2016

990-PF

PUBLIC

DISCLOSURE

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CHANGE OF ACCOUNTING PERIOD **Return of Private Foundation**

Form **990-PF**

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service For calendar year 2016 or tax year beginning JAN 1, 2016 SEP 30, 2016 , and ending A Employer identification number Name of foundation LEICHTAG FOUNDATION 33-0466189 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite **B** Telephone number 441 SAXONY ROAD (760)929-1090City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ENCINITAS, CA 92024 G Check all that apply: Initial return Initial return of a former public charity **D** 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change X Name change X Section 501(c)(3) exempt private foundation **H** Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Uther taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Accrual F If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here ... 118, 273, 592. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) for charitable purposes (cash basis only) expenses per books income 28,000. N/A Contributions, gifts, grants, etc., received Check if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 15. 15. STATEMENT $3\overline{23,235}$ 323,235 STATEMENT 4 Dividends and interest from securities 772,325. 772,325. STATEMENT **5a** Gross rents **b** Net rental income or (loss) 3,706,956. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 19,807,489. 7 Capital gain net income (from Part IV, line 2) 3,706,956. 8 Net short-term capital gain Income modifications Gross sales less returns and allowances **b** Less: Cost of goods sold ... **c** Gross profit or (loss) STATEMENT 4 32,722 11 Other income 4,863,253 4,802,531. Total. Add lines 1 through 11 524,605 233,435. 269,170. 13 Compensation of officers, directors, trustees, etc. 1,076,848. 14,825. 116,080. 14 Other employee salaries and wages 323,987. 60,289. 61,520. 15 Pension plans, employee benefits 17,024. 13,771. Expenses 16a Legal fees STMT 5 33,900. b Accounting fees STMT 6 0. 0. 232,726. 99,338. c Other professional fees STMT 7 82,327. 17 Interest 8,790. 301,417. 114,835. 18 284,705. 284,705. Depreciation and depletion 105,910. 61,386. 13,905. 20 Occupancy 217,240. 8,148. 107,538. 21 Travel, conferences, and meetings 3,715. 19,558 22 Printing and publications 149. 23 Other expenses STMT 9 822,816. 283,833. 95,614. 24 Total operating and administrative 3,960,736. 1,157,703. 775,670. expenses. Add lines 13 through 23 4,264,410. 4,264,410. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 8,225,146. 1,157,703 5,040,080. Add lines 24 and 25 27 Subtract line 26 from line 12: -3,361,893 **a** Excess of revenue over expenses and disbursements 3,644,828 **b Net investment income** (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

Part II Balance Sheets Attached schedules and amounts in the description		Balance Sheets Attached schedules and amounts in the description	Beginning of year End of year				
Г	ai t	column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing					
	2	Savings and temporary cash investments	1,289,201.	3,273,158.	3,273,158.		
	3	Accounts receivable ►					
		Less: allowance for doubtful accounts	109,736.				
	4	Pledges receivable ►					
		Less: allowance for doubtful accounts					
	5	Grants receivable					
		Receivables due from officers, directors, trustees, and other					
	`	disqualified persons					
	7	Other notes and loans receivable					
	l	Less; allowance for doubtful accounts					
G	l a	Inventories for sale or use					
Assets		Prepaid expenses and deferred charges	57,711.	109,751.	109,751.		
As		Investments - U.S. and state government obligations	. ,				
		Investments - corporate stock					
	ָ	Investments - corporate bonds STMT 11	29,930,804.	29,831,719.	29,831,719.		
	11	Investments land huldings and squipment basis > 22 133 827.	23/330/0010	23/032/1230	23703177130		
	l''	Investments - land, buildings, and equipment basis \blacktriangleright 22,133,827. Less: accumulated depreciation \blacktriangleright 962,257.	20,901,303.	21,171,570.	21,171,570.		
	12	Investments - mortgage loans	20,301,303.	21,171,570	21,111,3700		
	12	Investments - other STMT 12	67,198,286.	63,879,167.	63,879,167.		
	14	Land, buildings, and equipment: basis	07,130,200	03,013,1014	03,013,1014		
	'-	Less: accumulated depreciation					
	15	Other assets (describe ► DEPOSITS)	8,227.	8,227.	8,227.		
		Total assets (to be completed by all filers - see the	0/22/0	0/22/	0,22,0		
	'	instructions. Also, see page 1, item I)	119,495,268.	118.273.592.	118,273,592.		
_	17	Accounts payable and accrued expenses	339,585.	678,608.			
		Grants payable	16,315,374.	15,012,972.			
S		Deferred revenue	, ,	, ,			
Liabilities		Loans from officers, directors, trustees, and other disqualified persons					
abil	21	Mortgages and other notes payable					
Ë	22	Other liabilities (describe)					
	23	Total liabilities (add lines 17 through 22)	16,654,959.	15,691,580.			
		Foundations that follow SFAS 117, check here					
		and complete lines 24 through 26 and lines 30 and 31.					
ces	24	Unrestricted	102,840,309.	102,582,012.			
<u>a</u>	25	Temporarily restricted					
Ва		Permanently restricted					
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here					
Ę		and complete lines 27 through 31.					
S	27	Capital stock, trust principal, or current funds					
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
As	29	Retained earnings, accumulated income, endowment, or other funds \dots					
Re	30	Total net assets or fund balances	102,840,309.	102,582,012.			
_	31	Total liabilities and net assets/fund balances	119,495,268.	118,273,592.			
P	art	Analysis of Changes in Net Assets or Fund B	alances				
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30				
	(mus	st agree with end-of-year figure reported on prior year's return)		1	102,840,309.		
		r amount from Part I, line 27a			-3,361,893.		
3	Othe	r increases not included in line 2 (itemize)	ann am	ATEMENT 10 3	3,103,596.		
4	Add	lines 1, 2, and 3		4	102,582,012.		
5	Decr	eases not included in line 2 (itemize)		5	0.		

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Part IV Capital Gains a	and Losses for Tax on Ir	nvestmen	t Income					
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) H	ow acquired Purchase Donation		te acquired , day, yr.)	(d) Date sold (mo., day, yr.)	
1a	~~~							
b SEE ATTACHED	STATEMENT							
C								
<u>d</u>								
e (e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss lus (f) minus	
a								
b								
С								
d								
e 19,807,489.	35,897.		6,136,43	0.				3,706,956.
Complete only for assets showin	g gain in column (h) and owned by						(Col. (h) gain	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i)		C		ut not less that es (from col.	
(1)	as of 12/31/09	over	col. (j), if any				•	
a				_				
b				_				
C .				_				
d				_				2 706 056
e				_				3,706,956.
O Comital main mating and a company (mat	If gain, also enter	r in Part I, line	7 7] [3,706,956.
2 Capital gain net income or (net ca	pital loss)	- in Part I, line	7	·	2			3,700,930.
3 Net short-term capital gain or (los		nd (6):		٦١				
If gain, also enter in Part I, line 8,					,		N/A	
If (loss), enter -0- in Part I, line 8 . Part V Qualification U		Reduced	l Tay on Net	Inve	3 Setment Ir	come		<u> </u>
						1001110	'	
(For optional use by domestic private	Touridations subject to the section a	4540(a) lax oii	1 1161 1114621116111 111	icome.)			
If section 4940(d)(2) applies, leave th	is part blank.							
Was the foundation liable for the sect	ion 4042 tay on the distributable am	nount of any ve	aar in tha haca nar	choir				Yes X No
If "Yes," the foundation does not quali			•	iou:				163 [21] NO
1 Enter the appropriate amount in e				ntries.				
(a)	(b)			(c)			51	(d) oution ratio
Base periód years Calendar year (or tax year beginnir	ماني ماني ماني الماني	tributions	Net value of no		table-use asse	ts	Distril (col. (b) div	oution ratio vided by col. (c))
2015		0,230.	1	28.	748,04	5.		.081945
2014	12.33	6,498.	1	38	411,63	8.		.089129
2013	13.80	8,355.	1	41	788,94	6.		.097387
2012	10.79	0,478.			075,32			.077587
2011	12.96	9,153.	1	29	007,31	1.		.100530
2011		,, _ , _ ,			,	- 1		120000
2 Total of line 1, column (d)						2		.446578
3 Average distribution ratio for the 5	5-year hase period - divide the total of	on line 2 hy 5	or by the number	of vea	rs	···		
•	nce if less than 5 years	• •	,	,		3		.089316
the foundation has been in exister	ioo ii iooo tilaii o youro					 		
4 Enter the net value of noncharitab	le-use assets for 2016 from Part X	line 5				4	1 11	5,546,892.
4 Enter the net value of nonchartab	10 430 433013 101 20 10 11 011 1 41 1 1,					···· →		,
5 Multiply line 4 by line 3						5	1 1	0,320,186.
Wulliply line 4 by line 3						⊢ື		.0,320,200
6 Enter 1% of net investment incom	ue (1% of Part Lline 27h)					6		36,448.
C Enter 170 of het investment incom	(170 011 art i, iiiic 270)					···· 		30,110
7 Add lines 5 and 6						7	1	0,356,634.
. Add into 0 dild 0						···· ├ <u></u>	 	, ,
8 Enter qualifying distributions from						8		5,040,080.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	t 1b, and comp	olete that part usin	g a 1%	tax rate.			

Part VI Excise Tax Based on Investment Income (Section 49	40(a), 4940)(b), 4940(e), or 4	948 -	see inst	uctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here ▶ and	l enter "N/A" on I	line 1.)				
Date of ruling or determination letter: (attach copy of letter if n	iecessary-see ii	nstructions)					
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here			} [1		72,8	397.
of Part I, line 27b							
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4	4% of Part I, line	e 12, col. (b).	ノー				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -0-	-)		2			0.
3 Add lines 1 and 2				3		72,8	397.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	. Others enter -0)-)		4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				5		72,8	397.
6 Credits/Payments:							
a 2016 estimated tax payments and 2015 overpayment credited to 2016	~ — —	92,	473.				
b Exempt foreign organizations - tax withheld at source							
c Tax paid with application for extension of time to file (Form 8868)							
d Backup withholding erroneously withheld							
7 Total credits and payments. Add lines 6a through 6d				7		92,4	<u> 173.</u>
8 Enter any penalty for underpayment of estimated tax. Check here $\lfloor X \rfloor$ if Form 2220 is at				8			60.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			▶ [9			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				10		19,5	516.
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax	19,5	516 . Refu	nded ►	11			0.
Part VII-A Statements Regarding Activities							
1a During the tax year, did the foundation attempt to influence any national, state, or local leg				in		Yes	No
any political campaign?					1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purp	ooses (see instru	uctions for the	definition)	?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	and copies of	f any materia	ls publish	ed or			
distributed by the foundation in connection with the activities.							
c Did the foundation file Form 1120-POL for this year?					1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during t			•				
(1) On the foundation. ► \$ 0 . (2) On foundation manage			0.				
e Enter the reimbursement (if any) paid by the foundation during the year for political exper	nditure tax impo	sed on founda	ition				
managers. ► \$0 .							١
2 Has the foundation engaged in any activities that have not previously been reported to the	e IRS?				2		X
If "Yes," attach a detailed description of the activities.							
3 Has the foundation made any changes, not previously reported to the IRS, in its governing							7,
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chan							X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the y							X
b If "Yes," has it filed a tax return on Form 990-T for this year?							177
Was there a liquidation, termination, dissolution, or substantial contraction during the year	ır?				5		X
If "Yes," attach the statement required by General Instruction T.							
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	eitner:						
By language in the governing instrument, or			l- 4l4-4-	I			
By state legislation that effectively amends the governing instrument so that no mandate and the governing instrument so the						₩.	
remain in the governing instrument?						X	-
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	omplete Part I	II, col. (c), an	d Part XV		7	│ ^	
On Findow the states to which the formulation was onto an with which it is unsistened (see instance)	tions)						
8a Enter the states to which the foundation reports or with which it is registered (see instruct CA							
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attornov Cons	ral (or dasia==	to)				
	-		,		O.L.	Х	
of each state as required by <i>General Instruction G? If "No," attach explanation</i> 9 Is the foundation claiming status as a private operating foundation within the meaning of					8b	A	
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If</i> "Yes,"	,	. ,	,		9		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a sche							X
10 Sid any portion become substantial contributors during the tax your: if fes, attach a sche	radic natifity trieff H	arrico arru audres	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		10		

•	Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions) STMT 13	11	Х	
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			,,
	If "Yes," attach statement (see instructions)	12	37	Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► WWW.LEICHTAG.ORG The books are in care of ► LEICHTAG FOUNDATION Telephone no. ► 760-92	0_1	nan	
14	144	024	090	
15	Located at ► 441 SAXONY ROAD, ENCINITAS, CA Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
10	and enter the amount of tax-exempt interest received or accrued during the year		/A	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	Nο
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1	a During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	41		v
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here			
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1c		Х
2	before the first day of the tax year beginning in 2016? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	10		- 22
_	defined in section 4942(j)(3) or 4942(j)(5)):			
	a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	hefore 20162			
	If "Yes," list the years ▶ , , , , , , , , , , , , , , , , , ,			
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? X Yes No			
	b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2016.)	3b		X
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	, .		х
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	1	ıΛ

Page 6

Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be	Required (continu	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	
(2) Influence the outcome of any specific public election (see section 4955); o				
any voter registration drive?	s X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio				
4945(d)(4)(A)? (see instructions)			s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,				
the prevention of cruelty to children or animals?		·····	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und			27./2	
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		<u>N/A</u>	5b
Organizations relying on a current notice regarding disaster assistance check h			▶□	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for				
expenditure responsibility for the grant?		I/A	s L No	
If "Yes," attach the statement required by Regulations section 53.494:	• •			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to		□ v _e	. V Na	
a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	araanal hanafit aantraat?	Te	S A NO	6b X
If "Yes" to 6b, file Form 8870.	ersonal benefit contract?			00 21
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	□ v _e	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trust				
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
	<u> </u>	,		
SEE STATEMENT 14		524,605.	74,410.	0.
O Common antique of five highest weld ample was (athough bear these in	luded on line 4) If neme	anter INONE II		
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	, enter INUINE."	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	` 'hours per week '	(c) Compensation	(d) Contributions to employee benefit plans and deferred	account, other
DARON JOFFE	devoted to position DIRECTOR OF A	GRICULTUR	compensation	allowances
441 SAXONY RD, ENCINITAS, CA 92024	40.00	97,545.	22,375.	0.
		INANCE AN		
441 SAXONY RD, ENCINITAS, CA 92024	40.00	104,597.	14,948.	0.
			INITIATI	
441 SAXONY RD, ENCINITAS, CA 92024	40.00	94,763.	13,422.	0.
	RANCH MANAGER		,	
441 SAXONY RD, ENCINITAS, CA 92024	40.00	74,034.	18,472.	0.
		HILANTROP	-	
441 SAXONY RD, ENCINITAS, CA 92024	40.00	64,700.	12,815.	0.
Total number of other employees paid over \$50,000		,		7

3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation VERUS 1NVESTMENT 500 CHASE PKWY, WATERBURY, CT 06708 CONSULTING 72,557. CHANGECRAPT CONSULTING 53,000 for professional services P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Total number of others receiving over \$50,000 for professional services P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Total number of others receiving over \$50,000 for professional services P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Total number of others receiving over \$50,000 for professional services P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Total number of others receiving over \$50,000 for professional services P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Total number of others receiving over \$50,000 for professional services P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Total number of others receiving over \$50,000 for professional services P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Total number of others receiving over \$50,000 for professional services P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Expenses P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Expenses P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Expenses P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Expenses P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Expenses P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Expenses P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Expenses P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Expenses P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Expenses P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Expenses P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Expenses P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Expenses P.O. BOX 1279, LAKELAND, FL 33802 CONSULTING 53,0009. Expenses P.O.	Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	ation Managers, Highly	
Total number of others receiving over \$50,000 for professional services P.O. BOX 1279, LAKELAND, FL 33802 Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable activities List the foundation's four largest direct charitable activities or or organizations and other beneficiaries served, contineness convened, research papers produced, etc. 1THE LEICHTAG FOUNDATION MAKES CONTRIBUTIONS TO PRE-SELECTED CHARITIES THAT INSPIRE VIBRANT JEWISH LIFE, ADVANCE SELF-SUFFICIENCY, AND STIMULATE SOCIAL ENTREPRENEURSHIP. 2 SEE STATEMENT 15 775,670. Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount 1 N/A All other program-related investments. See instructions. 3 4 Total. Add lines 1 through 3	3 Five highest-paid independent contractors for professional services. If none, ent	er "NONE."	
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Total number of others receiving over \$30,000 for professional services. Total number of others receiving over \$30,000 for professional services. D Part IX-A Summary of Direct Charitable Activities	500 CHASE PKWY, WATERBURY, CT 06708	CONSULTING	72,557.
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Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, contenences convened, research papers produced, etc. 1 THE LEICHTAG FOUNDATION MAKES CONTRIBUTIONS TO PRE-SELECTED CHARITIES THAT INSPIRE VIBRANT JEWISH LIFE, ADVANCE SELF-SUFFICIENCY, AND STIMULATE SOCIAL ENTREPRENEURSHIP. 4,264,410. SEE STATEMENT 15	P.O. BOX 1279, LAKELAND, FL 33802	CONSULTING	53,009.
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number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 THE LEICHTAG FOUNDATION MAKES CONTRIBUTIONS TO PRE-SELECTED CHARITIES THAT INSPIRE VIBRANT JEWISH LIFE, ADVANCE SELF-SUFFICIENCY, AND STIMULATE SOCIAL ENTREPRENEURSHIP. 2 SEE STATEMENT 15 775,670. Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions. 3 All other program-related investments. See instructions.	•	1	
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SELF-SUFFICIENCY, AND STIMULATE SOCIAL ENTREPRENEURSHIP. SEE STATEMENT 15 775,670. Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions. Total. Add lines 1 through 3			
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Total. Add lines 1 through 3	All other program-related investments. See instructions.		
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Form 990-PF (2016)	Iotal. Add lines 1 through 3	>	Form 990-PF (2016)

P	art X Minimum Investment Return (All domestic foundations r	must cor	nplete this part. Foreign fou	ndations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitab	le. etc p	irdoses:		
а	Average monthly fair market value of securities			1a	91,743,193.
	Average of monthly cash balances			1b	4,391,726.
	Fair market value of all other assets			1c	21,171,570.
d	Total (add lines 1a, b, and c)			1d	117,306,489.
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	117,306,489.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount	t, see inst	uctions)	4	1,759,597.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and o			5	115,546,892.
6	Minimum investment return. Enter 5% of line 5			6	5,777,345.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) a foreign organizations check here ■ and do not complete this part.	nd (j)(5) ¡		nd certain	
1	Minimum investment return from Part X, line 6			1	5,777,345.
2a	Tax on investment income for 2016 from Part VI, line 5	2a	72,897.		
b	Income tax for 2016. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b			2c	72,897. 5,704,448.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	5,704,448.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	5,704,448.
6	Deduction from distributable amount (see instructions)			6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part	t XIII, line	1	7	5,704,448.
Ξ	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pur	•		4.	E 040 000
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	5,040,080.
b	Program-related investments - total from Part IX-B			1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charital	Die, etc., p	ourposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:			0.	
a	7 (1 1 /			3a	
b	Cash distribution test (attach the required schedule)			3b	5 040 000
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, a	4	5,040,080.		
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investinceme. Enter 1% of Part I, line 27b			5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	5,040,080.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years v 4940(e) reduction of tax in those years.			qualifies fo	or the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				5,704,448.
2 Undistributed income, if any, as of the end of 2016:				3,701,110.
a Enter amount for 2015 only			0.	
b Total for prior years:			<u> </u>	
b rotal for prior yours.		0.		
3 Excess distributions carryover, if any, to 2016:				
$\begin{array}{llllllllllllllllllllllllllllllllllll$				
b From 2012 4,044,230.				
c From 2013 6,980,542.				
dFrom 2014 5,557,824.				
eFrom 2015 4,261,140.				
f Total of lines 3a through e	33,812,889.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ►\$ 5,040,080.				
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				5,040,080.
e Remaining amount distributed out of corpus	0.			0,020,000
5 Excess distributions carryover applied to 2016	664,368.			664,368.
(If an amount appears in column (d), the same amount must be shown in column (a).)	777			7 7 7 7 7 7
6 Enter the net total of each column as indicated below;				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	33,148,521.			
b Prior years' undistributed income. Subtract	00,110,011			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable		0.0		
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line		-		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	12,304,785.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	20,843,736.			
10 Analysis of line 9:				
a Excess from 2012 $4,044,230$.				
b Excess from 2013 6,980,542.				
c Excess from 2014 5,557,824.				
d Excess from 2015 4,261,140.				
e Excess from 2016				
623581 11-23-16	· · · · · · · · · · · · · · · · · · ·			Form 990-PF (2016)

623581 11-23-16

Part XIV Private Operating Fo	oundations (see in	structions and Part VII	-A, question 9)	N/A							
1 a If the foundation has received a ruling or	determination letter that	t it is a private operating									
foundation, and the ruling is effective for 2016, enter the date of the ruling											
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)											
2 a Enter the lesser of the adjusted net											
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total						
investment return from Part X for											
each year listed											
b 85% of line 2a											
c Qualifying distributions from Part XII,											
line 4 for each year listed											
d Amounts included in line 2c not											
used directly for active conduct of											
exempt activities											
e Qualifying distributions made directly											
for active conduct of exempt activities.											
Subtract line 2d from line 2c Complete 3a, b, or c for the											
alternative test relied upon:											
a "Assets" alternative test - enter:											
(1) Value of all assets											
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)											
b "Endowment" alternative test - enter											
2/3 of minimum investment return shown in Part X, line 6 for each year listed											
c "Support" alternative test - enter:											
(1) Total support other than gross											
investment income (interest,											
dividends, rents, payments on securities loans (section											
512(a)(5)), or royalties)											
(2) Support from general public											
and 5 or more exempt											
organizations as provided in section 4942(j)(3)(B)(iii)											
(3) Largest amount of support from											
an exempt organization											
(4) Gross investment income											
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	ore in assets						
at any time during t			the realisation								
1 Information Regarding Foundatio	n Managers:										
a List any managers of the foundation who			ributions received by the	foundation before the clos	se of any tax						
year (but only if they have contributed m	ore than \$5,000). (See s	section 507(d)(2).)									
NONE											
b List any managers of the foundation who			or an equally large portion	on of the ownership of a pa	artnership or						
other entity) of which the foundation has	a 10% or greater interes	st.									
NONE											
2 Information Regarding Contributi	on, Grant, Gift, Loan	, Scholarship, etc., Pr	ograms:								
Check here $ ightharpoonup oxed{X}$ if the foundation of											
the foundation makes gifts, grants, etc. (see instructions) to indiv	viduals or organizations u	nder other conditions, co	implete items 2a, b, c, and	d.						
a The name, address, and telephone numb	er or e-mail address of t	the person to whom appli	cations should be addres	sed:							
b The form in which applications should b	e submitted and informa	tion and materials they sh	nould include:								
		,									
c Any submission deadlines:											
d Any restrictions or limitations on awards	, such as by geographica	al areas, charitable fields,	kinds of institutions, or o	ther factors:							

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year 2-1-1 SAN DIEGO TO ADVANCE THE CITY OF NONE ÞС 3860 CALLE FORTUNADA SUITE 101 ENCINITAS' WELCOMING CITY EFFORTS SAN DIEGO, CA 92123 8,000. A FOUNDATION OF PHILANTHROPIC FUNDS NONE PC TO SUPPORT THE WORK OF 520 EIGHTH AVENUE, 20TH FLOOR ALMALINKS NEW YORK, NY 10018 8,000. ALEF CENTER NONE РC TO SUPPORT THE HOLOCAUST MEMORIAL 1739 TURNBERRY DRIVE SAN MARCOS, CA 92069 EVENT AT CSU SAN MARCOS ON THURSDAY, MAY 5, 2016 500. AMERICAN FRIENDS OF OR NATIONAL NONE РC TO SUPPORT IJERUSALEM MISSIONS 36 WEST 44TH STREET NEW YORK, NY 10036 7,500. AMERICAN JEWISH JOINT DISTRIBUTION NONE PC. SEE STATEMENT 711 THIRD AVENUE, 10TH FLOOR NEW YORK, NY 10017 170,705. SEE CONTINUATION SHEET(S) 3a 4,264,410. Total **b** Approved for future payment NONE Total

623611 11-23-16

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated	d business income		ed by section 512, 513, or 514	(e)
g	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a PROGRAM SERVICE REVENUE					16,000.
b					
C					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	15.	
4 Dividends and interest from securities			14	323,235.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property			16	772,325.	
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	3,706,956.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a OTHER INCOME			01	16,722.	
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)			•	4,819,253.	16,000.
13 Total. Add line 12, columns (b), (d), and (e)				13	4,835,253.
(See worksheet in line 13 instructions to verify calculations.)					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below now each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1	Did the	organization directly or indir	rectly engage in any c	of the followin	a with any other organizati	on described in sect	ion 501(c) of		Yes	Nο
1 Did the organization directly or indirectly engage in any of the following with any other organization the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations							1011 30 1(6) 01			110
•		, , ,	. , - ,			mzauons:				
а		nsfers from the reporting foundation to a noncharitable exempt organization of:								Х
	(1) Cash (2) Other assets									X
		ansactions:						1a(2)		21
U			bla avament avamenimeti					45/4		v
	(1) Sai	es of assets to a noncharital	ole exempt organizati	OII				1b(1)		$\frac{x}{x}$
		rchases of assets from a nor						1b(2)		X
		ntal of facilities, equipment, o						1b(3)		
	(4) Rei	mbursement arrangements						1b(4)		X
	(5) Loa	ans or loan guarantees						1b(5)		X
		formance of services or me						1b(6)		X
		of facilities, equipment, mai						1c		X
d		nswer to any of the above is		-					ets,	
		ces given by the reporting fo			ed less than fair market val	ue in any transaction	or sharing arrangement, sl	now in		
		(d) the value of the goods, of				1				
(a)∟	ine no.	(b) Amount involved	(c) Name of		exempt organization	(d) Description	of transfers, transactions, and s	haring arr	angeme	nts
				N/A						
	- 									
	-									
<u> </u>	1- 4 6-		d			in a diamental and				
2a		oundation directly or indirect						٦.,	37	٦
		on 501(c) of the Code (other		(3)) or in sect	ion 52/?		L	Yes	Δ	No
b	If "Yes,"	complete the following sche			(h) Tuno of oursemination	1	(a) Decembring of valetions			
		(a) Name of org	anization		(b) Type of organization		(c) Description of relationsh	пр		
		N/A								
	000	der penalties of perjury, I declare to belief, it is true, correct, and com					May	the IRS o	iscuss t	his
Sig	gn 🔪		ipiete. Declaration of pre	parer (otrier trial	i taxpayer) is based on all lillon	mation of which prepare	, etu	n with the		
He	re					PRESII		Yes	`	No
	Ši	gnature of officer or trustee	ure of officer or trustee		Date	Title				
Print/Type preparer's name Preparer's signature Da					Date	Check if PTIN				
							self- employed			
Pa	id					08/11/17				
Pr	epare	r Firm's name ► ALD	RICH CPAS	AND A	DVISORS, LLE		Firm's EIN ▶			
	e Onl				,					
	,		46 PRIEST	LY DRT	VE, SUITE 20	00				
			RLSBAD, C		•		Phone no. (760)	431	-84	40
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CONTINUATION FOR 990-PF, PART IV 33-0466189 PAGE OF 1 1 Part IV Capital Gains and Losses for Tax on Investment Income (**b)** How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) 1a PROPERTY & EQUIPMENT VILLA #28 01/01/1412/31/16 b CHARLES SCHWAB PUBLICLY TRADED SECURITIES P 01/01/1512/31/16 c CHARLES SCHWAB PUBLICLY TRADED P <u>01/01/16|12/31/</u>16 SECURITIES d NET GAIN VINTAGE INVESTMENTS P 01/01/16|12/31/16 e NET GAIN JVP OPPORTUNITIES VI P 01/01/1612/31/16 CAPITAL GAINS DIVIDENDS g h m n 0 (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price (or allowable) (e) plus (f) minus (g) plus expense of sale 505,000. 325,651 35,897. -143,452. а 14,924,708. 2,200,128. 17,124,836. 92,934. 706,722. 799,656. 141,249 141,249. d 1,401,369 1,401,369. 14,728. 14,728. h m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any -143,452. a 2,200,128. b 92,934. С 141,249. 1,401,369. е 14,728. m n 0

623591 04-01-16

If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

2 Capital gain net income or (net capital loss) \dots { If gain, also enter in Part I, line 7 } Part I, line 7

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

2

3

3,706,956.

N/A

Page 11

Form 990-PF LEICHTAG FOUND
Part XV Supplementary Information (continued) LEICHTAG FOUNDATION

3a Grants and Contributions Paid During the Year				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
-		recipient	TO GROUGOD THE 2016 ARGA ARREST GOVERNMENT	
AMERICAN PUBLIC GARDENS ASSOCIATION	NONE	PC	TO SPONSOR THE 2016 APGA ANNUAL CONFERENCE	
351 LONGWOOD ROAD			AGRICULTURE SECTION MEETING AND THE INTERNATIONAL	
KENNETT SQUARE, PA 19348			GARDENS SPECIAL SESSION AND DINNER, ON BEHALF OF THE	
			JERUSALEM BOTANICAL GARDENS, AND FOR 2016 INSTITUTIONAL MEMBERSHIP FOR THE LEICHTAG FOUNDATION	10 500
			INSTITUTIONAL MEMBERSHIP FOR THE LEICHTAG FOUNDATION	12,500.
AMYOTROPHIC LATERAL SCLEROSIS ASSOCIATION 1200 W WALNUT ST STE 2309	NONE	PC	TO SUPPORT THE FAMILY GRANT PROGRAM IN PROVIDING DIRECT FINANCIAL AID TO FAMILIES IMPACTED BY ALS	
ROGERS, AR 72756				1,500.
ANTI DEFAMATION LEAGUE FOUNDATION	NONE	PC	FOR GENERAL SUPPORT	
4950 MURPHY CANYON ROAD, SUITE 250				
SAN DIEGO, CA 92123				1,000.
BONNIE J ADDARIO A BREATH AWAY FROM THE	NONE	PC	IN MEMORY OF EVAN STONE	
CURE FOUNDATION				
1100 INDUSTRIAL ROAD #1				
SAN CARLOS, CA 94070				2,050.
BOYS & GIRLS CLUB OF COACHELLA VALLEY	NONE	PC	FOR GENERAL SUPPORT (1,000); FOR GENERAL SUPPORT	
42600 COOK ST STE 120			(1,000)	
PALM DESERT, CA 92211				2,000.
BOYS & GIRLS CLUB OF OCEANSIDE CALIFORNIA	NONE	PC	IN HONOR OF THE WEDDING OF JODI DIAMOND AND LAURA	
INCORPORATED			GALINSON.	
401 COUNTRY CLUB LN				
OCEANSIDE, CA 92054	_			1,000.
CAMP MOUNTAIN CHAI	NONE	PC	FOR A HALF-PAGE AD IN ITS PROGRAM BOOK HONORING RAE	
4950 MURPHY CANYON ROAD			AND ED SAMILJAN AT ITS MAY 15TH EVENT.	
SAN DIEGO, CA 92123				250.
Takel from continuation at a take				4,069,705.
Total from continuation sheets				4,009,705.

Form 990-PF LEICHTAG FOUNDATION 33-0466189 Page 11

Form 990-PF LEICHTAG FOUND Part XV Supplementary Information (continued)

If recipient is an individual, shown any relationship to any foundation manager of substantial contributor of status of recipient status of reci	ount 720,156.
COASTAL ROOTS PARM 441 SAXONY ROAD COLLEGE OF THE DESERT FOUNDATION 43500 MONTEREY AVE PALM DESERT, CA 92020 COMMUNITY HEALTH IMPROVEMENT PARTNERS SONS SONS SONS NONE PC TO SUPPORT CONTINUED FARM-TO-SCHOOL EFFORTS IN COASTAL NORTH COUNTY SAN DIEGO, CA 92123 COMMUNITY RESOURCE CENTER SONS SONS SONS SONS SONS SONS SONS SONS COMMUNITY RESOURCE CENTER SONS COMMUNITY RESOURCE CENTER SONS SO	720 156
MEMBERSHIP IN THE 2016 FARM FOUNDERS CIRCLE, WITH ENCINITAS, CA 92024 COLLEGE OF THE DESERT FOUNDATION NONE PC FOR GENERAL SUPPORT TO SUPPORT CONTINUED FARM-TO-SCHOOL EFFORTS IN COASTAL NORTH COUNTY SAN DIEGO, CA 92123 COMMUNITY RESOURCE CENTER NONE PC AS PART OF A TOTAL INVESTMENT OF \$600,000 THAT LF IS 169 SAXONY ROAD SUITE 104 ENCINITAS, CA 92024 CONGREGATION ADAT YESHURUN NONE PC FOR PRIOR YEAR MEMBERSHIP DUES MEMBERSHIP IN THE 2016 FARM FOUNDERS CIRCLE, WITH BENNEFITS WAIVED (3,600) FOR GENERAL SUPPORT TO SUPPORT CONTINUED FARM-TO-SCHOOL EFFORTS IN COASTAL NORTH COUNTY AS PART OF A TOTAL INVESTMENT OF \$600,000 THAT LF IS MAKING TO SUPPORT THREE CORE SOCIAL SERVICE PROVIDER DEGANIZATIONS OVER THE NEXT TWO YEARS THAT ARE ADVANCING SELF-SUPFICIENCY FOR THE MOST VULNERABLE RESIDENTS OF COASTAL NORTH COUNTY CONGREGATION ADAT YESHURUN RESIDENTS OF COASTAL NORTH COUNTY FOR PRIOR YEAR MEMBERSHIP DUES 8625 LA JOLLA, CA 92037	720 156
ENCINITAS, CA 92024 BENEFITS WAIVED (3,600) COLLEGE OF THE DESERT FOUNDATION NONE PC FOR GENERAL SUPPORT COMMUNITY HEALTH IMPROVEMENT PARTNERS SOPS MURPHY CANYON ROAD SUITE 105 SAN DIEGO, CA 92123 COMMUNITY RESOURCE CENTER NONE PC AS PART OF A TOTAL INVESTMENT OF \$600,000 THAT LF IS MAKING TO SUPPORT THEE CORE SOCIAL SERVICE PROVIDER DORANIZATIONS OVER THE NEXT TWO YEARS THAT ARE ADVANCING SELF-SUFFICIENCY FOR THE MOST VULNERABLE RESIDENTS OF COASTAL NORTH COUNTY CONGREGATION ADAT YESHURUN NONE PC FOR PRIOR YEAR MEMBERSHIP DUES FOR PRIOR YEAR MEMBERSHIP DUES	720 156
COLLEGE OF THE DESERT FOUNDATION 43500 MONTERBY AVE PALM DESERT, CA 92260 COMMUNITY HEALTH IMPROVEMENT PARTNERS NONE PC TO SUPPORT CONTINUED FARM-TO-SCHOOL EFFORTS IN 5095 MURPHY CANYON ROAD SUITE 105 SAN DIEGO, CA 92123 COMMUNITY RESOURCE CENTER NONE PC AS PART OF A TOTAL INVESTMENT OF \$600,000 THAT LF IS MAKING TO SUPPORT THREE CORE SOCIAL SERVICE PROVIDER ORGANIZATIONS OVER THE NEXT TWO YEARS THAT ARE ADVANCING SELF-SUFFICIENCY FOR THE MOST VULNERABLE RESIDENTS OF COASTAL NORTH COUNTY CONGREGATION ADAT YESHURUN NONE PC FOR PRIOR YEAR MEMBERSHIP DUES 8625 LA JOLLA SCENIC DR LA JOLLA, CA 92037	720 156
A3500 MONTEREY AVE PALM DESERT, CA 92260 COMMUNITY HEALTH IMPROVEMENT PARTNERS SOPE MURPHY CANYON ROAD SUITE 105 SAN DIEGO, CA 92123 COMMUNITY RESOURCE CENTER NONE PC AS PART OF A TOTAL INVESTMENT OF \$600,000 THAT LF IS MAKING TO SUPPORT THREE CORE SOCIAL SERVICE PROVIDER ENCINITAS, CA 92024 COMMUNITY RESOURCE CENTER NONE ENCINITAS, CA 92024 CONGREGATION ADAT YESHURUN RESIDENTS OF COASTAL NORTH COUNTY CONGREGATION ADAT YESHURUN RESIDENTS OF PRIOR YEAR MEMBERSHIP DUES RESIDENTS OF A TOTAL INVESTMENT OF \$600,000 THAT LF IS MAKING TO SUPPORT THREE CORE SOCIAL SERVICE PROVIDER DRANIZATIONS OVER THE NEXT TWO YEARS THAT ARE ADVANCING SELF-SUPFICIENCY FOR THE MOST VULNERABLE RESIDENTS OF COASTAL NORTH COUNTY CONGREGATION ADAT YESHURUN RESIDENTS OF PRIOR YEAR MEMBERSHIP DUES RESIDENTS OF PRIOR YEAR MEMBERSHIP DUES	, 20, 150.
PALM DESERT, CA 92260 COMMUNITY HEALTH IMPROVEMENT PARTNERS 5095 MURPHY CANYON ROAD SUITE 105 SAN DIEGO, CA 92123 COMMUNITY RESOURCE CENTER NONE PC AS PART OF A TOTAL INVESTMENT OF \$600,000 THAT LF IS 169 SAXONY ROAD SUITE 104 ENCINITAS, CA 92024 ENCINITAS, CA 92024 CONGREGATION ADAT YESHURUN R625 LA JOLLA SCENIC DR LA JOLLA, CA 92037 TO SUPPORT CONTINUED FARM-TO-SCHOOL EFFORTS IN COASTAL NORTH COUNTY TO SUPPORT CONTINUED FARM-TO-SCHOOL EFFORTS IN COASTAL NORTH COUNTY FC FOR PRIOR YEAR MEMBERSHIP DUES	
COASTAL NORTH COUNTY SAN DIEGO, CA 92123 COMMUNITY RESOURCE CENTER NONE PC AS PART OF A TOTAL INVESTMENT OF \$600,000 THAT LF IS MAKING TO SUPPORT THREE CORE SOCIAL SERVICE PROVIDER ORGANIZATIONS OVER THE NEXT TWO YEARS THAT ARE ADVANCING SELF-SUFFICIENCY FOR THE MOST VULNERABLE RESIDENTS OF COASTAL NORTH COUNTY CONGREGATION ADAT YESHURUN NONE PC FOR PRIOR YEAR MEMBERSHIP DUES 8625 LA JOLLA SCENIC DR LA JOLLA, CA 92037	1,000.
COASTAL NORTH COUNTY SAN DIEGO, CA 92123 COMMUNITY RESOURCE CENTER NONE PC AS PART OF A TOTAL INVESTMENT OF \$600,000 THAT LF IS MAKING TO SUPPORT THREE CORE SOCIAL SERVICE PROVIDER ORGANIZATIONS OVER THE NEXT TWO YEARS THAT ARE ADVANCING SELF-SUFFICIENCY FOR THE MOST VULNERABLE RESIDENTS OF COASTAL NORTH COUNTY CONGREGATION ADAT YESHURUN NONE PC FOR PRIOR YEAR MEMBERSHIP DUES 8625 LA JOLLA SCENIC DR LA JOLLA, CA 92037	
SAN DIEGO, CA 92123 COMMUNITY RESOURCE CENTER NONE PC AS PART OF A TOTAL INVESTMENT OF \$600,000 THAT LF IS MAKING TO SUPPORT THREE CORE SOCIAL SERVICE PROVIDER ENCINITAS, CA 92024 ENCINITAS, CA 92024 CONGREGATION ADAT YESHURUN NONE PC FOR PRIOR YEAR MEMBERSHIP DUES 8625 LA JOLLA SCENIC DR LA JOLLA, CA 92037	
COMMUNITY RESOURCE CENTER NONE PC AS PART OF A TOTAL INVESTMENT OF \$600,000 THAT LF IS MAKING TO SUPPORT THREE CORE SOCIAL SERVICE PROVIDER ORGANIZATIONS OVER THE NEXT TWO YEARS THAT ARE ADVANCING SELF-SUFFICIENCY FOR THE MOST VULNERABLE RESIDENTS OF COASTAL NORTH COUNTY CONGREGATION ADAT YESHURUN NONE PC FOR PRIOR YEAR MEMBERSHIP DUES 8625 LA JOLLA SCENIC DR LA JOLLA, CA 92037	
MAKING TO SUPPORT THREE CORE SOCIAL SERVICE PROVIDER ORGANIZATIONS OVER THE NEXT TWO YEARS THAT ARE ADVANCING SELF-SUFFICIENCY FOR THE MOST VULNERABLE RESIDENTS OF COASTAL NORTH COUNTY CONGREGATION ADAT YESHURUN NONE PC FOR PRIOR YEAR MEMBERSHIP DUES LA JOLLA, CA 92037	131,000.
ENCINITAS, CA 92024 ORGANIZATIONS OVER THE NEXT TWO YEARS THAT ARE ADVANCING SELF-SUFFICIENCY FOR THE MOST VULNERABLE RESIDENTS OF COASTAL NORTH COUNTY CONGREGATION ADAT YESHURUN NONE PC FOR PRIOR YEAR MEMBERSHIP DUES 8625 LA JOLLA SCENIC DR LA JOLLA, CA 92037	
ADVANCING SELF-SUFFICIENCY FOR THE MOST VULNERABLE RESIDENTS OF COASTAL NORTH COUNTY CONGREGATION ADAT YESHURUN NONE PC FOR PRIOR YEAR MEMBERSHIP DUES 8625 LA JOLLA SCENIC DR LA JOLLA, CA 92037	
CONGREGATION ADAT YESHURUN NONE PC FOR PRIOR YEAR MEMBERSHIP DUES 8625 LA JOLLA SCENIC DR LA JOLLA, CA 92037	
CONGREGATION ADAT YESHURUN 8625 LA JOLLA SCENIC DR LA JOLLA, CA 92037	
8625 LA JOLLA SCENIC DR LA JOLLA, CA 92037	67,211.
LA JOLLA, CA 92037	
DON DIEGO FUND NONE PC TO SPONSOR THE SCHOLARSHIP FOUNDATION GALA AT THE	1,740.
DOW DIEGO FOND FC TO SPONSOK THE SCHOLLARSHIP FOUNDATION GALLA AT THE	
2250 TIMMY DUDANINE DOULEVARD	
2260 JIMMY DURANTE BOULEVARD DEL MAR, CA 92014 GOLD LEVEL	5,000.
DREAMS FOR CHANGE PC TO SUPPORT A PILOT FOOD TRUCK-BASED EMPLOYMENT	
PO BOX 3812 TRAINING PROGRAM FOR VETERAN AND TRANSITION AGED	
SAN DIEGO, CA 92163 YOUTH IN PARTNERSHIP WITH COASTAL ROOTS FARM	64,100.
Total from continuation sheets	

33-0466189 LEICHTAG FOUNDATION Page 11

Form 990-PF LEICHTAG FOUND Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ENCINITAS ENVIRONMENT DAY INC 2317 SUMMERHILL DR ENCINITAS, CA 92024	NONE	PC	TO SUPPORT THE 10TH ANNUAL ENCINITAS ENVIRONMENT DAY INC. (EEDAY) ECOFESTIVAL	5,000.
FARMERS GUILD 101 MORRIS STREET, SUITE 212 SEBASTOPOL, CA 95472	NONE	PC	TO SUPPORT A FARMING FILM FESTIVAL AT LA PALOMA, ENCINITAS	1,500.
FOUNDATION FIGHTING BLINDNESS 2800 28TH STREET, SUITE 310 SANTA MONICA, CA 90405	NONE	PC	IN MEMORY OF EVAN STONE	250.
FRIENDS OF ISRAEL SCOUTS INC. 575 EIGHTH AVENUE, 11TH FLOOR NEW YORK, NY 10018	NONE	PC	TO COVER PROGRAM SCHOLARSHIP SUPPORT FOR THREE CHILDREN FROM LOW-INCOME NORTH COUNTY COASTAL FAMILIES	1,976.
GOOD PEOPLE FUND INC. 384 WYOMING AVENUE MILLBURN, NJ 7041	NONE	PC	TO KAIMA ORGANIC FARM, FOR OPERATING SUPPORT OVER TWO YEARS	50,000.
GRANTMAKERS FOR EFFECTIVE ORGANIZATIONS 1725 DESALES STREET NW, SUITE 404 WASHINGTON, DC 20036	NONE	PC	FOR 2016 LEICHTAG FOUNDATION MEMBERSHIP	3,970.
HARTLEY FILM FOUNDATION, INC 49 RICHMONDVILLE AVENUE SUITE 204 WESTPORT, CT 6880	NONE	PC	FOR THE AMICHAI FILM PROJECT	25,000.
Total from continuation sheets 623641 04-01-16		18		

Form 990-PF LEICHTAG FOUNDATION 33-0466189 Page 11

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year Recipient	If recipient is an individual,	Favor debien	Down and sweet an	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HAZON	NONE	₽C	TO SUPPORT ITS SAN DIEGO PROGRAM WITH BRIDGE FUNDING,	
125 MAIDEN LANE, SUITE 8B			WHICH WILL ALLOW HAZON TO BRING ON A SENIOR LEVEL	
NEW YORK, NY 10038			CONSULTANT	41,005
HILLEL OF SAN DIEGO	NONE	PC	SEE STATEMENT	
5717 LINDO PASEO				
SAN DIEGO, CA 92115				
				91,000
INTERFAITH CENTER FOR WORKER JUSTICE OF	NONE	PC	TO SUPPORT WORKERS' RIGHTS THROUGH ADVOCACY IN SAN	
SAN DIEGO COUNTY			DIEGO	
3758 30TH ST				
SAN DIEGO, CA 92104				1,000
INTERFAITH COMMUNITY SERVICES	NONE	PC	INDESTRUCTED SUDDADE. NADEU CAUNEV WADES	
550 W. WASHINGTON AVENUE, SUITE B	NOINE	FC	UNRESTRICTED SUPPORT; NORTH COUNTY WORKS	
ESCONDIDO, CA 92025				642,999
EBECONDIDO, CIA 92023				042,333
ISRAEL CANCER RESEARCH FUND, INC	NONE	PC	FOR GENERAL SUPPORT	
295 MADISON AVENUE SUITE 1030				
NEW YORK, NY 10017				500
ISRAEL GUIDE DOG CENTER FOR THE BLIND	NONE	PC	IN HONOR OF RUTH AND ROXI	
968 EASTON ROAD SUITE H				
WARRINGTON, PA 18976				500
JERUSALEM FOUNDATION	NONE	PC	FOR RENEWAL, OPERATIONAL SUPPORT OF JERUSALEM CULTURE	
420 LEXINGTON AVENUE, SUITE 1645			UNLIMITED	
NEW YORK, NY 10170				75,000
Total from continuation sheets				

Form 990-PF LEICHTAG FOUNDATION 33-0466189 Page 11

Form 990-PF LEICHTAG FOUND Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
JEWISH FAMILY SERVICE OF SAN DIEGO	NONE	PC	FOR ON THE GO, IN LOVING MEMORY OF BETTY BYRNES.	
8804 BALBOA AVENUE SAN DIEGO, CA 92123				910.
JEWISH FEDERATION OF PALM SPRINGS AND DESERT AREA 69710 HIGHWAY 111	NONE	PC	SEE STATEMENT	
RANCHO MIRAGE, CA 92270				12,750.
JEWISH FEDERATIONS OF NORTH AMERICA INC 25 BROADWAY, SUITE 1700	NONE	PC	JERUSALEM INTERCULTURAL CENTOR MENTORING; BELIBA OPEERATIONS	
NEW YORK, NY 10004				113,862.
JEWISH FUNDERS NETWORK 150 WEST 30TH STREET, SUITE 900	NONE	PC	FOR THE JFN BOARD CAMPAIGNS FOR JIM FARLEY AND CHARLENE SEIDLE	
NEW YORK, NY 10001				10,000.
JEWISH GIFT CLOSET - SAN DIEGO GMACH 8111 PRODUCTION AVENUE SAN DIEGO, CA 92121	NONE	PC	FOR EMERGENCY SITUATION RELIEF (2,500); TO STOCK THE TOILETRIES CLOSET (500)	3,000.
				,
JEWISH NATIONAL FUND 78 RANDALL AVENUE	NONE	PC	FOR GENERAL SUPPORT	
NEW YORK, NY 11570				3,500.
JEWISH SUNSHINE CIRCLE PO BOX 1463	NONE	PC	FOR GENERAL SUPPORT	
PALM DESERT, CA 92261				1,500.
Total from continuation sheets				

20

33-0466189 LEICHTAG FOUNDATION Page 11

Form 990-PF LEICHTAG FOUND Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
ivalite and address (notice of pushiess)	or śubstantial contributor	recipient		
JOSHUA VENTURE PHILANTHROPIES INC	NONE	PC	FOR SPONSORSHIP OF THE "ACTIVATE" SESSION AT THE	
253 W. 35TH STREET, 4TH FLOOR	NONE		COLLABORATORY	
NEW YORK, NY 10001				2,500.
KBY CONGREGATIONS TOGETHER, INC.	NONE	PC	FOR THE COMMUNITY OF COMMUNITIES INITIATIVE	
P.O. BOX 23170 BROOKLYN, NY 11202				50,000.
KITCHENS FOR GOOD	NONE	PC	FOR GENERAL OPERATING SUPPORT (SD FOOD FUNDERS	
404 EUCLID AVE			CO-FUNDING OPPORTUNITY)	
SAN DIEGO, CA 92114				30,000.
LA JOLLA PLAYHOUSE	NONE	PC	FOR GENERAL SUPPORT	
PO BOX 12039	NONE	FC	FOR GENERAL SUFFORT	
LA JOLLA, CA 92039				15,000.
LAWRENCE FAMILY JEWISH COMMUNITY CENTERS	NONE	PC	SAN DIEGO CJC PROGRAM AND TASK FORCE SUPPORT;	
OF SAN DIEGO COUNTY			DIESCRETIONARY FUND SUPPORT FOR PATRON PARTY	
4126 EXECUTIVE DRIVE			SCHOLARSHIP	
LA JOLLA, CA 92037				41,729.
MOISHE HOUSE	NONE	PC	SEE STATEMENT	
1330 BROADWAY, SUITE 801				
OAKLAND, CA 94612				
				2,618.
MUSICIANS ON CALL INC	NONE	PC	FOR GENERAL SUPPORT	
39 WEST 32 STREET SUITE 1103				
NEW YORK, NY 10001				21,400.
Total from continuation sheets				

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33-0466189 LEICHTAG FOUNDATION Form 990-PF Page 11

Part XV Supplementary Information (continued)

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
NATIONAL YOUNG FARMERS COALITION	NONE	PC	TO SUPPORT THE CONVERGENCE AT LEICHTAG COMMONS AND	
PO BOX 1074			SO. CA REGIONAL COORDINATOR FOR THE NATIONAL YOUNG	
HUDSON, NY 12534			FARMERS COALITION BASED OUT OF THE NORTH COUNTY HUB	60,000
NEW AMERICANS MUSEUM	NONE	PC	FOR THE EXHIBITION & PUBLIC PROGRAMS ASSOCIATED WITH	
2825 DEWEY RD. STE 102			RAFFAEL LOMAS "8000 PAPERCLIPS & ONE SKYPE CALL"	
SAN DIEGO, CA 92106				5,000
NEW SCHOOL ARTS FOUNDATION	NONE	₽C	TO SUPPORT STUDENTS AT THE NEWSCHOOL OF ARCHITECTURE	
PO BOX 122725			+ DESIGN, TO DESIGN AND BUILD THE SUKKAH THAT WILL BE	
SAN DIEGO, CA 92112			ON DISPLAY AT COASTAL ROOTS FARM FOR THE WEEK OF THE	
			SUKKOT HARVEST FESTIVAL	2,430
NEW VENTURE FUND	NONE	PC	FOR LEICHTAG FOUNDATION MEMBERSHIP AND SPONSORSHIP OF	
1201 CONNECTICUT AVENUE NW, SUITE 300	NONE		THE SUSTAINABLE AGRICULTURE & FOOD SYSTEMS FUNDERS	
WASHINGTON, DC 20036			2016 FORUM	7,000
NEW VILLAGE ARTS	NONE	PC	TO SPONSOR THE PRODUCTION OF "AWAKE AND SING"	
2787 STATE STREET				
CARLSBAD, CA 92008				5,000
NORTH COUNTY LIFELINE	NONE	PC	AS PART OF A TOTAL INVESTMENT OF \$600,00 THAT LF IS	
200 MICHIGAN AVENUE			MAKING TO SUPPORT THREE CORE SOCIAL SERVICE PROVIDER	
VISTA, CA 92084			ORGANIZATIONS OVER THE NEXT TWO YEARS THAT ARE	
			ADVANCING SELF-SUFFICIENCY FOR THE MOST VULNERABLE	
			RESIDENTS OF COASTAL NORTH COUNTY	181,215
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	PC	SEE STATEMENT	
630 THIRD AVENUE, 15TH FLOOR				
NEW YORK, NY 10017				
				239,877

33-0466189 LEICHTAG FOUNDATION Form 990-PF Page 11

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	теырісііі		
PALM SPRINGS AIR MUSEUM INC	NONE	₽C	FOR GENERAL SUPPORT (1,000); FOR GENERAL SUPPORT	
745 N GENE AUTRY TRAIL PALM SPRINGS, CA 92262			(3,800)	4,800
PARTNERSHIP FOR THE ADVANCEMENT OF NEW	NONE	PC	TO ADVANCE THE GOALS OF THE LEICHTAG FOUNDATION'S	
AMERICANS 4089 FAIRMOUNT AVE			SYRIAN REFUGEE INITIATIVE THROUGH RESEARCH, AWARENESS BUILDING AND SYRIAN COMMUNITY ORGANIZING (175,000);	
SAN DIEGO, CA 92105			TO SUPPORT THE SYRIAN REFUGEE WELCOMING EVENT AT THE	
			SAN DIEGO ZOO ON AUGUST 27TH (10,658)	185,658.
PONDER EDUCATION FOUNDATION INC 400 WEST BAILEY STREET	NONE	PC	FOR GENERAL SUPPORT	
PONDER, TX 76259				20,000.
·				·
PRESENTENSE GROUP INC	NONE	PC	YAZAMIM SOCIAL ENTREPRENEURSHIP; CORE INFRASTRUCTURE	
115 EAST 23RD STREET, 3RD FLOOR, SUITE 301				
NEW YORK, NY 10010				545,000.
PRODUCEGOOD	NONE	₽C	FOR THE GLEANING CONVENING EVENT AT LEICHTAG COMMONS	
4057 VIA DE LA PAZ			TON THE CEMENTAL CONVENTING EVENT IN EXTENSION COMMONS	
OCEANSIDE, CA 92057				120.
RANCHO SANTA FE FOUNDATION	NONE	PC	TO SUPPORT THE NORTH COUNTY SENIOR CONNECTIONS FOOD	
P.O. BOX 811			TRUCK PROGRAM THAT PROVIDES HEALTHY MEALS AND	
RANCHO SANTA FE, CA 92067			SOCIALIZATION OPPORTUNITIES TO LOW-INCOME SENIORS	100 000
			AROUND COASTAL NORTH COUNTY	100,000.
RAVI SHANKAR FOUNDATION	NONE	PC	FOR GENERAL SUPPORT	
270 N. EL CAMINO REAL STE 316				
ENCINITAS, CA 92024				10,000.
Total from continuation sheets				

Form 990-PF LEICHTAG FOUNDATION 33-0466189 Page 11

Form 990-PF LEICHTAG FOUND Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SAN DIEGO BOTANIC GARDEN P.O. BOX 230005 ENCINITAS, CA 92023	NONE	PC	DISCRETIONARY FUND AWARD; FALL GALA SUPPORT	18,139.
SAN DIEGO CHILDREN'S DISCOVERY MUSEUM 320 N BROADWAY ESCONDIDO, CA 92025	NONE	PC	TO SUPPORT THE ROOTS ISRAEL EVENT	500.
SAN DIEGO GRANTMAKERS 5060 SHOREHAM PLACE, SUITE 350 SAN DIEGO, CA 92122	NONE	PC	SD FOOD FUNDER COORDINATOR; SPONSORSHIPS; EVENT SUPPORT	18,080.
SAN DIEGO HUNGER COALITION 4305 UNIVERSITY AVENUE, SUITE 515 SAN DIEGO, CA 92105	NONE	PC	TO SUPPORT THE TRANSITION OF THE HUNGER ADVOCACY NETWORK	95,500.
SAN DIEGO JEWISH ACADEMY 11860 CARMEL CREEK ROAD SAN DIEGO, CA 92130	NONE	PC	TO SUPPORT THE CAPITAL 4 DEBT ELIMINATION CAMPAIGN - PAYING OFF SDJA DEBT	10,000.
SAN DIEGO STATE UNIVERSITY RESEARCH FOUNDATION 5250 CAMPANILE DRIVE MC 1931 SAN DIEGO, CA 92182	NONE	PC	FOR THE PRODUCERS CLUB	1,500.
SAN DIEGO WOMEN'S FOUNDATION 2508 HISTORIC DECATUR ROAD, STE 200 SAN DIEGO, CA 92106	NONE	PC	TO SUPPORT THE SDWF IN GROWING ITS NORTH COUNTY COASTAL REGION MEMBERSHIP BY 10% THIS YEAR AND IN STRENGTHENING PHILANTHROPY IN THE AREA	10,000.
Total from continuation sheets	·····			

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623641 04-01-16

33-0466189 LEICHTAG FOUNDATION Page 11

Form 990-PF LEICHTAG FOUND Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
SAN DIEGUITO HERITAGE MUSEUM	NONE	PC	FOR THE "ANNUAL MEETING CHALLENGE GRANT" (500); TO	
450 QUAIL GARDENS DRIVE			SUPPORT THE LIMA BEAN FAIRE (2,500)	
ENCINITAS, CA 92024				3,500.
SCRIPPS HEALTH FOUNDATION	NONE	PC	SEE STATEMENT	
4275 CAMPUS POINT COURT				
SAN DIEGO, CA 92121				
				3,500.
SEACREST FOUNDATION	NONE	PC	IN MEMORY OF EVAN STONE	
211 SAXONY ROAD				
ENCINITAS, CA 92024				250.
SHALOM HARTMAN INSTITUTE OF NORTH AMERICA	NONE	PC	FOR IENGAGE JPRO COHORT BASED AT NORTH COUNTY HUB	
2095 ROSE STREET, #202				
BERKELEY, CA 94709				10,000.
SHARP HEALTHCARE FOUNDATION	NONE	PC	IN LOVING MEMORY OF BETTY BYRNES.	
8695 SPECTRUM CENTER BOULEVARD				
SAN DIEGO, CA 92123				250.
SOILLE SAN DIEGO HEBREW DAY SCHOOL	NONE	PC	SEE STATEMENT	
3630 AFTON ROAD				
SAN DIEGO, CA 92123				
				22,228.
SUPPORT THE ENLISTED PROJECT	NONE	PC	FOR MILITARY FAMILY EMERGENCY FOOD ASSISTANCE	
9951 BUSINESSPARK AVE, STE A				
SAN DIEGO, CA 92131				25,000.
l otal from continuation sheets				

33-0466189 LEICHTAG FOUNDATION Form 990-PF Page 11

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
SUSAN G. KOMEN BREAST CANCER FOUNDATION,	NONE	₽C	IN HONOR OF MILEA MERRITT WHO WILL BE PARTICIPATING	
INC.			IN THE KOMEN ORANGE COUNTY RACE FOR THE CURE WITH	
3191-A AIRPORT LOOP DRIVE			TEAM THINK PINK INC. #2231.	
COSTA MESA, CA 92626				500
SYRIAN COMMUNITY NETWORK INC	NONE	PC	AS A MATCH DOLLAR-FOR-DOLLAR TO FUNDS RAISED FROM THE	
6444 CINNABAR WAY			SYRIAN AMERICAN COMMUNITY BEFORE OCTOBER 10TH TO	
CARLSBAD, CA 92009			DIRECTLY SUPPORT REFUGEE FAMILIES TRANSITIONING TO	
			LIFE IN SAN DIEGO WITH FUNDS FOR BASIC NEEDS	F0 000
			INCLUDING HOUSING, TRANSPORTATION AND FOOD	50,000
MEMOLE EVANUE EL	NONE	DG.	HOD A GUARDHED DAGE AD IN IMG PROGRAM ROOK HONORING	
TEMPLE EMANU-EL 6299 CAPRI DRIVE	NONE	PC	FOR A QUARTER-PAGE AD IN ITS PROGRAM BOOK HONORING DR. ROBERT RUBENSTEIN AT ITS MAY 14TH EVENT	
SAN DIEGO, CA 92120			DR. ROBERT ROBENSTEIN AT 115 MAI 141H EVENT	300
DAN DIEGO, CA 72120				300
TEXAS BLEEDING DISORDERS CAMP FOUNDATION	NONE	PC	TO SUPPORT CAMP AILIHPOMEH VIA THE HEROES IN THE	
4617A PINEHURST DR SOUTH			HILLS GOLF TOURNAMENT, AT THE HERO SPONSOR LEVEL.	
AUSTIN, TX 78747			PLEASE NOTE THAT THIS IS A FULL DONATION; NO GOLF	
			PLAYERS ARE BEING REGISTERED AS A PART OF THIS GRANT	10,000
TEXAS COWBOYS AGAINST CANCER	NONE	PC	TO SUPPORT CANCER PATIENTS IN THE WESTERN HERITAGE	
P.O. BOX 132			COMMUNITY WHO ARE UNINSURED OR UNDER-INSURED	
PONDER, TX 76259				2,000
UC SAN DIEGO FOUNDATION	NONE	PC	FOR THE UC SAN DIEGO RADY SCHOOL OF MANAGEMENT	
9500 GILMAN DRIVE #0940			US-ISRAEL CENTER ON INNOVATION AND ECONOMIC	
LA JOLLA, CA 92093			SUSTAINABILITY'S RAIN BARREL HARVESTING PROGRAM	33,382
ULI FOUNDATION	NONE	PC	IN SUPPORT OF THE "PROMOTING BEST PRACTICES IN	
1025 THOMAS JEFFERSON NW STE 500-W			COMMUNITY FARMING AND FOOD AND REAL ESTATE	
WASHINGTON, DC 20007			DEVELOPMENT" INITIATIVE TO BE IMPLEMENTED BY THE	
			URBAN LAND INSTITUTE	115,000
Total from continuation sheets				

Form 990-PF LEICHTAG FOUNDATION 33-0466189 Page 11

Form 990-PF LEICHTAG FOUND FOR THE PART XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
VOICE OF SAN DIEGO	NONE	PC	AS A MATCHING BRIDGE GRANT TO SUPPORT THE NORTH	
2508 HISTORIC DECATUR ROAD, SUITE 120 SAN DIEGO, CA 92106			COUNTY RELIABLE RESOURCES REPORTER	15,000.
Sian Billoo, on Shiro				13,000.
Total from continuation sheets		1		+

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE

ECUADOR EARTHQUAKE EMERGENCY RELIEF; JDC ENTWINE HUB MICROGRANT;

REFUGEE CAMP SUPPLIES IN TURKEY; HAITI HURRICANE RELIEF; WINTER RELIEF

FOR AT-RISK ELDERLY/FAMILIES IN FORMER SOVIET UNION; AND JDC ENTWINE

HEADQUARTERS SUPPORT

NAME OF RECIPIENT - HILLEL OF SAN DIEGO

TO SUPPORT THE ISRAEL FELLOWS PROGRAM DURING THE 2016-2017 SCHOOL YEAR (20,000); TO HONOR JOSEPH CHICKIE GLICKMAN, ELAINE GALINSON AND LAURA GALINSON BY SPONSORING THE CAMPUS SUPERSTAR SAN DIEGO EVENT AT THE PLATINUM ALBUM LEVEL (5,000); FOR FOUR-MONTH BRIDGE FUNDING TO HILLEL OF SAN DIEGO (41,000); UP TO \$20,000 FOR A STRATEGIC ASSESSMENT OF ITS NORTH COUNTY PROGRAM (20,000); FOR ANNUAL SUPPORT (2,000); TO HONOR JOSEPH ØHICKIEØGLICKMAN, ELAINE GALINSON AND LAURA GALINSON WITH A SILVER ALBUM LEVEL SPONSORSHIP OF THE CAMPUS SUPERSTAR SAN DIEGO EVENT (1,000); FOR THE MATISYAHU COEXISTENCE EVENT UNDERWRITING (2,000)

NAME OF RECIPIENT - JEWISH FEDERATION OF PALM SPRINGS AND DESERT AREA

MADE WITH THE RECOMMENDATION THAT IT BE USED TO SUPPORT THE

AMERICA-ISRAEL CULTURAL FOUNDATION (1,000); FOR SUPPORT OF A CULTURAL

CONCERT EVENT (5,000); FOR SUPPORT OF THE FEDERATION COMMUNITY CULTURAL

EVENT ON MARCH 21, 2016 (750); FOR SUPPORT OF CULTURAL EVENTS IN THE

COMMUNITY (1,000); FOR THE TOLERANCE EDUCATION CENTER, FOR RENOVATION

AND IMPROVEMENTS TO THE DONOR RECOGNITION BOARD IN THE MAIN LOBBY,

WHICH IS TO BE IN MEMORY OF THE FOUNDERS EARL AND SALLY GRIEF; FOR

IMPROVED RECORD STORAGE CABINETS AND RELATED CAPITAL ONLY IMPROVEMENTS;

AND FOR THE PURCHASE OF TEN BOOKS ON NONPROFIT BOARDS BY MARK EPSTEIN

(5,000)

623655 04-01-16

Part XV | Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - MOISHE HOUSE

AS A PROFESSIONAL DEVELOPMENT STIPEND FOR HUB MEMBER ANNA KERNUS'S

ATTENDANCE AT THE COLLABORATORY (118); FOR A NORTH COUNTY HUB

COLLABORATION WITH COASTAL ROOTS FARM, TO COORDINATE AND IMPLEMENT

MOISHE HOUSE'S 10TH ANNIVERSARY SHABBAT ON SEPTEMBER 23RD (1,500); FOR

GENERAL SUPPORT (1,500)

NAME OF RECIPIENT - P.E.F. ISRAEL ENDOWMENT FUNDS MADE WITH THE RECOMMENDATION THAT IT BE USED TO SUPPORT THE JERUSALEM INSTITUTE FOR ISRAEL STUDIES, FOR THE PRODUCTION OF THE 30TH EDITION OF THE JERUSALEM STATISTICAL YEARBOOK (25,000); TO HELP FUND THE SEVEN WAYS TO DISSOLVE BOUNDARIES PROJECT, A SERIES OF DOCO-THEATRICAL JOUNEYS ACROSS JERUSALEM, AS PART OF THE 2016 THREE-WEEK FESTIVAL (90,000); TO SUPPORT THE 2017 JERUSALEM BIENNALE, \$23,877 PAID IN 2016 AND \$25,000 PAID IN 2017 (48,877); TO SUPPORT THE DANCING RAM (AMUTAH NUMBER 580569283) WITH THE 360 DEGREES THEATER FESTIVAL OF ART IN THE PUBLIC SPACE FROM AUGUST 24-27 IN JERUSALEM (6,000); TO SUPPORT BRINGING EXHIBIT SELECTIONS FROM THE 2015 JERUSALEM BIENNALE TO THE JEWISH FUNDERS NETWORK CONFERENCE IN SAN DIEGO (10,000); FOR DUALIS SOCIAL INVESTMENT FUND, DESIGNATED FOR ANNA RESTAURANT USE BY GRANTEES (25,000); TO SUPPORT THE KABBALAT SHABBAT PROGRAM, A SERIES OF 21 SUMMERTIME SERVICES AT THE FIRST STATION IN JERUSALEM, LEAD BY PRAYER LEADERS, COMMUNITY LEADERS AND MUSICIANS (25,000);

NAME OF RECIPIENT - SCRIPPS HEALTH FOUNDATION

TO SUPPORT THE ENCINITAS PHYSICAL THERAPY OUTPATIENT DEPARTMENT

(1,000); FOR OUTPATIENT PHYSICAL THERAPY DEPARTMENT EQUIPMENT AT

Part XV Supplementary Information
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution
SCRIPPS HOSPITAL ENCINITAS (2,500)
TO SUPPORT THE ENCINITAS PHYSICAL THERAPY OUTPATIENT DEPARTMENT
(1,000); FOR OUTPATIENT PHYSICAL THERAPY DEPARTMENT EQUIPMENT AT
SCRIPPS HOSPITAL ENCINITAS (2,500)
TO SUPPORT THE ENCINITAS PHYSICAL THERAPY OUTPATIENT DEPARTMENT
(1,000); FOR OUTPATIENT PHYSICAL THERAPY DEPARTMENT EQUIPMENT AT
SCRIPPS HOSPITAL ENCINITAS (2,500)
NAME OF RECIPIENT - SOILLE SAN DIEGO HEBREW DAY SCHOOL
TO PROVIDE TRANSPORTATION TO THE FARM FOR TWO GROUPS OF PRESCHOOL
STUDENTS (728); TO SUPPORT THE SOILLE HEBREW DAY GALA HONORING SELWYN
ISAKOW (1,000); FOR GENERAL SUPPORT (20,000); TO SUPPORT THE MELVIN
WEISER SCHOLARSHIP FUND IN MEMORY OF MELVIN WEISER, O'BM (500)

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Name of the organization

Employer identification number

33-0466189

LEICHTAG FOUNDATION

Organization	type (check one):
Filers of:	Section:
Form 990 or 9	90-EZ 501(c)() (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
•	organization is covered by the General Rule or a Special Rule. section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
X For a	n organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or erty) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
For a section	n organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, Form 990-EZ, line 1. Complete Parts I and II.
year,	n organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for revention of cruelty to children or animals. Complete Parts I, II, and III.
year, is che purpe	n organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ecked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., ose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively out, charitable, etc., contributions totaling \$5,000 or more during the year
Caution: An o	rganization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-FZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization Employer identification number

LEICHTAG FOUNDATION 33-0466189

Part I	Contributors (See instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PO BOX 51 TULSA, OK 74101	\$13,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	NATAN FUND BY FJC 120 E. 23RD STREET, 5TH FLOOR NEW YORK, NY 10010	\$15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for

Name of organization Employer identification number

LEICHTAG FOUNDATION

33-0466189

Part II	Noncash Property (See instructions). Use duplicate copies of F	Part II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	-
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$,
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_		 \$	

Page 4 Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Name of organization Employer identification number 33-0466189 LEICHTAG FOUNDATION Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Form **2220**

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.

FORM 990-PF

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

Information about Form 2220 and its separate instructions is at www.irs.gov/form2220.

2016

LEICHTAG FOUNDATION

Employer identification number 33-0466189

Note: Generally, the corporation isn't required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38 on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method c Credit for federal tax paid on fuels (see instructions) d Total. Add lines 2 at through 2c 3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation doesn't owe the penalty or the tax year was for less than 12 months, skip this line and enter the amount from line 5 4 148, 312. 8 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if if doesn't owe a penalty. See instructions. Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if the corporation is using the adjusted seasonal installment method. Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the employed properties of the properties of the properties of the properties o	2 a Personal holding company ta b Look-back interest included o contracts or section 167(g) fo c Credit for federal tax paid on t d Total. Add lines 2a through 2 3 Subtract line 2d from line 1. It doesn't owe the penalty 4 Enter the tax shown on the co or the tax year was for less t 5 Required annual payment. E enter the amount from line 3 Part II Reasons for even if it doesn't ov 6 The corporation is us 7 The corporation is us 7 The corporation is us 8 X The corporation is a " Part III Figuring the 9 Installment due dates. Enter (d) the 15th day of the 4th (F) Use 5th month), 6th, 9th, and							
2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2 a Personal holding company ta b Look-back interest included of contracts or section 167(g) for c Credit for federal tax paid on the d Total. Add lines 2a through 2 3 Subtract line 2d from line 1. It doesn't owe the penalty 4 Enter the tax shown on the coor the tax year was for less the 5 Required annual payment. Eventer the amount from line 3 Part III Reasons for even if it doesn't ow 6 The corporation is us 7 The corporation is us 7 The corporation is us 8 X The corporation is a " Part III Figuring the 9 Installment due dates. Enter (d) the 15th day of the 4th (Four Use 5th month), 6th, 9th, and							
b Look back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method. c Credit for federal tax paid on fuels (see instructions) d Total. Add lines 2 at through 2c 3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation doesn't owe the penalty. 4 Enter the tax shown on the corporation's 2015 income tax return. See instructions. Caution; if the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5. 4 148,312. 5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is send that apply. If any boxes are checked, the corporation must file Form 2220 even if it doesn't owe a penalty. See instructions. 6 The corporation is using the adjusted seasonal installment method. 7 The corporation is using the annualized income installment method. 8 The corporation is using the annualized income installment method. 9 Installment due dates. Enter in columns (g) through (g) the 15th day of the 4th firem 300-04 fixes Use 5th month), (bit, 9th, and 12th months of the corporation is a 'large corporation Six 'ps' is shecked, either the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column. Complete lines 12 through 18 of one column before going to the next column. Complete lines 12 through 18 of one column before going to the next column. 12 The complete lines 12 through 18 of one column before going to the next column. 13 Add lines 11 and 12 14 Add amounts on lines 16 and '7 of the preceding column 12 15 Chief amount, I any, from line 18 of the preceding column 14. Otherwise, enter -0. 16 If the amount on line 15 is ear, subtract line 13 from line 14. Otherwise, enter -0. 17 Underpayment. If line 15 is less than or equal to line 10,	c Credit for federal tax paid on the document of the document						1	72,897.
b Look back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method. c Credit for federal tax paid on fuels (see instructions) d Total. Add lines 2 at through 2c 3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation doesn't owe the penalty. 4 Enter the tax shown on the corporation's 2015 income tax return. See instructions. Caution; if the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5. 4 148,312. 5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is send that apply. If any boxes are checked, the corporation must file Form 2220 even if it doesn't owe a penalty. See instructions. 6 The corporation is using the adjusted seasonal installment method. 7 The corporation is using the annualized income installment method. 8 The corporation is using the annualized income installment method. 9 Installment due dates. Enter in columns (g) through (g) the 15th day of the 4th firem 300-04 fixes Use 5th month), (bit, 9th, and 12th months of the corporation is a 'large corporation Six 'ps' is shecked, either the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column. Complete lines 12 through 18 of one column before going to the next column. Complete lines 12 through 18 of one column before going to the next column. 12 The complete lines 12 through 18 of one column before going to the next column. 13 Add lines 11 and 12 14 Add amounts on lines 16 and '7 of the preceding column 12 15 Chief amount, I any, from line 18 of the preceding column 14. Otherwise, enter -0. 16 If the amount on line 15 is ear, subtract line 13 from line 14. Otherwise, enter -0. 17 Underpayment. If line 15 is less than or equal to line 10,	c Credit for federal tax paid on the document of the document	av (Schedule PH (Form 1120) line	e 26) i	included on line 1	2a			
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Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (<i>Form 990-PF filers</i> : Use 5th month), 6th, 9th, and 12th months of the corporation's tax year 10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column. 11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions Complete lines 12 through 18 of one column before going to the next column. 12 Enter amount, if any, from line 18 of the preceding column 13 Add lines 11 and 12 13 74, 249. 56, 0.24. 37, 800. 14 Add amounts on lines 16 and 17 of the preceding column 15 Subtract line 14 from line 13. If zero or less, enter -0- lif the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- lif the amount on line 15 is less than or equal to line 10,	(d) the 15th day of the 4th (F oundary Use 5th month), 6th, 9th, and	Underpayment						
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Use 5th month), 6th, 9th, and 12th months of the corporation's tax year 10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column. 11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions Complete lines 12 through 18 of one column before going to the next column. 12 Enter amount, if any, from line 18 of the preceding column Add lines 11 and 12 13	Use 5th month), 6th, 9th, and	r in columns (a) through						
Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column. 10 18,224. 18,225. 18,224. 18,224. 11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions Complete lines 12 through 18 of one column before going to the next column. 12 Enter amount, if any, from line 18 of the preceding column Add lines 11 and 12 13 74,249. 56,024. 37,800. 14 Add amounts on lines 16 and 17 of the preceding column Subtract line 14 from line 13. If zero or less, enter -0- 16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- 17 Underpayment. If line 15 is less than or equal to line 10,		d 12th months of the		05/15/16	06/15/16	00/15	,,,,,	
above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column. 10			9	02/12/10	06/15/16	09/15/	10	
the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column. 11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions Complete lines 12 through 18 of one column before going to the next column. 12 Enter amount, if any, from line 18 of the preceding column 13 Add lines 11 and 12 14 Add amounts on lines 16 and 17 of the preceding column 15 Subtract line 14 from line 13. If zero or less, enter -0- 16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- 17 Underpayment. If line 15 is less than or equal to line 10,	•							
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enter 25% (0.25) of line 5 above in each column. 10	· ·							
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions Complete lines 12 through 18 of one column before going to the next column. 12 Enter amount, if any, from line 18 of the preceding column 13 Add lines 11 and 12 13 74,249 56,024 37,800 14 Add amounts on lines 16 and 17 of the preceding column 15 Subtract line 14 from line 13. If zero or less, enter -0- 16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- 16 Underpayment. If line 15 is less than or equal to line 10, 17 Underpayment. If line 15 is less than or equal to line 10, 18 or or line 15 is less than or equal to line 10, 19 or or less, enter -0- 16 Underpayment. If line 15 is less than or equal to line 10, 19 or or less, enter -0- 16 Underpayment. If line 15 is less than or equal to line 10, 19 or or less, enter -0- 16 Underpayment. If line 15 is less than or equal to line 10, 19 or or less, enter -0- 16 Underpayment. If line 15 is less than or equal to line 10, 19 or or less, enter -0- 16 Underpayment. If line 15 is less than or equal to line 10, 19 or or less, enter -0- 16 Underpayment. If line 15 is less than or equal to line 10, 19 or or less, enter -0- 16 Underpayment. If line 15 is less than or equal to line 10, 19 or or less, enter -0- 16 Underpayment. If line 15 is less than or equal to line 10, 19 or or less, enter -0- 16 Underpayment. If line 15 is less than or equal to line 10, 19 or or less, enter -0- 10 or or or or or less, e		·	40	19 224	10 225	19.5	24	10 22/
column (a) only, enter the amount from line 11 on line 15. See instructions Complete lines 12 through 18 of one column before going to the next column. 12 Enter amount, if any, from line 18 of the preceding column 13 Add lines 11 and 12 14 Add amounts on lines 16 and 17 of the preceding column 15 Subtract line 14 from line 13. If zero or less, enter -0- 16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- 17 Underpayment. If line 15 is less than or equal to line 10,	, ,		.10	10,224.	10,225	10,2	44.	10,224.
11 92,473								
Complete lines 12 through 18 of one column before going to the next column. 12 Enter amount, if any, from line 18 of the preceding column 13 Add lines 11 and 12 14 Add amounts on lines 16 and 17 of the preceding column 15 Subtract line 14 from line 13. If zero or less, enter -0- 16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- 16 Underpayment. If line 15 is less than or equal to line 10,	* * * * * * * * * * * * * * * * * * * *		44	92 473				
before going to the next column. 12 Enter amount, if any, from line 18 of the preceding column 13 Add lines 11 and 12 14 Add amounts on lines 16 and 17 of the preceding column 15 Subtract line 14 from line 13. If zero or less, enter -0- 16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- 16 Underpayment. If line 15 is less than or equal to line 10,			"	72,413.		+		
12 Enter amount, if any, from line 18 of the preceding column 13 Add lines 11 and 12 14 Add amounts on lines 16 and 17 of the preceding column 15 Subtract line 14 from line 13. If zero or less, enter -0- 16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- 16 Underpayment. If line 15 is less than or equal to line 10,	,							
13 Add lines 11 and 12 13 74,249. 56,024. 37,800. 14 Add amounts on lines 16 and 17 of the preceding column 14 15 Subtract line 14 from line 13. If zero or less, enter -0- 15 92,473. 74,249. 56,024. 37,800. 16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- 16 0. 0. 17 Underpayment. If line 15 is less than or equal to line 10, 16 0. 0.	• •		12		74 249	56.0	124	37.800.
Add amounts on lines 16 and 17 of the preceding column Subtract line 14 from line 13. If zero or less, enter -0- If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- Underpayment. If line 15 is less than or equal to line 10,								
15 Subtract line 14 from line 13. If zero or less, enter -0- 16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- 16 Underpayment. If line 15 is less than or equal to line 10,					, _ ,	33,3		0.7000
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- 17 Underpayment. If line 15 is less than or equal to line 10,		-		92.473.	74.249	56.0	24.	37.800.
14. Otherwise, enter -0- 17 Underpayment. If line 15 is less than or equal to line 10,				,	,	1 33,3		7.7
17 Underpayment. If line 15 is less than or equal to line 10,			16		0 .	,	0.	
·	• •							
column. Otherwise, go to line 18 17		-	17					
18 Overpayment. If line 10 is less than line 15, subtract line 10	from line 15. Then go to line	· ·	18	74,249.	56,024	37,8	ann I	
subtract line 15 from line 10. Then go to line 12 of the next	 Add amounts on lines 16 and Subtract line 14 from line 13. If the amount on line 15 is zer 14. Otherwise, enter -0- Underpayment. If line 15 is let 	d 17 of the preceding column . If zero or less, enter -0- ero, subtract line 13 from line less than or equal to line 10,	14 15	92,473.	74,249	56,0	024.	37,800.
TO OVERPAYINENT. IT MILE TO IS IESS UTAIL MILE TO, SUDUTACLIME TO TOTAL TO THE TOTAL TO THE TOTAL THE TOTA	• •	· ·	امدا	74 240	56 024	37 9	ann I	

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2016)

Form 2220 (2016)

Part IV Figuring the Penalty

			(a)	(b)	(c)		(d)
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C Corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month						
	instead of 4th month.) See instructions	19					
20	Number of days from due date of installment on line 9 to the date shown on line 19	20					
21	Number of days on line 20 after 4/15/2016 and before 7/1/2016	21					
22	Underpayment on line 17 x Number of days on line 21 x 4% (0.04)	22	\$	\$	\$		\$
23	Number of days on line 20 after 06/30/2016 and before 10/1/2016	23					
24	Underpayment on line 17 x Number of days on line 23 x 4% (0.04)	24	\$	\$	\$		\$
25	Number of days on line 20 after 9/30/2016 and before 1/1/2017	25					
26	Underpayment on line 17 x Number of days on line 25 x 4% (0.04)	26	\$	\$	\$		\$
27	Number of days on line 20 after 12/31/2016 and before 4/1/2017	27	SEE	ATTACHED W	ORKSHEET		
28	Underpayment on line 17 x Number of days on line 27 x 4% (0.04)	28	\$	\$	\$		\$
29	Number of days on line 20 after 3/31/2017 and before 7/1/2017	29					
30	Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$		\$
31	Number of days on line 20 after 6/30/2017 and before 10/1/2017	31					
32	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$		\$
33	Number of days on line 20 after 9/30/2017 and before 1/1/2018	33					
34	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$		\$
35	Number of days on line 20 after 12/31/2017 and before 3/16/2018	35					
36	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$		\$
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	ı	\$
38	Penalty. Add columns (a) through (d) of line 37. Enter the tot or the comparable line for other income tax returns			·		38	\$ 60.

^{*} Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at **www.irs.gov.** You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2016)

FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying N	umber
LEICHTAG F	OUNDATION			33-04	66189
(A)	(B)	(C) Adjusted	(D) Number Days	(E) Daily	(F)
*Date	Amount	Balance Due	Balance Due	Penalty Rate	Penalty
		-0-			
04/15/16	18,224.	18,224.	30	.000109290	60.
05/15/16	18,224.	36,448.			
05/15/16	-40,000.	-3,552.			
05/15/16	-52,473.	-56,025.			
06/15/16	18,225.	-37,800.			
09/15/16	18,224.	-19,576.			
12/31/16	0.	-19,576.	46	.000109589	
Penalty Due (Sum of Colu	ımn F).				60.

^{*} Date of estimated tax payment, withholding credit date or installment due date.

612511 04-01-16

FORM 990-PF INTERE	ST ON SAVING	S AND '	rempor.	ARY CASH	IN	VESTMENTS	STATEMENT	1
SOURCE		(A) EVENUE R BOOK		' IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME		
INTEREST INCOME				 15.		15.		
TOTAL TO PART I, LI	NE 3		:	15.		15.		
FORM 990-PF	DIVIDENDS	AND IN	rerest	FROM SE	CUR	ITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPI' GAII DIVID	NS	(A) REVENU PER BOO		(B) NET INVES MENT INCO		
DIVIDEND INCOME	337,963.	14	,728.	323,2	35.	323,23	5.	
TO PART I, LINE 4	337,963.	14	,728.	323,2	35.	323,23	5.	
FORM 990-PF		RENTAL	INCOM	E			STATEMENT	3
KIND AND LOCATION O	F PROPERTY					ACTIVITY NUMBER	GROSS RENTAL INC	OME
RENTAL INCOME						1	772,3	25.
						-		
TOTAL TO FORM 990-P	F, PART I, I	INE 5A				:	772,3	25.
FORM 990-PF	F, PART I, I		R INCO	ME		-	772,3	25. 4
	F, PART I, I		RE	ME (A) VENUE BOOKS		(B) ET INVEST- ENT INCOME	STATEMENT (C) ADJUSTE	4 D
FORM 990-PF			RE	(A) VENUE	M	ET INVEST-	STATEMENT (C) ADJUSTE NET INCO	4 D

FORM 990-PF	LEGAL	FEES	S'.	ratement 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL	17,024.	13,771.		0.
TO FM 990-PF, PG 1, LN 16A =	17,024.	13,771.		0.
FORM 990-PF	ACCOUNTI	NG FEES	S	ratement 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	33,900.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	33,900.	0.		0.
FORM 990-PF C	OTHER PROFES	SIONAL FEES	S	FATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT CONSULTING OTHER CONSULTING FEES MARKETING	70,500. 145,594. 16,632.			0. 94,138. 5,200.
TO FORM 990-PF, PG 1, LN 16C =	232,726.	82,327.		99,338.
FORM 990-PF	TAX	ES	S'	ratement 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAXES PAYROLL TAXES STATE TAXES PROPERTY TAXES SALES & USE TAX	99,000. 106,764. 3,356. 92,293. 4.			0. 8,790. 0. 0.

FORM 990-PF	OTHER E	XPENSES		STATEMENT 9
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
SYSTEMS SUPPORT OFFICE EXPENSES SUPPLIES MAINTENANCE & REPAIRS COMMUNITY EVENTS INSURANCE VILLAS EXPENSE OTHER EXPENSES SECURITY MEMBERSHIP DUES INVESTMENT EXPENSES	55,726. 89,855. 74,455. 90,848. 239,913. 89,523. 40,576. 42,648. 33,241. 3,809. 62,222.	9,384 12,063 90,848 48,722 40,576 5,904 12,398	1. 3. 3. 3. 5. 4. 3.	3,784. 19,955. 24,447. 0. 38,380. 627. 0. 1,388. 7,033. 0.
TO FORM 990-PF, PG 1, LN 23	822,816.			95,614.
FORM 990-PF OTHER INCREASES	S IN NET ASS	ETS OR FUND	BALANCES	STATEMENT 10
DESCRIPTION				AMOUNT
UNREALIZED GAIN ON INVESTMENT PRESENT VALUE OF CONTRIBUTION		BOOK - NOT C	ON TAX	2,546,951. 556,645.
TOTAL TO FORM 990-PF, PART II	II, LINE 3			3,103,596.
FORM 990-PF	CORPORAT	E BONDS		STATEMENT 11
DESCRIPTION		E	BOOK VALUE	FAIR MARKET VALUE
BOND FUNDS			29,831,719.	29,831,719.
TOTAL TO FORM 990-PF, PART II	I, LINE 10C		29,831,719.	29,831,719.

FORM 990-PF	OTHER]	INVESTMENTS		STATEMENT	12
DESCRIPTION		VALUATION METHOD	BOOK VALUE	FAIR MARKE VALUE	Т
ALTERNATIVE INVESTMENT EQUITY SECURITIES		FMV FMV	9,740,421. 54,138,746.	9,740,4 54,138,7	
TOTAL TO FORM 990-PF, PART II,	LINE 13	3	63,879,167.	63,879,1	67.

FORM 990-PF

LIST OF CONTROLLED ENTITIES PART VII-A, LINE 11

STATEMENT 13

NAME OF CONTROLLED ENTITY

EMPLOYER ID NO

LF VILLAS, LLC

TAX EXEMPT

ADDRESS

EXCESS BUSINESS HOLDING [] YES [X] NO

441 SAXONY ROAD ENCINITAS, CA 92024

NAME OF CONTROLLED ENTITY

EMPLOYER ID NO

LF ENCINITAS PROPERTIES, LLC

45-4867829

ADDRESS

EXCESS BUSINESS HOLDING [] YES [X] NO

441 SAXONY ROAD ENCINITAS, CA 92024

42

STATEMENT

FORM 990-PF

TRUSTEES AND	FOUNDATION MANA	AGERS		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
ROBERT BRUNST, M.D., PH.D. 441 SAXONY RD ENCINITAS, CA 92024	CFO AND TREAST	URER 6,000.	0.	0.
BERNARD REITER 441 SAXONY RD ENCINITAS, CA 92024	CHAIRMAN 2.00	4,000.	0.	0.
EMILY EINHORN 441 SAXONY RD ENCINITAS, CA 92024	VICE CHAIR 2.00	6,000.	0.	0.
JAMES S. FARLEY 441 SAXONY RD ENCINITAS, CA 92024	PRESIDENT/CEO 40.00		45,827.	0.
DR. JEFFREY R. SOLOMON 441 SAXONY RD ENCINITAS, CA 92024	VICE CHAIR 2.00	6,000.	0.	0.
CHARLENE SEIDLE 441 SAXONY RD ENCINITAS, CA 92024	EVP/EXECUTIVE 40.00		28,583.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	524,605.	74,410.	0.
FORM 990-PF SUMMARY OF DIRE	ECT CHARITABLE A	ACTIVITIES	STATI	EMENT 15

PART VIII - LIST OF OFFICERS, DIRECTORS

ACTIVITY TWO

THE FOUNDATION IS SUPPORTING PROGRAMS AND EDUCATIONAL ACTIVITIES INSPIRED BY ANCIENT JEWISH TRADITIONS THAT CONNECT PEOPLE TO COMMUNITY, FOOD, THE LAND AND SOCIAL JUSTICE. THESE TRADITIONS AND VALUES ARE AS MEANINGFUL AND RELEVANT TODAY AS THEY HAVE BEEN OVER THOUSANDS OF YEARS. THEY ARE ALSO THE BASIS OF OUR DEEP COMMITMENT TO THE PRINCIPLES OF FOOD JUSTICE INCLUDING ACCESS TO FRESH, HEALTHY, AFFORDABLE AND CULTURALLY-APPROPRIATE FOOD FOR ALL; FAIR TREATMENT OF WORKERS; AND COMPASSIONATE TREATMENT OF ANIMALS.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 2

775,670.

Form **8868**

(Rev. January 2017)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

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

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

must us	se Form 7004 to request an extension of time to file incom-	e tax retui	IIS.	Enter file	er's identif	ying number
Type or				Employer	Employer identification number (EIN) or	
	LEICHTAG FOUNDATION				33-0466189	
File by the due date f filing your return. Se	for Number, street, and room or suite no. If a P.O. box, see instructions. S 441 SAXONY ROAD			Social se	Social security number (SSN)	
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ENCINITAS, CA 92024					
Enter th	e Return Code for the return that this application is for (file	e a separa	ate application for each return)			0 4
Application		Return	Application			Return
ls For		Code	Is For			Code
Form 990 or Form 990-EZ		01	Form 990-T (corporation)			07
Form 990-BL		02	Form 1041-A			08
Form 4720 (individual)		03	Form 4720 (other than individual)			09
Form 990-PF		04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)		05	Form 6069			11
Form 990-T (trust other than above) LEICHTAG FOUNDA			Form 8870			12
The books are in the care of ▶ 441 SAXONY ROAD - ENCINITAS, CA 92024 Telephone No. ▶ 760-929-1090 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If this is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for. Trequest an automatic 6-month extension of time until AUGUST 15, 2017, to file the exempt organization return for the organization named above. The extension is for the organization's return for: □ calendar year or and ending SEP 30, 2016						
	If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return X Change in accounting period					
	this application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069,	enter the tentative tax, less any			65 000
<u>n</u>	onrefundable credits. See instructions.			3a	\$	65,000.
	this application is for Forms 990-PF, 990-T, 4720, or 6069					92,473.
_	stimated tax payments made. Include any prior year overp			3b	\$	34,413.
	alance due. Subtract line 3b from line 3a. Include your pa y using EFTPS (Electronic Federal Tax Payment System). \$	•	, , ,	3c	\$	0.
	: If you are going to make an electronic funds withdrawal				т.	

instructions.

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

Form 8868 (Rev. 1-2017)