Equipment Other			4,711.		09,10			606.		
	. Add lines 1a through 1e. (Column (d) must e					/ - \			2,928.		
. otal	That in ough 10. (Oolaniin (a) must c	-quair oiiii ooo, r art	., Joidini (D), iii C 1	· · · · · · · · · · · · · · · · · ·					990) 2020		

Part VII Investments - Other Securities.			<u> </u>
Complete if the organization answered "Yes"	on Form 990, Part IV, line		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) The San Fransisco			
(B) Foundation Endowment	685,164.	Cost	
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	685,164.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"		11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	I-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	(1) D
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	45)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)	▶	
Part X Other Liabilities.	E 000 B 1 11 / 11 / 1	44 44 0 E 000 B 1 V II 0 E	
Complete if the organization answered "Yes" (a) Description of liability	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	
			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

X

11,332,839.

Sche	dule D (Form 990) 2020 The Pacifica Foundation			94-	1347046 Page
Par	t XI Reconciliation of Revenue per Audited Financial Statemer	nts W	ith Revenue per R	etur	ո.
	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	11,523,232
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	190,393.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
_	Add lines 2a through 2d			20	190.393

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.

Subtract line 2e from line 1

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 11,538,444. 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 11,538,444 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 **b** Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total expenses, Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

Part XIII Supplemental Information.

b Other (Describe in Part XIII.) c Add lines 4a and 4b

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

Part V, line 4:

Endowment funds are permanently restricted investments in perpetuity, the income from which is expendable for programming and operations.

Part X, Line 2:

Management believes that the Foundation has adequately evaluated its current tax positions and has concluded that as of September 30, 2021 and 2020, the Foundation does not have any uncertain tax positions for which a reserve or an accrual for a tax liability would be necessary. The Foundation may periodically received unrelated business income requiring the organization to file separate tax returns under federal and state

Schedule D (Form 990) 2020	The Pacifica	Foundation	94-1347046 Page 5
Schedule D (Form 990) 2020 Part XIII Supplemental Info	rmation (continued)		

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part I

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

Attach to Form 990.

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

Name of the organization The Pacifica Foundation

Types of Property

Employer identification number 94 - 1347046

		(a) Check if	(b) Number of	(c) Noncash contribution	(d) Method of de	termin	ing	
		applicable	contributions or	amounts reported on Form 990, Part VIII, line 1g	noncash contribu	tion ar	nount	S
1	Art - Works of art		items contributed	Tomin 550, i art viii, iiic ig				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles	X	360	218.069.	Fair value			
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
••	• • • •							
12	trust interests Securities - Miscellaneous							
13	Qualified conservation contribution -							
10	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
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 organia	zation durin	g the tax year for c	ontributions				
	for which the organization completed Form 82	83, Part V, D	Oonee Acknowledg	ement 29				
							Yes	No
30a	During the year, did the organization receive b	y contributio	on any property rep	oorted in Part I, lines 1 throu	gh 28, that it			
	must hold for at least three years from the date	e of the initia	al contribution, and	I which isn't required to be υ	sed for			
	exempt purposes for the entire holding period	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandard contribu	ıtions?	31		X
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash				
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of propert	y for which column (a) is che	cked,			
	describe in Part II.							

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

Schedule M (Form 990) 2020

Schedule M	(Form 990) 2020	The	Pacifica	Foundati	on		94-1347046	Page 2
Part II	Supplemental	: I. colum	ın (b). the number	the information re of contributions,	equired by Part I, lines the number of items re	30b, 32b, and 33 eceived, or a com	, and whether the organi bination of both. Also co	ization

SCHEDULE 0

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

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 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

The Pacifica Foundation

Employer identification number 94-1347046

Form 990, Part III, Line 1, The Pacifica Foundation Mission Statement: To establish a Foundation organized and operated exclusively for educational purposes no part of the net earnings of which inures to the benefit of any member of the Foundation.

To establish and operate for educational purposes, in such manner that the facilities involved shall be as nearly self-sustaining as possible, one or more radio broadcasting stations licensed by the Federal Communications Commission ("Commission") and subject in their operation to the regulatory actions of the Commission under the Federal Communications Act of 1934, as amended.

In radio broadcasting operations to encourage and provide outlets for the creative skills and energies of the community; to conduct classes and workshops in the writing and producing of drama; to establish awards and scholarships for creative writing; to offer performance facilities to amateur instrumentalists, choral groups, orchestral groups and music students; and to promote and aid other creative activities which will serve the cultural welfare of the community.

In radio broadcasting operations to engage in any activity that shall contribute to a lasting understanding between nations and between the individuals of all nations, races, creeds and colors; to gather and disseminate information on the causes of conflict between any and all of such groups; and through any and all means compatible with the purposes of this Foundation to promote the study of political and

Name of the organization

The Pacifica Foundation

Employer identification number 94-1347046

economic problems and of the causes of religious, philosophical and racial antagonisms.

In radio broadcasting operations to promote the full distribution of public information; to obtain access to sources of news not commonly brought together in the same medium; and to employ such varied sources in the public presentation of accurate, objective, comprehensive news on all matters vitally affecting the community.

Form 990, Part VI, Section A, line 6:

There are two classes of members: (A) "Listener-Sponsor Members" and (B) "Staff Members".

For purposes of voting and exercising their rights, Members shall be
affiliated with one of the Foundation's five radio stations: KPFA in
Berkeley, California, KPFK in North Hollywood, California, WBAI in New
York, New York, KPFT in Houston, Texas, or WPFW in Washington, D.C.

Form 990, Part VI, Section A, line 7a:

Members of the Foundation elect 24 delegates to represent them for their individual station in a combination mail/online election. Then those delegates meet in person to elect four directors from each of the five stations, from among themselves, who serve on the National Board (the governing body). Those directors then elect two additional representatives from Pacifica affiliate stations who then also serve as directors on the National Board.

Name of the organization

The Pacifica Foundation

Employer identification number 94-1347046

All Members shall have all rights granted to them by law or by the Bylaws, including without limit the right to vote, on the terms and in the manner set forth in these Bylaws, on the election and removal of Delegates; on the sale, exchange, transfer or disposition of all or substantially all of the Foundation's assets; on the sale, exchange, transfer or disposition of any of the Foundation's broadcast licenses; on any merger, its principal terms and any amendment of its principal terms; on any election to dissolve the Foundation; on any amendment to the Bylaws for which Member approval is required or permitted as set forth in Section 1(B) of Article 17 of the Bylaws; and on any amendment to the Articles of Incorporation.

Form 990, Part VI, Section B, line 11b:

Form 990 is prepared by an outside tax professional. The form is then reviewed by the Organization's management, a member of the Board of Directors, and the Executive Director. This group of individuals then discusses the contents of the return with the outside tax professional.

After a full review (with modifications where necessary), the final version of the tax return is provided to all members of the Organization's voting body. A representative of management authorizes the final Form 990 which is then electronically filed with the Internal Revenue Service.

Form 990, Part VI, Section B, Line 12c:

Members of the Board of Directors review all potential conflicts of interest at least annually. All personnel and board members are required to disclose (in writing) potential conflicts and any related party affiliations. Loans between the Organization and members of management and the Board are strictly prohibited. The Organizations seeks full

Name of the organization

The Pacifica Foundation

Employer identification number 94-1347046

appearance) are discussed openly and resolved in accordance with the Organization's policies and procedures.

Form 990, Part VI, Section B, Line 15:

The compensation of the Executive Director, Chief Financial Officer, and key management employees are set and approved by the Board of Directors.

Members of the Board of Directors review the compensation of all high-level personnel periodically in accordance with IRS rules and regulations.

Efforts are made to secure compensation data from industry sources in order to determine competitiveness and appropriateness of salaries. Every effort is made to ensure that the process is thorough and transparent in accordance with IRS guidelines and the Organization's policies and procedures.

Compensation of other personnel and key employees are reviewed periodically by members of management. Efforts are made to secure compensation data from industry sources in order to determine competitiveness and appropriateness of salaries and all related benefits. All decisions are then documented in personnel files.

Form 990, Part VI, Line 17, List of States receiving copy of Form 990:

AK,AL,AR,CA,CT,FL,GA,HI,IL,KS,KY,MA,MD,ME,MI,MN,MO,MS,NC,NH,NJ,NM,NY,OH,OK

OR,PA,RI,SC,TN,UT,WA,WI,WV

Form 990, Part VI, Section C, Line 19:

The governing documents, conflict of interest policy, and financial statements are available at www.pacifica.org or upon request.

The Pacifica Foundation	94-1347046
Form 990, Part VI, Section B, lines 10a and 10b:	
Local chapters, branches, or affiliates:	
The Foundation's Form 990 includes the operations of the	following
divisions: Radio Station KPFA-Berkeley, California, Radio	Station
KPFT-Los Angeles, California, Radio Station KPFT-Houston,	Texas, Radio
Station WBAI-New York, New York, Radio Station WPFW-Washi	ngton, DC,
Pacifica Foundation, National Office Pacifica Foundation,	Pacifica
Radio Archives, The Organization's national office has cr	eated policies
and procedures which are followed by all divisions.	
Form 990, Part XII, Line 2c:	
The Organization's Board of Directors is responsible for	oversight of
the audit, including selection of the independent account	ant. The
process has not changed from previous years.	