2018

990-PF

**PUBLIC** 

**DISCLOSURE** 

### Form **990-PF**Department of the Treasury

#### **Return of Private Foundation**

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.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0052

2018
Open to Public Inspection

OCT 1, 2018 SEP 30, 2019 For calendar year 2018 or tax year beginning , 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 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 Other taxable private foundation under section 507(b)(1)(A), check here Cash X Accrual I Fair market value of all assets at end of year | J Accounting method: 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 ... 100,414,202. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net (a) Revenue and (b) Net investment (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 193,999. 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 1,913. 1,913. STATEMENT 2,628,692. 2,628,692. STATEMENT 4 Dividends and interest from securities 1,752,364. 1,752,364. STATEMENT **5a** Gross rents ..... b Net rental income or (loss) 1,752,364. 6,306,074. STATEMENT 4 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a ..... 24,726,156. 7 Capital gain net income (from Part IV, line 2) 6,320,996. 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) 110,269 STATEMENT 5 0. 11 Other income ,993,311. 10,703,965. Total. Add lines 1 through 11 803,995 471,173. 230,822. 13 Compensation of officers, directors, trustees, etc. 2,043,923. 714,616. 14 Other employee salaries and wages ..... 76,172. 575,965. 139,070. 219,735. 15 Pension plans, employee benefits 8,458. 132,922. 115,994 Expenses 16a Legal fees STMT 6 39,100. b Accounting fees STMT 7 0. 358,346. 129,725. c Other professional fees STMT 8 171,385. 17 Interest ..... 103,223. Taxes STMT 9 366,138. 64,558. 18 666,929. Depreciation and depletion 666,929. 20 Occupancy 307,035. 347,540. 15. 21 Travel, conferences, and meetings ..... and 22 Printing and publications ...... 23 Other expenses STMT 10 1,135,225. 570,623. 305,237. 24 Total operating and administrative 6,470,083 2,272,924. 2,021,846. expenses. Add lines 13 through 23 5,540,132. 5,540,132. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 12,010,215 2,272,924 7,561,978. Add lines 24 and 25 27 Subtract line 26 from line 12: -1,016,904**a** Excess of revenue over expenses and disbursements 8,431,041 **b Net investment income** (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-).

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions.

Р	art II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.		Beginning of year		of year			
		Column should be for end-or-year amounts only.	(a) Book Value	( <b>b</b> ) Book Value	(c) Fair Market Value			
	1	Cash - non-interest-bearing						
	2	Savings and temporary cash investments	2,128,567.	2,454,173.	2,454,173.			
	3	Accounts receivable ► 130,148.						
		Less: allowance for doubtful accounts <b>\rightarrow</b>	210,389.	130,148.	130,148.			
	4	Pledges receivable ►						
		Less: allowance for doubtful accounts						
	5	Grants receivable						
	6	Receivables due from officers, directors, trustees, and other						
	7	disqualified persons Other notes and loans receivable  487,585.						
	'	Less; allowance for doubtful accounts   0.	409,406.	487,585.	487,585.			
"	Q	Inventories for sale or use	205 / 2001	2077000	207,0001			
Assets		Prepaid expenses and deferred charges	392,960.	134,441.	134,441.			
Ass		Investments IIC and state government chliquitiens	372,700.	131,111.	131,111			
•		Investments - U.S. and state government obligations						
	0	Investments - corporate stock Investments - corporate bonds STMT 12	24,513,404.	21 C2E 110	21,625,110.			
	C	Investments - corporate bonds STMT 12	24,513,404.	21,625,110.	21,023,110.			
	11	Investments - land, buildings, and equipment: basis 25 , 464 , 553 •	22 406 530	00 076 704	22 076 724			
		Less: accumulated depreciation 2,487,759.	22,486,539.	22,976,794.	22,976,794.			
	12	Investments - mortgage loans	56 500 056	50 605 005	50 605 005			
	13	Investments - mortgage loans Investments - other STMT 13	56,732,076.	52,605,887.	52,605,887.			
	14	Land, buildings, and equipment: basis						
		Less: accumulated depreciation						
	15	Other assets (describe ► DEPOSITS )	3,300.	64.	64.			
	16	Total assets (to be completed by all filers - see the						
		instructions. Also, see page 1, item I)			100,414,202.			
	17	Accounts payable and accrued expenses		714,969.				
	18	Grants payable	7,997,838.	7,431,806.				
S		Deferred revenue	138,433.					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons						
ap	21	Mortgages and other notes payable						
	22	Other liabilities (describe  )						
	23	Total liabilities (add lines 17 through 22)	8,984,993.	8,146,775.				
		Foundations that follow SFAS 117, check here						
		and complete lines 24 through 26, and lines 30 and 31.						
ces	24	Unrestricted	97,891,648.	92,267,427.				
<u>a</u>	25	Temporarily restricted						
or Fund Balanc	26	Permanently restricted						
pur		Foundations that do not follow SFAS 117, check here						
Ę		and complete lines 27 through 31.						
	27	Capital stock, trust principal, or current funds						
Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund						
As	29	Retained earnings, accumulated income, endowment, or other funds						
Net	30	Total net assets or fund balances	97,891,648.	92,267,427.				
_	31	Total liabilities and net assets/fund balances	106,876,641.	100,414,202.				
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	97,891,648.			
2		r amount from Part I. line 27a		2	-1,016,904.			
3	Othe	r increases not included in line 2 (itemize)	SEE ST.	ATEMENT 11 3	566,232.			
4	Add	lines 1, 2, and 3		4	97,440,976.			
5	Decr	eases not included in line 2 (itemize) $\blacktriangleright$ <b>UNREALIZED</b> LOS	S ON INVESTME	NTS 5	5,173,549.			
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	92,267,427.			
					Form <b>990-PF</b> (2018)			

Part IV	Capital Gains a	and Lo	sses for Tax on In	vestment	Income							
			s) of property sold (for exar or common stock, 200 shs		te,	( <b>b)</b> F	low ac - Purc - Dona	nase	( <b>c)</b> Date a (mo., da	acquired ay, yr.)		oate sold day, yr.)
1a CHAF			LICLY TRADED	SECUR	ITIES				01/0			30/19
b NET	GAIN VINTA								01/0			30/19
c NET	GAIN JVP O	PPOR'	TUNITIES VII	-VIII				P (	01/0	1/18	09/	30/19
d												
е		/£\ 1	Danua siation allowed	(=) Coo		<u> </u>			/b) Ca	-i (l		
	Gross sales price	(1)	Depreciation allowed (or allowable)	plus e	st or other basis expense of sale					ain or (loss (f) minus	(g))	<del></del>
	24,694,862.			Т.	8,329,06 76,09							<u>5,799.</u>
<u>b</u>	31,294.				76,09	′ ′ •						6,097. 1,294.
d d	31,294.					-						1,494.
e												
	te only for assets showin	g gain in	column (h) and owned by t	he foundation	on 12/31/69.			(1)	Gains (Co	ol. (h) gain	minus	
	IV as of 12/31/69		(j) Adjusted basis as of 12/31/69	<b>(k)</b> Ex	cess of col. (i) col. (j), if any			col.	(k), but n	ot less that (from col. (	n -0-) <b>or</b>	
a												5,799.
b												6,097.
С											3	1,294.
d												
е								1				
2 Capital ga	ain net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0-	in Part I, line in Part I, line	7 7	. }[	2				6,32	0,996.
			ned in sections 1222(5) an	d (6):		١ , ا						
	so enter in Part I, line 8,	column (	C).			$\rightarrow$				37 / 3		
	enter -0- in Part I, line 8	ndor S	Section 4940(e) for	Dodugod	Tay on Not	· Jpy	3 octo	oont Inc	<u></u>	N/A		
			. , ,									
(ו טו טףנוטוומו	i use by dolliestic private	Touriuati	ons subject to the section 4	1940(a) lax on	Het HiveStillelit III	icome	-)					
If section 49	40(d)(2) applies, leave th	iis part bl	ank.									
			tax on the distributable am ection 4940(e). Do not com	, ,		riod?					Ye	s X No
1 Enter the	appropriate amount in e	ach colu	mn for each year; see the in	structions bet	fore making any e	ntries						
Calendary	<b>(a)</b> Base period years year (or tax year beginnir	na in)	<b>(b)</b> Adjusted qualifying dist	ributions	Net value of no	(c) nchar		-use assets		Distrit (col. (b) div	( <b>d)</b> ution rati	ol (c))
- Janoniaan ,	2017	.9,	8,44	3,580.	1	10	, 28	2,156		(50.11 (5) 41.1		076563
	2016			2,523.				3,401				056944
	2015			0,080.	1	.15	,54	6,892	•		•	043619
	2014			0,230.	1	.28	,74	8,045	•		•	081945
	2013		12,33	6,498.	1	.38	, 41	1,638	•		•	089129
2 Total of I	ine 1, column (d)								2			348200
			se period - divide the total o than 5 years						3		•	069640
4 Enter the	net value of noncharitab	le-use as	sets for 2018 from Part X, I	ine 5					4	10	1,43	0,197.
5 Multiply I	line 4 by line 3								5		7,06	3,599.
6 Enter 1%	of net investment incom	ne (1% of	Part I, line 27b)						6		8	4,310.
7 Add lines	5 and 6								7		7,14	7,909.
8 Enter qua	alifying distributions from	ı Part XII,	line 4						8		7,56	1,978.
If line 8 is			neck the box in Part VI, line									

Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	ารtru	ctio	ns)
1a	a Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	8	4,3	10.
	of Part I, line 27b			
C	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.
3	Add lines 1 and 2	8	4,3	10.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	8	4,3	10.
6				
а	a 2018 estimated tax payments and 2017 overpayment credited to 2018			
b	b Exempt foreign organizations - tax withheld at source 6b 0.			
C	c Tax paid with application for extension of time to file (Form 8868) 6c 82,000.			
	d Backup withholding erroneously withheld 6d 0 •			
7	Total credits and payments. Add lines 6a through 6d	23	6,8	<u> 15.</u>
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here X if Form 2220 is attached 8			0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10	15	2,5	05.
	Enter the amount of line 10 to be: Credited to 2019 estimated tax ▶ 152,505 • Refunded ▶ 11			0.
Pa	art VII-A Statements Regarding Activities			
1a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	1a		Х
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
	c Did the foundation file Form 1120-POL for this year?	1c		X
C	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. $\blacktriangleright$ \$ (2) On foundation managers. $\blacktriangleright$ \$			
e	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ► \$			
2	Has the foundation engaged in any activities that have not previously been reported to the 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 instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
	b If "Yes," has it filed a tax return on Form 990-T for this year?	4b		37
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
_	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 either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		v	
_	remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
88	a Enter the states to which the foundation reports or with which it is registered. See instructions.			
	CA			
t	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	0,	Х	
^	of each state as required by General Instruction G? If "No," attach explanation	8b	Λ	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			v
10	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		Λ.

Г	Statements negarding 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 14	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	X
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	444 63			
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			П
10	and enter the amount of tax-exempt interest received or accrued during the year     15		/A	
16	At any time during calendar year 2018, 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			
Pa	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? X Yes No			
	(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.)  Yes X No If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		Х
	Organizations relying on a current notice regarding disaster assistance, check here	10		
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2018?	1c		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2018? Yes X No			
	If "Yes," list the years $\blacktriangleright$ ,,,,,			
	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
•	Pit the foundation half was a thorough the standard interest in a subscript a standard in the			
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			
	during the year? X Yes No b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; <b>(2)</b> 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 2018.)	3b		Х
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	$\vdash \vdash \vdash$	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		Х

Page 6

Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ued)		
5a During the year, did the foundation pay or incur any amount to:				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	🔲 Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); o		ectly,			
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., organization					
4945(d)(4)(A)? See instructions		X_ Ye	s . No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or			
the prevention of cruelty to children or animals?		Ye	s X No		
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify unc	ler the exceptions described i	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance? See instru	ıctions		<u></u>	5b	X
Organizations relying on a current notice regarding disaster assistance, check h	nere		▶Ш		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ned			
expenditure responsibility for the grant?		Ye	s X No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to p					
a personal benefit contract?		Ye	s X No		
$\boldsymbol{b}$ Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No		
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A L	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or				
excess parachute payment(s) during the year?		Ye	s X No		
Part VIII   Information About Officers, Directors, Trusto	ees, Foundation Ma	nagers, Highly	<i>'</i>		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, and foundation managers and t		(c) Compensation	(d) Contributions to	1 (-) Ev	nanaa
(a) Name and address	<b>(b)</b> Title, and average hours per week devoted	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	(e) Ex accoun	t, other
	to position	enter -0-)	compensation	allow	ances
SEE STATEMENT 15		803,995.	00 510		0.
SEE STATEMENT IS		003,993.	00,310.		0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "			
	(b) Title, and average	l l	(d) Contributions to employee benefit plans	(e) Ex	pense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deterred	accoun	t, other ances
BRACHA SPRUNG		ERUSALEM	compensation PARTNERS		411003
441 SAXONY RD, ENCINITAS, CA 92024	40.00	265,053.	14,927.		0.
	VICE PRESIDEN				<u> </u>
441 SAXONY RD, ENCINITAS, CA 92024	40.00	194,209.	41,993.		0.
	VP, FINANCE A		-		<u> </u>
441 SAXONY RD, ENCINITAS, CA 92024	40.00	201,628.	23,950.		0.
	DIRECTOR OF T		25,550		0.
441 SAXONY RD, ENCINITAS, CA 92024	40.00	120,829.	28,270.		0.
	ENGINEERING D		40,410		0.
441 SAXONY RD, ENCINITAS, CA 92024	40.00	114,116.	15,103.		0.
Total number of other employees paid over \$50,000	10.00		15,105	<u> </u>	9

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	<u> </u>
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
JRS MANAGEMENT & CONSTRUCTION	CONSTRUCTION	
P.O. BOX 597, LA MESA, CA 91944	SERVICES	270,112.
LUCAMICAELA NURSERY	REPAIRS &	<u> </u>
441 SAXONY ROAD, ENCINITAS, CA 92024	MAINTENANCE	171,810.
SCHMIDT ELECTRIC		
	ELECTRICAL SERVICES	145,120.
ABOVE ALL BOILER SERVICES	INSTALLATION	
78550 AVENUE 41, BERMUDA DUNES, CA 92203	SERVICES	95,700.
ALLIED UNIVERSAL SECURITY SERVICE		
P.O. BOX 31001, PASADENA, CA 91110	SECURITY SERVICES	62,913.
Total number of others receiving over \$50,000 for professional services	<b>)</b>	<u> 5</u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produ		Expenses
1		
SEE STATEMENT 16		5,540,132.
2		
SEE STATEMENT 17		2,021,846.
3		
<u> </u>		
4		
*		
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lir	nes 1 and 2.	Amount
1 N/A		
2		
<b>-</b>		
All other program-related investments. See instructions.		
3		
<u> </u>		

Form **990-PF** (2018)

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0.

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations n	nust com	plete this part. Foreign for	undations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	le, etc., pu	rposes:		
а	Average monthly fair market value of securities			1a	75,343,127.
	Average of monthly cash balances			1b	2,167,142.
	Fair market value of all other assets			1c	25,464,550.
d	Total (add lines 1a, b, and c)			1d	102,974,819.
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	102,974,819.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount	, see instri	ictions)	4	1,544,622.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and or			5	101,430,197.
6	Minimum investment return. Enter 5% of line 5			6	5,071,510.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations, check here ▶ ☐ and do not complete this part.	nd (j)(5) p		ınd certain	
1	Minimum investment return from Part X, line 6			1	5,071,510.
2a	Tax on investment income for 2018 from Part VI, line 5	2a	84,310	•	
	Income tax for 2018. (This does not include the tax from Part VI.)				
C	Add lines 2a and 2b			2c	84,310. 4,987,200.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	4,987,200.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	4,987,200.
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	XIII, line 1		7	4,987,200.
=	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pur	•			7 561 070
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26				7,561,978.
þ	•				<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charital	bie, etc., pi	irposes	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	7 561 070
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and the state of the sta		I, line 4	4	7,561,978.
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	84,310.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	7,477,668.
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years w 4940(e) reduction of tax in those years.			qualifies fo	or the section

#### Part XIII Undistributed Income (see instructions)

1. Distributable amount for 2018 from Part XI, line 7. Underbituded income, if any, as of the end of 2019.  a Enter amount for 2017 only b Total for prory pages:  3. Excess distributions carryover, if any, to 2018. a From 2013		(a) Corpus	(b) Years prior to 2017	(c) 2017	( <b>d</b> ) 2018
2 Undestructed scores, if any, and the word of 2019, and The received of 2019, by Total for prior years.  3 Excess distributions carryower, if any, to 2018; a From 2013	•				4 097 200
a Citizer amount for 2017 only b Total for prior years:  5 Excess distributions carryover, if any, to 2018: a from 2013					4,987,200.
\$ Excess distributions carryover, if any, to 2018; \$ a From 2013	5 · · · · · · · · · · · · · · · · · · ·			_	
3 Excess distributions carryover, flary, to 2018: a From 2013	•			0.	
3 Excess distributions carryover, I any, to 2018: a From 2013	<b>b</b> lotal for prior years:		0		
a From 2014	Excess distributions carryover if any to 2018:		0.		
Dirron 2014   5,557,824					
EFROM 2015	h From 2014 5 557 824				
dFrom 2016   8.2.8, 8.1.6.	261 140				
From 2017   3,049,722-     Total of lines at through   20,678,044-     4 Qualifying distributions for 2018 from Part XII, line 4 ► \$ 7,551,978-     Applied to 2017, but not more than line 2a	derom 2016 928 816				
1 Total of lines 3a through e   20,678,044.	a From 2017 3 0/19 722				
4 Qualifying distributions for 2018 from Part XII, line 4; № \$ 7,561,978.  Applied to 2017, but not more than line 2a  Applied to 2017, but not more than line 2a  Applied to 2017, but not more than line 2a  Applied to 2017, but not more than line 2a  Applied to 2018 distributions out of corpus ((Election required - see instructions)  4 Applied to 2018 distributions amount estimated to 2018 ((Election required - see instructions)  Excess distribution corpover applied to 2018 ((In annount appears in column (s)), the same annount resulter than 10 column (s)), the same annount resulter than 10 column (s), the same a		20 678 044			
Part XII, line 4: ▶ \$ 7,561,978.  a Applied to 2017, but not more than line 2a		20,070,044.			
Applied to 2017, but not more than line 2 a b Applied to undistributed income of prior years (Election required - see instructions) C Treated as distributions out of corpus (Election required - see instructions) 0					
b Applied to undistributed income of prior years (Election required - see instructions)  C Treated as distributions out of corpus (Election required - see instructions)  d Applied to 2018 distributable amount  eRemaining amount distributed out of corpus  5 Excess distributions curvover applied to 2018  C Enter the net total of each column as indicated below.  2 7, 574, 778.  3 0.  3 0.  4 7, 987, 200.  4 9, 987, 200.  4 1, 987, 200.  4 2, 574, 778.  5 Excess distributions curvover applied to 2018  2 3, 252, 822.  5 O.  6 Enter the net total of each column as indicated below.  2 3, 252, 822.  5 Prior years' undistributed income. Subtract line 4b from line 2b.  6 Enter the net stal of each column as indicated below.  2 3, 252, 822.  5 O.  6 Enter the net total of each column as indicated below.  6 Center the amount of prior years' undistributed income for years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed  6 Subtract line 6c from line 6b. Taxable amount - see instructions  6 Undistributed income for 2018. Subtract line  4 a from line 2a. Taxable amount - see instructions  6 Undistributed income for 2018. Subtract line  4 a from line 2a. Taxable amount - see instructions  7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(f)(f)(f) of 494(g)(3) (Election may be required - see instructions)  8 Excess distributions carryover from 2013 not applied on line 5 or line 7  9 Excess distributions carryover to 2019.  Subtract lines 7 and 8 from line 6a  10 Analysis of line 9:  a Excess from 2014  5 7, 557 7, 824.  5 (250, 140)  6 (25				0	
Verars (Election required - see instructions)  c Treated as distributions out of corpus (Election required - see instructions)  d Applied to 2018 distributable amount e Remaining amount distributed out of corpus  5 Excess distributions carryover applied to 2018 (if an amount appears in column lid), the same amount remals be allowed to solven lid), the same amount remained to solven lid),	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			0.	
Cifection requiredsee instructions of Applied to 2018 distributed amount e Remaining amount distributed out of corpus 5 Excess distributions caryover from 2018 amount of the substrated ince 4 from line 1.8 amount of provincing the substrated inces of the substrated income for 2018. Subtract line 4 a from line 2.8 Taxable amountsee instructions of Corpus to Sasky requirements imposed by section 170(h(1)(f) or 4942(g)(3) (Election may be requiredsee instructions and pile of the substrated as distributions carryover from 2013 not applied on line 5 or line 7 substrated in Substr			0		
(Election required - see instructions)  dApplied to 2018 distributable amount eRemaining amount distributed out of corpus  5 Excess distributions carryover applied to 2018 (if an amount appears in column (ib.))  6 Enter the net total of each column as indicated below:  a Corpus. Add lines 91, 40, and 4e. Subtract line 5 DPrior years' undistributed income. Subtract line 4b from line 2b. center the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which le section 494(2b) tax has been previously assessed  amount - see instructions e undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instructions  0.  1 Undistributed income for 2018. Subtract line 4a from line 5 from line 1. This amount must be distributed in 2019  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)  8 Excess distributions carryover from 2013 not applied on line 5 or line 7  9 Excess from 2016 4 A 2 5 7 7 8 2 4  Excess from 2016 5 8 28 8 8 1 6  Excess from 2016 6 9 2 7 7 7 4 7 7 7 8   1 6 9 8 7 7 7 8 2 6  Excess from 2016 7 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			0.		
Applied to 2018 distributable amount eRemaining amount distributed out of corpus  5. Excess distributions carryover grouped to 2018 (if an amount appears in column (d), the same amount must be shown in column (d).  6. Enter the net total of each column as indicated below:  a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5  DPrior years' undistributed income. Subtract line 4b from line 2b  c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 49/2(a) tax has been previously assessed  d Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019  A mounts 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)  8 Excess distributions carryover from 2013 not applied on line 5 or line 7  9 Excess distributions carryover to 2019. Subtract lines 4  4 , 261 , 140.  Excess from 2014  5 , 557 , 824  4 , 261 , 140.  Excess from 2015  8 28, 816.  Excess from 2016  8 28, 816.  Excess from 2017  2 , 574 , 778.	·	0			
e Remaining amount distributed out of corpus  5 Excess distributions carryover applied to 2018 (first amount applied to 2018)  6 Enter the appears in column (a):  8 Corpus, Add lines 31, 4c, and 4e. Subtract line 5 (bring 7):  9 Enter the art total of seath column as indicated below:  a Corpus, Add lines 31, 4c, and 4e. Subtract line 5 (bring 7):  9 Enter the amount of prior years undistributed income. Subtract line 4b from line 2b (center the amount of prior years undistributed income for which a notice of deficiency has been issued, or on which the section 944(2a) tax has been previously assessed  9 Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instructions  1 Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instructions  1 Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019  7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(9)(3) (Election may be required - see instructions)  8 Excess distributions carryover from 2013 not applied on line 5 or line 7  9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9:  a Excess from 2014	, , , , , , , , , , , , , , , , , , , ,	0.			4 987 200
\$ Excess distributions carryover applied to 2018 (if an amount appears in column (b), the same amount must be shown in column (a))  6 Enter the net total of each column as indicated below:  2 Corpus. Add lines \$1, 4c, and 4e. Subtract line \$ be provided in the provided		2 574 778			4,507,200.
df an amount appears in column (d), the same amount must be aboven in column (a).  6 Enter the net total of each column as indicated below:  a Corpus Add lines 91, 4c, and 4e. Subtract line 5 bPrior years' undistributed income. Subtract line 4b from line 2b cEnter 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 d Subtract line 6b from line 6b. Taxable amount - see instructions e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 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)  8 Excess distributions carryover from 2013 not applied on line 5 or line 7  9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: Excess from 2015 Excess from 2015 Excess from 2015 Excess from 2017 BEXESS from 2017 BEXESS from 2017 BEXES From 2018 BEXES From 2017 BEXES From 2017 BEXES From 2017 BEXES From 2018 BEXES From 2017 BEXES From 2018 BEXES From 2018 BEXES From 2017 BEXES From 2018 BE					0
6 Enter the net total of each column as indicated below: a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	(If an amount appears in column (d), the same amount	•			0.
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 bPrior years' undistributed income. Subtract line 4b from line 2b cEnter 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 dSubtract line 6c from line 6b. Taxable amount - see instructions eUndistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instructions eUndistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 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) 8 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: atxess from 2014. 5 7, 557 7, 824. bexcess from 2015. ctxcess from 2014. 6 282 8, 816. dexcess from 2017. 8 282 8, 816. dexcess from 2018. 2 7, 574 7, 778.	6 Enter the net total of each column as				
b Prior years' undistributed income. Subtract line 4b from line 2b.  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 bas been previously assessed  d Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instructions ilines 4d and 5 from line 1. This amount must be distributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019  A 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)  E Excess distributions carryover from 2013 not applied on line 5 or line 7  S Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2016.		23,252,822.			
CEnter 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					
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  d Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instructions f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019  7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(a)(3) (Election may be required - see instructions)  8 Excess distributions carryover from 2013 not applied on line 5 or line 7  9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2014	-		0.		
deficiency has been issued, or on which the section 4942(a) tax has been previously assessed  d Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instructions f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019  7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(a)(3) (Election may be required - see instructions)  8 Excess distributions carryover from 2013 not applied on line 5 or line 7  Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2014 b Excess from 2015 c Excess from 2015 d Excess from 2015 d Excess from 2015 d Excess from 2017 d Excess from 2018 d Excess from 2017 d Excess from 2017 d Excess from 2018 d Excess from 2017 d Excess from 2018 d Excess from 2017 d Excess from 2018 d Excess from 2018 d Excess from 2017 d Excess from 2018 d Excess from 2018 d Excess from 2017 d Excess from 2018 d Excess from 2016 d Excess from 2018 d Excess from 2016 d Excess from 2018 d Excess from 2016 d Excess from 2018 d Exce					
dSubtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instr f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019  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)  8 Excess distributions carryover from 2013 not applied on line 5 or line 7  9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2014	deficiency has been issued, or on which the section 4942(a) tax has been previously		0.		
amount - see instructions e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instr  f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019  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)  8 Excess distributions carryover from 2013 not applied on line 5 or line 7  9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2014. b Excess from 2015. c Excess from 2016. d Excess from 2017. 3, 049, 722. e Excess from 2018.  2, 574, 7778.					
e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instr	amount - see instructions		0.		
f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019  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)  8 Excess distributions carryover from 2013 not applied on line 5 or line 7  9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9:  a Excess from 2014					
lines 4d and 5 from line 1. This amount must be distributed in 2019  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)  8 Excess distributions carryover from 2013 not applied on line 5 or line 7  9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9:  a Excess from 2014 5, 557, 824 b Excess from 2015 4, 261, 140 c Excess from 2016 828, 816 c dExcess from 2017 3, 049, 722 c excess from 2018. 2,574,778 c	4a from line 2a. Taxable amount - see instr.			0.	
be distributed in 2019 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) 8 Excess distributions carryover from 2013 not applied on line 5 or line 7 9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2014 5, 557, 824 b Excess from 2015 4, 261, 140 c Excess from 2016 828, 816 d Excess from 2017 3, 049, 722 b excess from 2018 2, 574, 778 b	f Undistributed income for 2018. Subtract				
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)  8 Excess distributions carryover from 2013 not applied on line 5 or line 7  9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9:  a Excess from 2014	lines 4d and 5 from line 1. This amount must				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)  8	be distributed in 2019				0.
section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)  8	7 Amounts treated as distributions out of				
may be required - see instructions)  8 Excess distributions carryover from 2013 not applied on line 5 or line 7  9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2014 b Excess from 2015 c Excess from 2016 d Excess from 2017 e Excess from 2018. 2 , 574, 778.	corpus to satisfy requirements imposed by				
8 Excess distributions carryover from 2013 not applied on line 5 or line 7  9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2014 b Excess from 2015 c Excess from 2016 d Excess from 2017 e Excess from 2018. 2 2,574,778.	section 170(b)(1)(F) or 4942(g)(3) (Election				
not applied on line 5 or line 7  9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2014. b Excess from 2015. c Excess from 2016. d Excess from 2017. e Excess from 2018 2,574,778.	may be required - see instructions)	0.			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2014 b Excess from 2015 c Excess from 2016 dExcess from 2017 e Excess from 2018  2 , 574 , 778.	8 Excess distributions carryover from 2013				
Subtract lines 7 and 8 from line 6a  10 Analysis of line 9:  a Excess from 2014	not applied on line 5 or line 7	6,980,542.			
10 Analysis of line 9:  a Excess from 2014					
a Excess from 2014 5,557,824. b Excess from 2015 4,261,140. c Excess from 2016 828,816. d Excess from 2017 3,049,722. e Excess from 2018 2,574,778.	Subtract lines 7 and 8 from line 6a	16,272,280.			
b Excess from 2015	10 Analysis of line 9:				
c Excess from 2016 828,816. d Excess from 2017 2,574,778.	<b>a</b> Excess from 2014 5 , 557 , 824 .				
d Excess from 2017 3,049,722. e Excess from 2018 2,574,778.	<b>b</b> Excess from 2015 4,261,140.				
e Excess from 2018 2,574,778.					
	<u> </u>				5 000 DE (22.11)

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Pan	Private Operating Fo	<b>Jundations</b> (see in	istructions and Part VII	-A, question 9)	N/A	
	the foundation has received a ruling or					
	oundation, and the ruling is effective for			· · · · · · · · · · · · · · · · · · ·		
<b>b</b> C	heck box to indicate whether the found		ng foundation described i		4942(j)(3) or 49	942(j)(5)
2 a E	nter the lesser of the adjusted net	Tax year	(1) 0047	Prior 3 years	(1) 0045	/ \ <del>-</del>
ir	come from Part I or the minimum	(a) 2018	<b>(b)</b> 2017	(c) 2016	(d) 2015	(e) Total
ir	vestment return from Part X for					
	ach year listed					
	5% of line 2a					
c Q	ualifying distributions from Part XII,					
li	ne 4 for each year listed					
<b>d</b> A	mounts included in line 2c not					
u	sed directly for active conduct of					
e	xempt activities					
e Q	ualifying distributions made directly					
fo	or active conduct of exempt activities.					
3 C a a "/	ubtract line 2d from line 2c omplete 3a, b, or c for the Iternative test relied upon: Assets" alternative test - enter: 1) Value of all assets					
(:	2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
2 s	ndowment" alternative test - enter /3 of minimum investment return hown in Part X, line 6 for each year sted					
	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)					
(1	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 Infor			if the foundation	n had \$5,000 or mo	ore in assets
	at any time during the	ne year-see inst	ructions.)			
a L y <b>NON</b>		have contributed more ore than \$5,000). (See s	section 507(d)(2).)			
0	ist any managers of the foundation who ther entity) of which the foundation has —			or an equally large port	ion of the ownership of a pa	artnership or
<u>NON</u>						
C	nformation Regarding Contribution heck here ► X if the foundation or he foundation makes gifts, grants, etc., t	nly makes contributions	to preselected charitable	organizations and does		ests for funds. If
аТ	he name, address, and telephone numb	er or email address of th	he person to whom applic	ations should be addres	ssed:	
b T	he form in which applications should be	submitted and informa	ation and materials they sh	nould include:		
c A	ny submission deadlines:					
<b>d</b> A	ny restrictions or limitations on awards	, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors:	

LEICHTAG FOUNDATION 33-0466189 Form 990-PF (2018) Page 11 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 PARTICIPATION IN NONE ÞС P. O. BOX 420039 JCF-FBI SAN DIEGO, CA 92142 500. PARTICIPATION IN 2-1-1 SAN DIEGO NONE PC P. O. BOX 420039 JCF-FBI SAN DIEGO, CA 92142 10,600. 2-1-1 SAN DIEGO NONE PC PARTICIPATION IN P. O. BOX 420039 JCF-FBI SAN DIEGO, CA 92142 5,000. ACCION SAN DIEGO NONE РC BUSINESS SUPPORT 404 EUCLID AVE., SUITE 271 SAN DIEGO, CA 92114 25,000. ALLIANCE SAN DIEGO NONE IN MEMORY OF JAVIER S ÞС P. O. BOX 12266 GUERRERO SAN DIEGO, CA 92112 5,000. SEE CONTINUATION SHEET(S) 5,540,132. ➤ 3a Total **b** Approved for future payment NONE

**▶** 3b

Total

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

Enter gross amounts unless atherwise indicated	Unrelate	ed business income	Exclu	ded by section 512, 513, or 514	(a)
Enter gross amounts unless otherwise indicated.	(a)	(b)	(C) Exclu-	(d)	(e) Related or exempt
	Business	Amount	sion	Amount	function income
1 Program service revenue:	code	711104111	code	Amount	
a CONSULTING OTHER					28,000.
b CATERING					82,269.
c					
d					
e					
f					
<b>g</b> Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	1,913.	
4 Dividends and interest from securities			14	1,913. 2,628,692.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property			16	1,752,364.	
6 Net rental income or (loss) from personal			+		
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
			18	6,306,074.	
than inventory			+ + 0	0,300,074.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0		10,689,043.	110,269.
13 Total. Add line 12, columns (b), (d), and (e)				13	10,799,312.
(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 how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of									
lacktriangle	the foundation's exempt purposes (other than by providing funds for such purposes).									
1A	BUILD A MORE CONNECTED COMMUNITY FOR NONPROFITS									
1B	LEICHTAG COMMONS CATERING									

33-0466189 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable

		Exempt Organ	izations							
1	Did the o	rganization directly or indir	rectly engage in any	of the followin	g with any other organization	on described in sect	ion 501(c)		Yes	No
	(other th	an section 501(c)(3) organ	izations) or in sectio	n 527, relating	g to political organizations?					
а	Transfers from the reporting foundation to a noncharitable exempt organization of:									
	(1) Casl	າ						1a(1)		<u> </u>
	(2) Othe	er assets						1a(2)		<u> </u>
b		nsactions:								
	(1) Sale	s of assets to a noncharital	ble exempt organizat	ion				1b(1)		X
										X
										X
										X
										X
	(6) Perf	ormance of services or me	mbership or fundrais	sing solicitatio	ns			1b(6)		X
C	Sharing	of facilities, equipment, mai	iling lists, other asse	ts, or paid em	ployees			1c		X
d	If the ans	swer to any of the above is	"Yes," complete the f	ollowing sche	dule. Column <b>(b)</b> should al	ways show the fair ı	market value of the goods,	other ass	ets,	
					ed less than fair market valu	ue in any transaction	n or sharing arrangement, s	show in		
	column	<b>d)</b> the value of the goods, o	other assets, or serv	ces received.						
(a)∟	ine no.	(b) Amount involved	(c) Name of	noncharitable	e exempt organization	(d) Description	n of transfers, transactions, and	sharing arr	angeme	nts
				N/A						
2a	Is the for	undation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described				
	in section	n 501(c) (other than section	n 501(c)(3)) or in se	ction 527?				Yes	X	No
b		complete the following sch								
		(a) Name of org	anization		(b) Type of organization		(c) Description of relations	hip		
		N/A								
					ng accompanying schedules and		- I Ma	y the IRS o	liscuss t	his
Sig	gn   👢	beliet, it is true, correct, and con	nplete. Declaration of pre	eparer (other tha	n taxpayer) is based on all inforn	nation of which prepare	r nas any knowledge.	urn with the own below?	prepare	er
He	re	•				PRESI		X Yes		No
	Šig	nature of officer or trustee			Date	Title				
	•	Print/Type preparer's na	ıme	Preparer's s	ignature	Date	Check if PTIN			
							self- employed			
Pa	id					08/11/20				
	eparer	Firm's name ► ALD	RICH CPAS	AND A	DVISORS, LLP	· · · · · · · · · · · · · · · · · · ·	Firm's EIN ▶ 93-0	6232	86	
Us	e Only	· [								
		Firm's address ▶ 59	46 PRIEST	LY DRI	VE, SUITE 20	0				
		CA	RLSBAD, C	A 9200	8		Phone no. (760)	431	-84	40
		-					F	orm <b>990</b>	)-PF	(2018)

#### Page 11

# Part XV Supplementary Information (continued) 3a Grants and Contributions Paid During the Year Recipient If recipient is an individual, Foundation Purpose of grant or

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
ALLIANCE SAN DIEGO	NONE	PC	CHUNKY EVENT APPRECIATION & JFN BORDER TOUR	
P. O. BOX 12266				
SAN DIEGO, CA 92112	_			5,000.
ALLIANCE SAN DIEGO	NONE	PC	ISRAEL STUDY TRIP IN SEPT 2019	
P. O. BOX 12266 SAN DIEGO, CA 92112				1,569.
SAN DIEGO, CA 92112				1,309.
ALLIANGE CAN DIECO	NONE	PC	GENERAL GURDODE	
ALLIANCE SAN DIEGO P. O. BOX 12266	NONE	PC	GENERAL SUPPORT	
SAN DIEGO, CA 92112				250.
,				
ALLIED MEDIA PROJECT	NONE	₽C	TRANS TECH SOCIAL ENTERPRISES	
4126 THIRD STREET				
DETROIT, MI 48201				250.
AMERICA ISRAEL CULTURAL FOUNDATION	NONE	PC	JERUSALEM CULTURE UNLIMITED	
1140 BROADWAY, SUITE 304				
NEW YORK, NY 10001				50,000.
AMERICAN CIVIL LIBERTIES UNION FOUNDATION	NONE	PC	SUPPORT PARTICIPATION IN LF ISRAEL STUDY TRIP SEPT	
P.O. BOX 87131 SAN DIEGO, CA 92138			2019	2,000.
SAN DIEGO, CA 92130				2,000.
AMERICAN CIVIL LIBERTIES UNION FOUNDATION	NONE	PC	GENERAL SUPPORT	
P.O. BOX 87131	HOME		SERVICE SOLLOW!	
SAN DIEGO, CA 92138				200.
Total from continuation sheets		1		5,494,032.

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## Form 990-PF LEICHTAG FOUND 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)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
AMERICAN FRIENDS OF ASSOC ADV CCISRAEL	NONE	PC	NEVE YAACOV COMMUNITY CENTER	
1466 MANOR RD STATEN ISLAND, NY 10314				5,000
AMERICAN FRIENDS OF ASSOC ADV CCISRAEL 1466 MANOR RD	NONE	₽C	ENSEMBLE GENERAL OPERATING SUPPORT	
STATEN ISLAND, NY 10314				10,000
AMEDICAN EDIENDO OF ALVN HOODIDAT	NONE	D.C.	TN MEMORY OF MARCHAR LAWING	
AMERICAN FRIENDS OF ALYN HOSPITAL 122 EAST 42ND STREET #1519	NONE	PC	IN MEMORY OF MARSHAR LAVINE	
NEW YORK, NY 10168				180
AMERICAN ISRAEL CULTURAL FOUNDATION	NONE	₽C	PLYUT ENSEMBLE	
1140 BROADWAY, SUITE 304 NEW YORK, NY 10001				25,000
AMERICAN JEWISH JOINT DIST. COMMITTEE 711 THIRD AVE., 10TH FLOOR	NONE	PC	EARTHQUAKE RELIEF EFFORTS	
NEW YORK, NY 10017				18,000
AMERICAN PUBLIC GARDENS ASSOCIATION	NONE	₽C	FOR LF SPONSORSHIP	
351 LONGWOOD ROAD				15 000
KENNETT SQUARE, PA 19348				15,000
ANTI-DEFAMATION LEAGUE FOUNDATION	NONE	PC	COMMUNITY VIGIL 10/29/18 EXPENSES	
4950 MURPHY CANYON ROAD, SUITE 250 SAN DIEGO, CA 92123				750
Total from continuation sheets				

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#### Part XV | Supplementary Information (continued)

3a Grants and Contributions Paid During the Yea				
Recipient Name and address (home as husiness)	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		
ANTI-DEFAMATION LEAGUE FOUNDATION	NONE	PC	NATION OF IMMIGRANTS SEDER	
4950 MURPHY CANYON ROAD, SUITE 250 SAN DIEGO, CA 92123				5,809.
22200, 32220				3,552.
ANTI-DEFAMATION LEAGUE FOUNDATION	NONE	₽C	IN MEMORY OF EILEEN MEHLMAN	
4950 MURPHY CANYON ROAD, SUITE 250	NONE		THE MEMORY OF BIBBEN MEMBERNA	
SAN DIEGO, CA 92123				180.
ANTI-DEFAMATION LEAGUE FOUNDATION	NONE	PC	GENERAL SUPPORT	
4950 MURPHY CANYON ROAD, SUITE 250				1 000
SAN DIEGO, CA 92123				1,000.
BALBOA PARK CONSERVANCY	NONE	₽C	HONORARIUM FOR PLACEMAKING PANEL	
1549 EL PRADO, SUITE 1	NONE	FC	HONORARIOM FOR FLIRCEMARING FAMEL	
SAN DIEGO, CA 92101				500.
BALBOA PARK CONSERVANCY	NONE	PC		
1549 EL PRADO, SUITE 1 SAN DIEGO, CA 92101			MEMBERSHIP	1,000.
				,
BATIQUITOS LAGOON FOUNDATION	NONE	₽C	GENERAL SUPPORT	
P.O. BOX 130491				
CARLSBAD, CA 92013				1,000.
BAYLOR COLLEGE OF MEDICINE	NONE	PC	DEPT OF NEUROLOGY	
ONE BAYLOR PLAZA MS160 HOUSTON, TX 77030				2,500.
Total from continuation sheets				
		4 -		

#### Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year Recipient	If recipient is an individual,	Foundation	Durnoes of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
BERKELEY PUBLIC SCHOOLS FUND	NONE	₽C	TEAM GOLDMILLER	
P.O. BOX 2066				
BERKELEY, CA 94702				100
BOTANIC GARDENS CONSERVATION INT'L US	NONE	₽C	ANNUAL MEMBERSHIP	
1151 OXFORD ROAD				
SAN MARINO, CA 91108				1,500.
BOYS & GIRLS CLUB OF COACHELLA VLY 42600 COOK STREET SUITE 120	NONE	PC	FOR EDUCATIONAL CLASSES	
PALM DESERT, CA 92211				5,000
BOYS & GIRLS CLUB OF OCEANSIDE, INC.	NONE	PC	TO SUPPORT THE GALA	
401 COUNTRY CLUB LANE				
OCEANSIDE, CA 92054				1,600.
	7017	200		
CALIFORNIA NATIVE PLANT SOCIETY 2707 K STREET SUITE 1	NONE	PC	BENEFACTOR LEVEL	
SACRAMENTO, CA 95816				1,000.
CAMP MOUNTAIN CHAI	NONE	PC	B'NAI MITZVAH BASH	
4950 MURPHY CANYON ROAD				1 000
SAN DIEGO, CA 92123				1,000
CAMP MOUNTAIN CHAI	NONE	PC	SCHOLARSHIPS FOR SUMMER CAMP	
4950 MURPHY CANYON ROAD				
SAN DIEGO, CA 92123				37,940.
Total from continuation sheets	1	1		

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### 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	Purpose of grant or contribution	Amount
wante and address (nome or business)	or substantial contributor	recipient		
CAMP MOUNTAIN CHAI	NONE	PC	CELEBRATE THE MAGIC OF CAMP	
4950 MURPHY CANYON ROAD				
SAN DIEGO, CA 92123				1,000.
CASA CORNELIA LAW CENTER	NONE	PC	SUPPORT PARTICIPATION IN LEICHTAG ISRAEL STUDY TRIP	
2760 5TH AVENUE, SUITE 200			SEPT 2019	0.000
SAN DIEGO, CA 92103				2,000.
CASA CORNELIA LAW CENTER	NONE	PC	25TH ANNIVERSARY CAMPAIGN	
2760 5TH AVENUE, SUITE 200				1 000
SAN DIEGO, CA 92103				1,000.
CASA CORNELIA LAW CENTER	NONE	PC	25TH ANNIVERSARY CAMPAIGN	
2760 5TH AVENUE, SUITE 200 SAN DIEGO, CA 92103				1,000.
DIA. BILOO, ON SELOS				1,000.
CENTER FOR PLANT CONSERVATION 15600 SAN PASQUAL VALLEY ROAD	NONE	PC	MEMBERSHIP	
ESCONDIDO, CA 92027				1,000.
CHABAD OF LA COSTA	NONE	PC	SUPPORT PASSOVER APPEAL	
1980 LA COSTA AVE	NONE	PC	SUFFORT FASSOVER AFFEAL	
CARLSBAD, CA 92009				2,500.
CHILDREN'S BUREAU OF SOUTHERN CALIFORNIA	NONE	PC	LEAGUE CHILDREN'S DIAMONDS FOREVER	
1910 MAGNOLIA AVENUE			THE CALLES AND TOWN AND TOWN AND THE CALL AN	
LOS ANGELES, CA 90007				500.
Total from continuation sheets		1		
		4.0		

#### Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Yea	ar			
Recipient  Name and address (home as 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
Name and address (home or business)	or substantial contributor	recipient		
COASTAL COMMUNITY FOUNDATION	NONE	₽C	FRIENDS OF ENCINITAS LIBRARY END. FUND	
P.O. BOX 230415				
ENCINITAS, CA 92023				1,800.
COASTAL COMMUNITY FOUNDATION	NONE	PC	FRIENDS OF ENCINITAS LIBRARY END. FUND	
P.O. BOX 230415				
ENCINITAS, CA 92023				1,000.
COASTAL ROOTS FARM	NONE	PC	4 YR SUPPORT	
441 SAXONY ROAD				
ENCINITAS, CA 92024				212,500.
COASTAL ROOTS FARM	NONE	PC	4 YR SUPPORT	
441 SAXONY ROAD				
ENCINITAS, CA 92024				655,845.
COASTAL ROOTS FARM	NONE	PC	4 YR SUPPORT	
441 SAXONY ROAD				
ENCINITAS, CA 92024				150,000.
COASTAL ROOTS FARM	NONE	PC	LR FFC MEMBERSHIP	
441 SAXONY ROAD				1 000
ENCINITAS, CA 92024				1,000.
COASTAL ROOTS FARM	NONE	PC	BR FFC MEMBERSIP	
441 SAXONY ROAD				2 600
ENCINITAS, CA 92024				3,600.
Total from continuation sheets				

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### Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Yea	ar			
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	35/18/2005/	
COASTAL ROOTS FARM	NONE	₽C	SARA TELZER PARTICIPATION IN LEADERSHIP NORTH COUNTY	
441 SAXONY ROAD			PROGRAM	
ENCINITAS, CA 92024				1,800.
				<u> </u>
GOLGENY DOOMS DADY	L <sub>vov</sub>			
COASTAL ROOTS FARM 441 SAXONY ROAD	NONE	PC	CRF STAFF ATTEND 2019 JOFEE NETWORK GATHERING	
ENCINITAS, CA 92024				2,201.
COASTAL ROOTS FARM	NONE	PC	ROSH HASHANA PROGRAM	
441 SAXONY ROAD				
ENCINITAS, CA 92024			+	600.
COASTAL ROOTS FARM	NONE	PC	JS FFC MEMBERSHIP	
441 SAXONY ROAD				
ENCINITAS, CA 92024				3,600.
COASTAL ROOTS FARM	NONE	PC	EE FFC MEMBERSHIP	
441 SAXONY ROAD				
ENCINITAS, CA 92024				3,600.
COASTAL ROOTS FARM	NONE	PC	DRB FFC MEMBERSHIP	
441 SAXONY ROAD				
ENCINITAS, CA 92024				3,600.
COASTAL ROOTS FARM	NONE	₽C	SG FFC MEMBERSHIP	
441 SAXONY ROAD				
ENCINITAS, CA 92024				1,000.
Total from continuation sheets				

#### Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Yea	ar			
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	
COASTAL ROOTS FARM	NONE	₽C	CS FFC MEMBERSHIP	
441 SAXONY ROAD	NONE	FC	CS FFC MEMBERSHIP	
ENCINITAS, CA 92024				1,000.
Energians, en 92021				1,000.
COASTAL ROOTS FARM	NONE	PC	JF FFC MEMBERSHIP	
441 SAXONY ROAD				
ENCINITAS, CA 92024				3,600.
COASTAL ROOTS FARM	NONE	PC	GENERAL SUPPORT	
441 SAXONY ROAD				
ENCINITAS, CA 92024				300.
·				
COASTAL ROOTS FARM	NONE	PC	LS FFC MEMBERSIP	
441 SAXONY ROAD				
ENCINITAS, CA 92024				3,600.
COASTAL ROOTS FARM	NONE	PC	EE FFC MEMBERSHIP	
441 SAXONY ROAD				
ENCINITAS, CA 92024				3,600.
COASTAL ROOTS FARM	NONE	₽C	YEAR END CAMPAIGN	
441 SAXONY ROAD	1012		THIN HID CHILITION	
ENCINITAS, CA 92024				2,500.
,				
COASTAL ROOTS FARM	NONE	PC	CRF HATS FOR DONOR STEWARDSHIP	
441 SAXONY ROAD				
ENCINITAS, CA 92024				1,000.
Total from continuation sheets	<u> </u>			

#### Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Yea  Recipient	If recipient is an individual,	Foundation	Durnoon of grant or	
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
	or substantial contributor	rodipiont		
COASTAL ROOTS FARM	NONE	₽C	SG FFC MEMBERSHIP	
441 SAXONY ROAD				
ENCINITAS, CA 92024				1,000
COASTAL ROOTS FARM	NONE	₽C	LD FOR SUPPORT	
441 SAXONY ROAD	1.01.2		LE TON BOTTONT	
ENCINITAS, CA 92024				300
COASTAL ROOTS FARM	NONE	PC	JF HATS & PROMO MATERIAL	
441 SAXONY ROAD				
ENCINITAS, CA 92024				2,000
COASTAL ROOTS FARM	NONE	₽C	MG GENERAL SUPPORT	
441 SAXONY ROAD				
ENCINITAS, CA 92024				500
GOLGELY DOOMS TARK				
COASTAL ROOTS FARM	NONE	PC	RM GENERAL SUPPORT	
441 SAXONY ROAD ENCINITAS, CA 92024				250
COLUMBIA UNIV SCHOOL OF SOCIAL WORK	NONE	PC	GENERAL SUPPORT	
1255 AMSTERDAM AVENUE ROOM 626				
NEW YORK, NY 10027				21,400
COMMUNITY HEALTH IMPROVEMENT PARTNERS	NONE	PC	FARM-TO-SCHOOL EFFORTS	
5095 MURPHY CANYON ROAD, STE105				40.000
SANDIEGO, CA 92123				40,000
Total from continuation sheets				

### Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Ye 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	Purpose of grant or contribution	Amount
Than and day ood (nome or such ood)	or substantial contributor	recipient		
COMMUNITY RESOURCE CENTER	NONE	₽C	FOR NORTH COUNTY SUPPORT	
650 SECOND STREET				
ENCINITAS, CA 92024				25,000
CONGREGATION ADAT YESHURUN	NONE	₽C	CHAZZAN HIGH HOLIDAY FUND	
8625 LA JOLLA SCENIC DR N				
LA JOLLA, CA 92037				180
CONGREGATION BETH ISRAEL 9001 TOWNE CENTRE DRIVE	NONE	PC	ADL VIGIL 10/29/18 COSTS	
SAN DIEGO, CA 92122				4,933
				2,500
CROSS TIMBERS CHURCH	NONE	PC	GENERAL SUPPORT	
312 W. MCKINNEY ST.				
DENTON, TX 76201				25,000
DOCTORS WITHOUT BORDERS	NONE	₽C	GENERAL SUPPORT	
40 RECTOR STREET, 16TH FLOOR	1012		DAME BOLLONI	
NEW YORK, NY 10006				850
DON DIEGO SCHOLARSHIP FOUNDATION 2260 JIMMY DURANTE BLVD.	NONE	PC	SCHOLARSHIPS-STUDENTS OF AGRICULTURAL EDUCATION	
DEL MAR, CA 92014				1,250
,				,
EDEN VILLAGE CAMP, INC.	NONE	PC	FOR JCF FBI, PHASE 1	
392 DENNYTOWN ROAD			, '	
PUTMAN, NY 10579				35,000
Total from continuation sheets	I	1	1	

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

3a Grants and Contributions Paid During the Ye				
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
,	or substantial contributor	recipient		
ELDERHELP OF SAN DIEGO	NONE	₽C	APPRECIATE OF HOLOCAUST SURVIVORS	
3860 CALLE FORTUNADA, SUITE 101 SAN DIEGO, CA 92123				500
ELIZABETH HOSPICE 500 LA TERRAZA BLVD, STE 130	NONE	PC	IMO CATHERINE WALSH, DAN WALSH MOTHER	
ESCONDIDO, CA 92025				100
ELIZABETH HOSPICE	NONE	PC	GENERAL SUPPORT	
500 LA TERRAZA BLVD, STE 130 ESCONDIDO, CA 92025				250
ENCINITAS COMMUNITY GARDEN 728 FOXGLOVE STREET	NONE	PC	OPERATING SUPPORT	
ENCINITAS, CA 92024				750
ENCINITAS FRIENDS OF THE ARTS	NONE	₽C	GENERAL SUPPORT	
1155 MELBA ROAD ENCINITAS, CA 92024				200
ENCINITAD, CA 72024				200
ENCINITAS FRIENDS OF THE ARTS	NONE	PC	GENERAL SUPPORT	
1155 MELBA ROAD ENCINITAS, CA 92024				3,000
ENCINITAS ROTARY CLUB FOUNDATION P. O. BOX 230223	NONE	PC	ANNUAL WINE & FOOD FESTIVAL	
ENCINITAS, CA 92023				1,000
Total from continuation sheets				

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#### 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)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
FALLEN OFFICERS FUND	NONE	PC	10TH ANNUAL SOUTHERN GANG CONFERENCE	
501 WEST BROADWAY, SUTIE A, PMB SAN DIEGO, CA 92101				1,000
FJC 520 EIGHTH AVENUE, 20TH FLOOR	NONE	₽C	NATANFOCUS INITIATIVE PROJECTS IN JERUSALEM	
NEW YORK, NY 10018				40,000
FORECASTLE FOUNDATION	NONE	PC	GENERAL SUPPORT	
P.O. BOX 5305 LOUISVILLE, KY 40255				500
FOUNDATION FIGHTING BLINDNESS 2800 28TH ST, SUITE 310	NONE	PC	GENERAL SUPPORT	
SANTA MONICA, CA 90405				1,000
FRIENDS OF JERUSALEM INTERNATIONAL YMCA	NONE	₽C	ED RANA FAHOUM'S VISIT TO CALIFORNIA JULY 2019	
9956 WELLINGTON LANE WOODBURY, MN 55125				5,163
				.,
FRIENDS OF OROT FUND	NONE	PC	DIBUR ACHER	
111 JOHN STREET, SUITE 1720 NEW YORK, NY 10038				2,500
FUELED 2990 RICHMOND AVE SUITE 540	NONE	PC	GENERAL SUPPORT	
HOUSTON, TX 77098				250
Total from continuation sheets				

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

3a Grants and Contributions Paid During the Ye  Recipient	If recipient is an individual, show any relationship to	Faundation	Duves as of great as	
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	Todipidit		
FUND FOR ISRAEL'S TOMORROW	NONE	PC	IN HONOR OF P. CLAMAN	
P.O. BOX 644735				
PITTSBURGH, PA 15264				1,80
GLIDE CHURCH	NONE	₽C	RABBI LEZAK'S SOLCAL JUSTICE PROGRAM	
330 ELLIS STREET	NONE		RABBI HEZAR S SOUCAL GOSTICE PROGRAM	
SAN FRANCISCO, CA 94102				25
HAIS	NONE	PC	RABBI L. BOHM & D. PHILIPS	
1300 SPRING STREET, SUITE 500				
SILVER SPRING, MA 20910				36
on any proce				
HILLEL OF SAN DIEGO 5717 LINDO PASEO	NONE	PC	CAMPUS ISRAEL FELLOWS PROGRAM	
SAN DIEGO, CA 92115				7,00
				,,,,,
HILLEL OF SAN DIEGO	NONE	PC	CSUSM - JEWISH STUDENT ENGAGEMENT	
5717 LINDO PASEO				
SAN DIEGO, CA 92115				50,00
HILLEL OF SAN DIEGO	NONE	PC	SUPPORT UCSD CAPITAL CAMPAIGN	
5717 LINDO PASEO				1,66
SAN DIEGO, CA 92115				1,00
HOSPICE OF THE NORTH COAST	NONE	PC	GENERAL SUPPORT	
2525 PIO PIC, SUITE 301				
CARLSBAD, CA 92008				1,00
Total from continuation sheets		27	•	

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

3a Grants and Contributions Paid During the Yea	If recipient is an individual,			
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
<u> </u>	or substantial contributor	recipient		
IMPACT CUBED	NONE	PC	JOC/SDII SALARIES	
441 SAXONY RD				
ENCINITAS, CA 92024				50,000
IMPACT CUBED	NONE	PC	STAFF SALARIES JOC & MGSDII	
441 SAXONY RD				
ENCINITAS, CA 92024				40,000
TWD OF GUDEN	NOVE	D.G.	TANDAGE GUNDED TOG GENERAL ODERATING GUNDODE	
IMPACT CUBED 441 SAXONY RD	NONE	PC	IMPACT CUBED JOC GENERAL OPERATING SUPPORT	
ENCINITAS, CA 92024				104,950
monitime, on 72024				104,550
IMPACT CUBED	NONE	₽C	JOC FUTURES CONF SPEAKER-ALVAREZ-MAPP	
441 SAXONY RD				
ENCINITAS, CA 92024				800
IMPACT CUBED	NONE	PC	HOLOCAUST SURVIVOR STUDY EFFORTS	
441 SAXONY RD				
ENCINITAS, CA 92024				10,000
INST. FOR CRIMINAL JUSTICE REFORM	NONE	₽C	GENERAL SUPPORT	
15514 S. WESTERN AVENUE				
GARDENIA, CA 90249				100
INT'L FELLOWHSIP OF CHRISTIANS & JEWS	NONE	PC	MOSHAV MEVO MODIIM EMERGENCY FIRE RELIEF	
30 NORTH LASALLE ST., STE 4300				F 222
CHICAGO, IL 60602				5,000
Total from continuation sheets				

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#### 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	Purpose of grant or contribution	Amount
Name and address (nome of business)	or substantial contributor	recipient		
INT'L FELLOWHSIP OF CHRISTIANS & JEWS	NONE	PC	MOSHAV MEVO MODIIM EMERG RELIEF FUND	
30 NORTH LASALLE ST., STE 4300				
CHICAGO, IL 60602				1,000.
INTERFAITH COMMUNITY SERVICES	NONE	PC	APPRECIATION JCF-FBI	
550 W. WASHINGTON AVE., SUITE B ESCONDIDO, CA 92025				500.
				333.
TAMED DATES GOODS IN THE STREET	NONE	D.G.	TOP GUDDODE	
INTERFAITH COMMUNITY SERVICES 550 W. WASHINGTON AVE., SUITE B	NONE	₽C	FOR SUPPORT	
ESCONDIDO, CA 92025				300,000.
INTERFAITH COMMUNITY SERVICES	NONE	₽C	NC WORKS PROGRAM	
550 W. WASHINGTON AVE., SUITE B				
ESCONDIDO, CA 92025				15,000.
INTERNATIONAL COMMUNITY FOUNDATION	NONE	PC	BORDER FUND IHO RICHARD KLY	
2505 NORTH AVENUE				500
NATIONAL CITY, CA 91950				500.
INVESTIGATIVE NEWSOURCE 5500 CAMPANIE DRIVE PSF 361C	NONE	PC	GENERAL SUPPORT	
SAN DIEGO, CA 92182				1,000.
				,
ISRAEL INSTITUTE INC.	NONE	PC	GENERAL SUPPORT	
1250 EYE ST., NW SUITE 710			2011011	
WASHINGTON, DC 20005				107,500.
Total from continuation sheets		<u> </u>	1	

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#### Part XV | Supplementary Information (continued)

3a Grants and Contributions Paid During the Ye	If recipient is an individual	1		
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	3533325353	
J STREET EDUCATION FUND	NONE	PC	GENERAL SUPPORT	
P.O. BOX 66073				0.500
WASHINGTON, DC 20035				2,500.
JERUSALEM FOUNDATION	NONE	₽C	GENERAL SUPPORT	
420 LEXINGTON AVENUE, SUITE 1645				
NEW YORK, NY 10170				18,000.
JERUSALEM FOUNDATION	NONE	PC	ART FESTIVAL	
420 LEXINGTON AVENUE, SUITE 1645				
NEW YORK, NY 10170				2,500.
JERUSALEM FOUNDATION	NONE	PC	TZEIRIM BMERCAZ	
420 LEXINGTON AVENUE, SUITE 1645				
NEW YORK, NY 10170				15,000.
				,
JERUSALEM FOUNDATION	NONE	PC	BAR KAYMA	
420 LEXINGTON AVENUE, SUITE 1645	NONE		DAK KATMA	
NEW YORK, NY 10170				3,000.
				-
JERUSALEM FOUNDATION	NONE	PC	FOR BAR KAYMA	
420 LEXINGTON AVENUE, SUITE 1645				
NEW YORK, NY 10170				2,000.
·				
JERUSALEM FOUNDATION	NONE	PC	HAMIFFAL COOPERATIVE - LONG TERM RESOURCE DEVELOPMENT	
420 LEXINGTON AVENUE, SUITE 1645			STRATEGY	
NEW YORK, NY 10170				25,000.
Total from continuation sheets		<u> </u>		

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
JERUSALEM INTERCULTURAL CENTER P.O. BOX 1477 JERUSALEM, ISRAEL 91014	NONE	NC	COUNSEL, MENTORSHIP, COMPENSATION, OPERATING EXPENSES, JERUSALEM DAY, COVENANT CAMPAIGN, "LECTURE" EVENT, ETC.	251,432.
JEWISH BOOK COUNCIL 520 8TH AVENUE 4TH FLOOR NEW YORK, NY 10018	NONE	PC	GENERAL SUPPORT	400.
JEWISH COMMUNITY FOUNDATION OF SAN DIEGO 4950 MURPHY CANYON ROAD SAN DIEGO, CA 92123	NONE	PC	RABKIN MEMORIAL FUND	2,500.
JEWISH COMMUNITY FOUNDATION OF SAN DIEGO 4950 MURPHY CANYON ROAD SAN DIEGO, CA 92123	NONE	PC	RABKIN MEMORIAL FUND	2,500.
JEWISH CREATIVITY INTERNATIONAL 2472 BROADWAY, #331 NEW YORK, NY 10025	NONE	PC	GENERAL OPERATIONS SUPPORT	10,000.
JEWISH FAMILY & CHILD SVC OF PITTSBURGH 5743 BARTLETT STREET PITTSBURGH, PA 15217	NONE	PC	GENERAL SUPPORT	180.
JEWISH FAMILY SERVICE OF SAN DIEGO 8804 BALBOA AVE. SAN DIEGO, CA 92123	NONE	PC	HEART & SOUL GALA	2,200.
Total from continuation sheets				

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

3a Grants and Contributions Paid During the Year  Recipient	If recipient is an individual,		<u> </u>	
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
JEWISH FAMILY SERVICE OF SAN DIEGO	NONE	PC	HOLOCAUST SURVIVORS PROGRAM	
8804 BALBOA AVE. SAN DIEGO, CA 92123	NONE	FC	ROLOCAUST SURVIVORS PROGRAM	1,377
JEWISH FAMILY SERVICE OF SAN DIEGO 8804 BALBOA AVE. SAN DIEGO, CA 92123	NONE	PC	SD RAPID RESPONSE MIGRANT FAMILY SHELTER	500
,				
JEWISH FAMILY SERVICE OF SAN DIEGO 8804 BALBOA AVE. SAN DIEGO, CA 92123	NONE	₽C	HOLOCAUST SURVIVORS PROGRAM	778
,				
JEWISH FAMILY SERVICE OF SAN DIEGO 8804 BALBOA AVE. SAN DIEGO, CA 92123	NONE	PC	SD RAPID RESPONSE MIGRANT FAMILY SHELTER	500
5AN DIEGO, CA 72123				300
JEWISH FAMILY SERVICE OF SAN DIEGO 8804 BALBOA AVE.	NONE	₽C	SD RAPID RESPONSE MIGRANT FAMILY SHELTER	
SAN DIEGO, CA 92123				250
JEWISH FAMILY SERVICE OF SAN DIEGO 8804 BALBOA AVE.	NONE	₽C	SD RAPID RESPONSE MIGRANT FAMILY SHELTER	
SAN DIEGO, CA 92123				500
JEWISH FEDERATION OF GREATER PITTSBURGH 234 MCKEE PLACE	NONE	PC	VICTIMS OF TERROR	
PITTSBURGH, PA 15213				5,000
Total from continuation sheets				

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

3a Grants and Contributions Paid During the Year	Managed and to an individual	1	<del></del>	
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
Name and address (nome of business)	or substantial contributor	recipient		
JEWISH FEDERATION OF GREATER PITTSBURGH	NONE	₽C	VICTIMS OF TERROR	
234 MCKEE PLACE PITTSBURGH, PA 15213				500
JEWISH FEDERATION OF GREATER PITTSBURGH 234 MCKEE PLACE	NONE	PC	VICTIMS OF TERROR	
PITTSBURGH, PA 15213				1,800
JEWISH FEDERATION OF PALM SPRINGS	NONE	PC	100TH BOMBARDMENT	
69710 HWY 111 RANCHO MIRAGE, CA 92270				500
JEWISH FEDERATION OF PALM SPRINGS 69710 HWY 111	NONE	PC	CARDIO RESEARCH	
RANCHO MIRAGE, CA 92270				1,000
JEWISH FEDERATION OF PALM SPRINGS	NONE	PC	OUTPATIENT PT	
69710 HWY 111 RANCHO MIRAGE, CA 92270				1,000
JEWISH FEDERATION OF PALM SPRINGS 69710 HWY 111	NONE	PC	JFCS OF SUNCOAST	
RANCHO MIRAGE, CA 92270				3,000
JEWISH FEDERATION OF PALM SPRINGS	NONE	PC	JFCS OF SUNCOAST	
69710 HWY 111	MOINE		pres or someoms:	2 222
RANCHO MIRAGE, CA 92270				3,000
Total from continuation sheets		<u> </u>	1	

#### Part XV Supplementary Information (continued)

Name and address (home or business)  show any relationship to relation to relation re	3a Grants and Contributions Paid During the Yea	If recipient is an individual,			
JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  JFS BENEFACTOR PATRON  ALZHEIMER'S CAMPAIGN  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  ALZHEIMER'S CAMPAIGN  FC  ALZHEIMER'S CAMPAIGN  FC  ALZHEIMER'S CAMPAIGN  FC  ALZHEIMER'S CAMPAIGN  FC  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  JEWISH FEDERATION OF PALM SPRINGS  NONE  FC  JEWISH FEDERATION OF PALM SPRINGS  NONE  FC  TEMPLE SINAI  FANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  FC  ALZHEIMER'S ASSOC  FT EMPLE SINAI  FC  ALZHEIMER'S ASSOC  FT EMPLE SINAI  FC  FRIEDMAN HOLOCAUST CENTER  FC  FRIEDMAN HOLOCAUST CENTER  FC  JEWISH FEDERATION OF PALM SPRINGS  NONE  FC  FRIEDMAN HOLOCAUST CENTER  FO JEWISH FEDERATION OF PALM SPRINGS  NONE  FC  FRIEDMAN HOLOCAUST CENTER  FC  JEWISH FEDERATION OF PALM SPRINGS  NONE  FC  FRIEDMAN HOLOCAUST CENTER  FC  JEWISH FEDERATION OF PALM SPRINGS  NONE  FC  FRIEDMAN HOLOCAUST CENTER  FC  JEWISH FEDERATION OF PALM SPRINGS  NONE  FC  FRIEDMAN HOLOCAUST CENTER  FC  FRIEDMAN HOLOCAUST  FRIEDMAN HOLOCAUST  FRIEDMAN HOLOCAUST  FRIEDMAN HOLOCAUST  FRI		show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
SPYIO HWY 111  PARKEN MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  ALZHEIMER'S CAMPAIGN  ALZHEIMER'S CAMPAIGN  PC  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  FEMPLE SINAI  SPYIO HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  TEMPLE SINAI  SPYIO HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  ALZHEIMER'S ASSOC  FRIEDMAN HOLOCAUST CENTER  SPYIO HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  FRIEDMAN HOLOCAUST CENTER  SPYIO HWY 111  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  FRIEDMAN HOLOCAUST CENTER  SPYIO HWY 111  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  FRIEDMAN HOLOCAUST CENTER  SPYIO HWY 111  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  PC  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  FRIEDMAN HOLOCAUST CENTER  PC  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  PC  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  PC  JEWISH FEDERAL SUPPORT		or substantial contributor	recipient		
RANCHO MIRAGE, CA 92270  JEMISH FEDERATION OF PALM SPRINGS NONE  PC ALZHEIMER'S CAMPAIGN  JEMISH FEDERATION OF PALM SPRINGS NONE  PC JEMISH FEDERATION OF PALM SPRINGS NONE  PC JEMISH FEDERATION OF PALM SPRINGS NONE  PC TEMPLE SINAI  JEMISH FEDERATION OF PALM SPRINGS NONE  PC TEMPLE SINAI  JEMISH FEDERATION OF PALM SPRINGS NONE  PC ALZHEIMER'S ASSOC  JEMISH FEDERATION OF PALM SPRINGS NONE  PC ALZHEIMER'S ASSOC  JEMISH FEDERATION OF PALM SPRINGS NONE  PC RIZHEIMER'S ASSOC  JEMISH FEDERATION OF PALM SPRINGS NONE  PC RIZHEIMER'S ASSOC  JEMISH FEDERATION OF PALM SPRINGS NONE  PC RIZHEIMER'S ASSOC  JEMISH FEDERATION OF PALM SPRINGS NONE  PC RIZHEIMER'S ASSOC  JEMISH FEDERATION OF PALM SPRINGS NONE  PC RIZHEIMER'S ASSOC  JEMISH FEDERATION OF PALM SPRINGS NONE  PC JEMISH SP	JEWISH FEDERATION OF PALM SPRINGS	NONE	₽C	JFS BENEFACTOR PATRON	
JEWISH FEDERATION OF FALM SPRINGS  NONE  PC  ALZHEIMER'S CAMPAIGN  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  JEWISH FEDERATION OF FALM SPRINGS  NONE  PC  TEMPLE SINAI  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  TEMPLE SINAI  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  ALZHEIMER'S CAMPAIGN  ALZHEIMER'S CAMPAIGN  FC  TEMPLE SINAI  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  ALZHEIMER'S ASSOC  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  FRIEDMAN HOLOCAUST CENTER  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  FRIEDMAN HOLOCAUST CENTER  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  FRIEDMAN HOLOCAUST CENTER  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  FRIEDMAN HOLOCAUST CENTER  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  JEWISH SPRINGS  NONE  JEWISH SPRINGS  NONE  PC  JEWISH SPRINGS  NONE  JEWISH SPRINGS  NONE  PC  JEWISH SPRINGS  NONE  JEWISH SPRINGS	59710 HWY 111				
69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC  JEMESH FEDERATION OF PALM SPRINGS NONE  PC  TEMPLE SINAI  69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC  ALZHEIMER'S ASSOC  69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC  FRIEDMAN HOLOCAUST CENTER  69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC  FRIEDMAN HOLOCAUST CENTER  69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC  FRIEDMAN HOLOCAUST CENTER  FRIEDMAN HOLOCAUST CENTER  FRIEDMAN HOLOCAUST CENTER  FRIEDMAN HOLOCAUST CENTER  JEWISH FEDERATION OF PALM SPRINGS NONE  PC  FRIEDMAN HOLOCAUST CENTER	RANCHO MIRAGE, CA 92270				2,760
JEWISH FEDERATION OF PALM SPRINGS NONE  PC  GENERAL SUPPORT  G9710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC  TEMPLE SINAI  G9710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC  ALZHEIMER'S ASSOC  G9710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC  FRIEDMAN HOLOCAUST CENTER  G9710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC  FRIEDMAN HOLOCAUST CENTER  G9710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC  GENERAL SUPPORT	JEWISH FEDERATION OF PALM SPRINGS	NONE	PC	ALZHEIMER'S CAMPAIGN	
JEWISH PEDERATION OF PALM SPRINGS NONE  PC  SENERAL SUPPORT  SENERAL SUPPORT  SENERAL SUPPORT  FEMPLE SINAI  FEMPL	69710 HWY 111				
69710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC TEMPLE SINAI  FEDERATION OF PALM SPRINGS NONE  PC ALZHEIMER'S ASSOC  FRIEDMAN HOLOCAUST CENTER  69710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC FRIEDMAN HOLOCAUST CENTER  69710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC FRIEDMAN HOLOCAUST CENTER  69710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC SENERAL SUPPORT	RANCHO MIRAGE, CA 92270				2,000
69710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC TEMPLE SINAI  FEDERATION OF PALM SPRINGS NONE  PC ALZHEIMER'S ASSOC  FRIEDMAN HOLOCAUST CENTER  69710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC PRIEDMAN HOLOCAUST CENTER  69710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC PRIEDMAN HOLOCAUST CENTER  69710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC SENERAL SUPPORT	THURSE HEREBARTON OF DALK SPRINGS	TOWE	D.G.	GENERAL GURDARE	
JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  TEMPLE SINAI  FEDERATION OF PALM SPRINGS  NONE  PC  ALZHEIMER'S ASSOC  FRIEDMAN HOLOCAUST CENTER  FOR PALM SPRINGS  NONE  PC  PC  PRIEDMAN HOLOCAUST CENTER  FOR PALM SPRINGS  NONE  PC  PRIEDMAN HOLOCAUST CENTER  FOR PALM SPRINGS  NONE  PC  PRIEDMAN HOLOCAUST CENTER  FOR PRIEDMAN HOLOCAUST CENTER		NONE	PC	GENERAL SUPPORT	
JEWISH FEDERATION OF PALM SPRINGS NONE PC TEMPLE SINAI  69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE PC ALZHEIMER'S ASSOC  69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE PC FRIEDMAN HOLOCAUST CENTER  69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE PC FRIEDMAN HOLOCAUST CENTER  69710 HWY 111					1,000
69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS ARANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE PC FRIEDMAN HOLOCAUST CENTER  69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE PC FRIEDMAN HOLOCAUST CENTER  69710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE PC SENERAL SUPPORT	maione minist, on 72270				1,000
RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC ALZHEIMER'S ASSOC  ALZHEIMER'S ASSOC  ALZHEIMER'S ASSOC  FRIEDMAN HOLOCAUST CENTER  69710 HWY 111  RANCHO MIRAGE, CA 92270  FRIEDMAN HOLOCAUST CENTER  JEWISH FEDERATION OF PALM SPRINGS NONE  PC JEWISH FEDERAL SUPPORT	JEWISH FEDERATION OF PALM SPRINGS	NONE	₽C	TEMPLE SINAI	
JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  ALZHEIMER'S ASSOC  69710 HWY 111  RANCHO MIRAGE, CA 92270  PC  FRIEDMAN HOLOCAUST CENTER  69710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  GENERAL SUPPORT  69710 HWY 111					
G9710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS  MONE  PC  FRIEDMAN HOLOCAUST CENTER  FRIEDMAN HOLOCAUST CENTER  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  JENERAL SUPPORT	RANCHO MIRAGE, CA 92270				2,000
G9710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  FRIEDMAN HOLOCAUST CENTER  G9710 HWY 111  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  JENERAL SUPPORT	JEWISH FEDERATION OF PALM SPRINGS	NONE	PC	ALZHEIMER'S ASSOC	
JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  FRIEDMAN HOLOCAUST CENTER  69710 HWY 111  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  GENERAL SUPPORT  69710 HWY 111					
69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE PC G9710 HWY 111	RANCHO MIRAGE, CA 92270				500
69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE PC GENERAL SUPPORT 69710 HWY 111		7077	7.0		
JEWISH FEDERATION OF PALM SPRINGS NONE PC GENERAL SUPPORT 69710 HWY 111		NONE	PC	FRIEDMAN HOLOCAUST CENTER	
JEWISH FEDERATION OF PALM SPRINGS NONE PC GENERAL SUPPORT 69710 HWY 111					1,000
69710 HWY 111	animone minima, on 92270				1,000
	JEWISH FEDERATION OF PALM SPRINGS	NONE	PC	GENERAL SUPPORT	
RANCHO MIRAGE CA 92270					
ALLICE, CA FEET	RANCHO MIRAGE, CA 92270		ļ		1,000

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#### Part XV Supplementary Information (continued)

Name and address (home or business)  Show any relationship to all prices of plant or contribution  Amount of address (home or business)  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  SPIO BWY 111  RANCHO MIRAGE, CA 92270  AMONE  PC  STAND WITH US  STAND WITH U	3a Grants and Contributions Paid During the Yea	If recipient is an individual,			
JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  JUMP INC.  SMERGENCY STUDENT FUND  STAND WITH US  S		show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  ANNUAL CAMPAIGN  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  POOLS FOR TOMORROW		or substantial contributor	recipient		
RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  SMERGENCY STUDENT FUND  SP710 HWY 111  ARACHO MIRAGE, CA 92270  JEWISH FEDERATION OF FALM SPRINGS  NONE  PC  STAND WITH US  STAND W	JEWISH FEDERATION OF PALM SPRINGS	NONE	PC	JUMP INC.	
JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  EMERGENCY STUDENT FUND  STAND WITH US  SOYS & GIRLS CLUB COACHELLA  SOYS & GIRLS CLUB COACHELLA  STAND WITH US  SOYS & GIRLS CLUB COACHELLA  STAND WITH US  SOYS & GIRLS CLUB COACHELLA  SOYS & GIRLS CLUB COACHELLA  SOYN WITH US  SOYN WITH US	69710 HWY 111				
69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC BOYS & GIRLS CLUB COACHELLA  STAND WITH US  SOYS & GIRLS CLUB COACHELLA  SOYIO HWY 111 RANCHO MIRAGE, CA 92270  DEWISH FEDERATION OF PALM SPRINGS NONE  PC COMMUNITY OUTREACH  SOYIO HWY 111 RANCHO MIRAGE, CA 92270  DEWISH FEDERATION OF PALM SPRINGS NONE  PC ANNUAL CAMPAIGN  SOYIO HWY 111 RANCHO MIRAGE, CA 92270  DEWISH FEDERATION OF PALM SPRINGS NONE  PC ANNUAL CAMPAIGN  SOYIO HWY 111 RANCHO MIRAGE, CA 92270  DEWISH FEDERATION OF PALM SPRINGS NONE  PC ANNUAL CAMPAIGN  TOOLS FOR TOMORROW	RANCHO MIRAGE, CA 92270				1,700
69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC BOYS & GIRLS CLUB COACHELLA  STAND WITH US  SOYS & GIRLS CLUB COACHELLA  SOYIO HWY 111 RANCHO MIRAGE, CA 92270  DEWISH FEDERATION OF PALM SPRINGS NONE  PC COMMUNITY OUTREACH  SOYIO HWY 111 RANCHO MIRAGE, CA 92270  DEWISH FEDERATION OF PALM SPRINGS NONE  PC ANNUAL CAMPAIGN  SOYIO HWY 111 RANCHO MIRAGE, CA 92270  DEWISH FEDERATION OF PALM SPRINGS NONE  PC ANNUAL CAMPAIGN  SOYIO HWY 111 RANCHO MIRAGE, CA 92270  DEWISH FEDERATION OF PALM SPRINGS NONE  PC ANNUAL CAMPAIGN  TOOLS FOR TOMORROW					
JEWISH FEDERATION OF PALM SPRINGS NONE  PC STAND WITH US  STAND WI		NONE	PC	EMERGENCY STUDENT FUND	
JEWISH PEDERATION OF PALM SPRINGS  NONE  PC  STAND WITH US  69710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH PEDERATION OF PALM SPRINGS  NONE  PC  BOYS & GIRLS CLUB COACHELLA  69710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH PEDERATION OF PALM SPRINGS  NONE  PC  COMMUNITY OUTREACH  69710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH PEDERATION OF PALM SPRINGS  NONE  PC  ANNUAL CAMPAIGN  69710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH PEDERATION OF PALM SPRINGS  NONE  PC  ANNUAL CAMPAIGN  G9710 HWY 111  FANCHO MIRAGE, CA 92270  JEWISH PEDERATION OF PALM SPRINGS  NONE  PC  TOOLS FOR TOMORROW					
69710 HWY 111 RANCHO MIRAGE, CA 92270  DEWISH FEDERATION OF PALM SPRINGS NONE  PC BOYS & GIRLS CLUB COACHELLA  SPRINGS NONE  PC COMMUNITY OUTREACH  PC COMMUNITY OUTREACH  PC ANNUAL CAMPAIGN  SPRINGS FOR TOOLS FOR TOMORROW  PC TOOLS FOR TOMORROW	RANCHO MIRAGE, CA 92270				1,000
69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC BOYS & GIRLS CLUB COACHELLA  69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC COMMUNITY OUTREACH  69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC ANNUAL CAMPAIGN  69710 HWY 111 RANCHO MIRAGE, CA 92270	TEWICH PEDEDAMION OF DAIM CODINGS	MONE	D.C.	CMAND WITH UC	
JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  BOYS & GIRLS CLUB COACHELLA  SOYIO HWY 111  RANCHO MIRAGE, CA 92270  DEWISH FEDERATION OF PALM SPRINGS  NONE  PC  COMMUNITY OUTREACH  PC  ANNUAL CAMPAIGN  69710 HWY 111  RANCHO MIRAGE, CA 92270  DEWISH FEDERATION OF PALM SPRINGS  NONE  PC  ANNUAL CAMPAIGN  FOR TOMORROW  DEWISH FEDERATION OF PALM SPRINGS  NONE  PC  TOOLS FOR TOMORROW		NONE	FC	STAND WITH US	
JEWISH FEDERATION OF PALM SPRINGS  69710 HWY 111  RANCHO MIRAGE, CA 92270   JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  COMMUNITY OUTREACH  69710 HWY 111  RANCHO MIRAGE, CA 92270   JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  ANNUAL CAMPAIGN  69710 HWY 111  RANCHO MIRAGE, CA 92270   JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  TOOLS FOR TOMORROW  69710 HWY 111					250
69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC COMMUNITY OUTREACH  69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC ANNUAL CAMPAIGN  JEWISH FEDERATION OF PALM SPRINGS NONE  PC TOOLS FOR TOMORROW  69710 HWY 111					
RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS 69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS 69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE PC FOOLS FOR TOMORROW 69710 HWY 111	JEWISH FEDERATION OF PALM SPRINGS	NONE	₽C	BOYS & GIRLS CLUB COACHELLA	
JEWISH FEDERATION OF PALM SPRINGS NONE  PC COMMUNITY OUTREACH  69710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE  PC ANNUAL CAMPAIGN  FC FOOLS FOR TOMORROW  69710 HWY 111  FOOLS FOR TOMORROW	69710 HWY 111				
G9710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  ANNUAL CAMPAIGN  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  TOOLS FOR TOMORROW  69710 HWY 111	RANCHO MIRAGE, CA 92270				1,000
G9710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  ANNUAL CAMPAIGN  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  TOOLS FOR TOMORROW  69710 HWY 111					
JEWISH FEDERATION OF PALM SPRINGS NONE PC ANNUAL CAMPAIGN  69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE PC TOOLS FOR TOMORROW  69710 HWY 111		NONE	PC	COMMUNITY OUTREACH	
JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  ANNUAL CAMPAIGN  69710 HWY 111  RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS  NONE  PC  TOOLS FOR TOMORROW  69710 HWY 111					1,500
69710 HWY 111 RANCHO MIRAGE, CA 92270  JEWISH FEDERATION OF PALM SPRINGS NONE PC TOOLS FOR TOMORROW 69710 HWY 111	MINOID MINIST, ON 32270				1,300
JEWISH FEDERATION OF PALM SPRINGS NONE PC TOOLS FOR TOMORROW 69710 HWY 111	JEWISH FEDERATION OF PALM SPRINGS	NONE	PC	ANNUAL CAMPAIGN	
JEWISH FEDERATION OF PALM SPRINGS NONE PC TOOLS FOR TOMORROW 69710 HWY 111	69710 HWY 111				
69710 HWY 111	RANCHO MIRAGE, CA 92270				5,500
69710 HWY 111					
		NONE	PC	TOOLS FOR TOMORROW	
RANCHO MIRAGE, CA 92270					
	RANCHO MIRAGE, CA 92270				500

#### Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Yo	ear			
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
Name and address (home or business)	or substantial contributor	recipient		
JEWISH FEDERATION OF PALM SPRINGS	NONE	PC	JUMP INC.	
69710 HWY 111				
RANCHO MIRAGE, CA 92270				2,500.
JEWISH FEDERATION OF PALM SPRINGS	NONE	PC	JERUSALEM PROGRAM	
69710 HWY 111				
RANCHO MIRAGE, CA 92270				1,000.
JEWISH FEDERATION OF PALM SPRINGS	NONE	₽C	TSEDAKA FUND	
69710 HWY 111				
RANCHO MIRAGE, CA 92270				1,000.
JEWISH FEDERATION OF PALM SPRINGS	NONE	PC	BOYS & GIRLS CLUB	
69710 HWY 111	NONE		BOIS & GIRLS CHOB	
RANCHO MIRAGE, CA 92270				500.
JEWISH FEDERATION OF PALM SPRINGS	NONE	PC	COMMUNITY SECURITY FUND	
69710 HWY 111	NONE		COMMONITI SECORITI FOND	
RANCHO MIRAGE, CA 92270				1,000.
JEWISH FEDERATION OF PALM SPRINGS	NONE	PC	MY JUMP GENERAL SUPPORT	
69710 HWY 111	NONE	PC	MI JUMP GENERAL SUPPORT	
RANCHO MIRAGE, CA 92270				2,690.
·				,
TEMTON DEPENDANTON OF PARK CONTROL	NONE	DG.	COLLEGE OF THE DEGERM	
JEWISH FEDERATION OF PALM SPRINGS 69710 HWY 111	NONE	PC	COLLEGE OF THE DESERT	
RANCHO MIRAGE, CA 92270				2,000.
				, ,
Total from continuation sheets				

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
	or substantial contributor	recipient		
JEWISH FEDERATION OF SAN DIEGO COUNTY	NONE	₽C	SHABBAT SAN DIEGO- 2019 INTERNATIONAL SHABBAT DAY	
4950 MURPHY CANYON ROAD				
SAN DIEGO, CA 92123				10,000.
JEWISH FEDERATION OF SAN DIEGO COUNTY	NONE	₽C	ONE HAPPY CAMPER	
4950 MURPHY CANYON ROAD				
SAN DIEGO, CA 92123				12,500.
JEWISH FEDERATION OF SAN DIEGO COUNTY	NONE	PC	GENERAL SUPPORT	
4950 MURPHY CANYON ROAD				
SAN DIEGO, CA 92123				360.
JEWISH FEDERATION OF SAN DIEGO COUNTY	NONE	PC	ANNUAL CAMPAIGN GIFT	
4950 MURPHY CANYON ROAD				
SAN DIEGO, CA 92123				3,600.
JEWISH FEDERATIONS OF NORTH AMERICA	NONE	PC	RESHUT HARABIM	
25 BROADWAY, SUITE 1700 NEW YORK, NY 10004				25,000.
NEW IORK, NI 10004				25,000.
JEWISH FEDERATIONS OF NORTH AMERICA	NONE	PC	BELIBA CHOMA -GENERAL OPERATING	
25 BROADWAY, SUITE 1700 NEW YORK, NY 10004				20,000.
NUM TORK, NT 10004				20,000.
JEWISH FUNDERS NETWORK 150 WEST 30TH STREET, SUITE 900	NONE	PC	LF ANNUAL MEMBERSHIP	
NEW YORK, NY 10001				10,000.
·				,
Total from continuation sheets				

#### Part XV Supplementary Information (continued)

If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution  2019 JFN CONFVSPONSORSHIP	Amount
		2019 JFN CONFVSPONSORSHIP	
NONE	PC	2019 JFN CONFVSPONSORSHIP	
			20,000
NONE	PC	SAN DIEGO CHAPTER	
			360.
NONE	PC	JPRO NETWORK MEMBRSHIP	
			1,000.
			,
NONE	PC	ANNUAL CONF., DETROIT AUG 2019	
			5,000.
NONE	D.C.	ZENTIAM ZION TEDUCALEM	
NONE		KEHILAI ZION-UEKUSALEM	
			2,500.
NONE	PC	ALTERNATIVE JERUSALEM DAY MARCH	
			5,000.
			,,,,,,,
NONE	PC	TAMAR & YAIR	
			500.
	NONE NONE	NONE PC  NONE PC  NONE PC  NONE PC	NONE PC JPRO NETWORK MEMBRSHIP  NONE PC ANNUAL CONF., DETROIT AUG 2019  NONE PC KEHILAT ZION-JERUSALEM  NONE PC ALTERNATIVE JERUSALEM DAY MARCH

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#### Part XV Supplementary Information (continued)

Name and address (home or business)  KITCHENS FOR GOOD  404 EUCLID AVENUE  SAN DIEGO, CA 92114  KITCHENS FOR GOOD  404 EUCLID AVENUE  SAN DIEGO, CA 92114	If recipient is an individual, show any relationship to any foundation manager or substantial contributor  NONE	Foundation status of recipient  PC	Purpose of grant or contribution  GENERAL OPERATING SUPPORT  GENERAL SUPPORT	Amount 25,000
KITCHENS FOR GOOD 404 EUCLID AVENUE SAN DIEGO, CA 92114  KITCHENS FOR GOOD 404 EUCLID AVENUE	NONE	PC		25,000
404 EUCLID AVENUE SAN DIEGO, CA 92114  KITCHENS FOR GOOD 404 EUCLID AVENUE				25,000
SAN DIEGO, CA 92114  KITCHENS FOR GOOD 404 EUCLID AVENUE	NONE	PC	GENERAL SUPPORT	25,000
KITCHENS FOR GOOD 404 EUCLID AVENUE	NONE	PC	GENERAL SUPPORT	25,000
404 EUCLID AVENUE	NONE	PC	GENERAL SUPPORT	
404 EUCLID AVENUE				
SAN DIEGO, CA 92114				
				250
KPBS SAN DIEGO	NONE	PC	TV SHOW "A GROWING PASSION"	
5250 CAMPANILE DRIVE, MC 1931				10.000
SAN DIEGO, CA 92182				10,000
KPBS SAN DIEGO	NONE	₽C	GENERAL SUPPORT	
5250 CAMPANILE DRIVE, MC 1931				
SAN DIEGO, CA 92182				5,000
KPBS SAN DIEGO	NONE	₽C	MEMBERSHIP-PRODUCER CLUB LEVEL	
5250 CAMPANILE DRIVE, MC 1931	NONE		REMDERSHIT TRODUCER CHOD HEVER	
SAN DIEGO, CA 92182				1,200
LA JOLLA PLAYHOUSE	NONE	PC	GALA	
P.O. BOX 12039				
LA JOLLA, CA 92039				6,250
LA JOLLA PLAYHOUSE	NONE	PC	GENERAL SUPPORT	
P.O. BOX 12039				
LA JOLLA, CA 92039				5,000

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

3a Grants and Contributions Paid During the Ye Recipient	If recipient is an individual.			
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
	or substantial contributor	roopicht		
LA JOLLA PLAYHOUSE	NONE	₽C	GENERAL SUPPORT	
P.O. BOX 12039				
LA JOLLA, CA 92039				2,750
LAWRENCE FAMILY JCC OF SD COUNTY	NONE	PC	2019 SD JEWISH FILM FESTIVAL	
4126 EXECUTIVE DRIVE				
LA JOLLA, CA 92037				25,000
LAWRENCE FAMILY JCC OF SD COUNTY	NONE	₽C	SHALOM BABY/PJ LIBRARY	
4126 EXECUTIVE DRIVE	NONE		SHADON BABI/FO HIBRARI	
LA JOLLA, CA 92037				27,500
LEAH'S PANTRY INC. 3019 MISSION STREET	NONE	PC	COVER COSTS FOR NEW ASSOC DIRECTOR	
SAN FRANCISCO, CA 94110				101,500
LEAH'S PANTRY INC.	NONE	PC	OPERATING EXPENSES	
3019 MISSION STREET SAN FRANCISCO, CA 94110				35,000
MATER DEI CATHOLIC PARISH	NONE	PC	CAPITAL CAMPAIGN SUPPORT	
1571 MAGDALENA AVENUE				750
CHULA VISTA, CA 91913				750
MATER DEI CATHOLIC PARISH	NONE	₽C	CAPITAL CAMPAIGN SUPPORT	
1571 MAGDALENA AVENUE				
CHULA VISTA, CA 91913				200
Total from continuation sheets				

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3a Grants and Contributions Paid During the Ye	ar		T	
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	
MATI-USA	NONE	₽C	EAST JERUSALEM BLDG BLOCKS	
11 E. 44TH STREET, 19TH FLR	NONE		EAST UERUSAHEM BIDG BIOCKS	
NEW YORK, NY 10017				35,000
NEW TORK, NI 10017				33,000
MEDIA ARTS CENTER OF SAN DIEGO	NONE	PC	ESPINOSA PRODUCTIONS	
2921 EL CAJON BLVD.				
SAN DIEGO, CA 92014				5,000.
MEDIA ARTS CENTER OF SAN DIEGO	NONE	₽C	ESPINOSA PRODUCTIONS	
2921 EL CAJON BLVD.				
SAN DIEGO, CA 92014				5,000.
MILLS COLLEGE ANNUAL FUND	NONE	PC	SHARYN GOODSON'S ALUMNI GIFT	
5000 MACARTHUR BOULEVARD				
OAKLAND, CA 94613				180.
MILLS COLLEGE ANNUAL FUND	NONE	PC	SHARYN GOODSON'S ALUMNI GIFT	
5000 MACARTHUR BOULEVARD				
OAKLAND, CA 94613				180.
MISSION EDGE	NONE	PC	MID-CITY CAN-EXEC. DIR ISRAEL STUDY TRIP SEPT 2019	
2820 ROOSEVELT ROAD SUITE 200				
SAN DIEGO, CA 92106				2,185.
MOISHE HOUSE	NONE	PC	FOR OPERATING SUPPORT	
441 SAXONY ROAD				200 222
ENCINITAS, CA 92024				300,000.
Total from continuation sheets				

### Part XV | Supplementary Information (continued)

3a Grants and Contributions Paid During the Ye	ar	1		1
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		
MOISHE HOUSE	NONE	PC	MOISHE HOUSE NORTH COUNTY	
441 SAXONY ROAD				
ENCINITAS, CA 92024				28,000
MOISHE HOUSE	NONE	₽C	GENERAL SUPPORT	
441 SAXONY ROAD	NONE	FC	GENERAL SUPPORT	
ENCINITAS, CA 92024				1,800.
MONA FOUNDATION	NONE	PC	GENERAL SUPPORT	
1802 136TH PLACE NE SUITE 2				
BELLEVUE, WA 98005				1,700.
MONA FOUNDATION	NONE	PC	GENERAL SUPPORT	
1802 136TH PLACE NE SUITE 2				
BELLEVUE, WA 98005				10,000.
MONA FOUNDATION	NONE	PC	GENERAL SUPPORT	
1802 136TH PLACE NE SUITE 2				E 250
BELLEVUE, WA 98005				5,350.
MONA FOUNDATION	NONE	PC	GENERAL SUPPORT	
1802 136TH PLACE NE SUITE 2	NONE		GENERAL SUFFORT	
BELLEVUE, WA 98005				5,000.
20003				3,000.
NATIONAL GEOGRAPHIC SOCIETY	NONE	PC	GENERAL SUPPORT	
1145 17TH STREET, NW				
WASHINGTON, DC 20036				1,000.
Total from continuation sheets		1	1	
823641 04-01-18		42		

#### Part XV Supplementary Information (continued)

Recipient	If recipient is an individual,	Foundation	Durnage of grant or	
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
NATIONAL UNIVERSITY	NONE	PC	SANFORD INST. OF PHILANTHROPY	
1355 N. TORREY PINES ROAD				
A JOLLA, CA 92037				720
NATIONAL YOUNG FARMERS COALITION	NONE	PC	TO SUPPORT SD YOUNG FARMERS	
P. O. BOX 1074				
HUDSON, NY 12534				15,000
NEW ISRAEL FUND	NONE	₽C	IPCRI - BRIDGING THE DIVIDES CONFERENCE	
EAST 39TH STREET, SUITE 301	NONE	FC	IPCKI - BKIDGING THE DIVIDES CONFERENCE	
NEW YORK, NY 10016				5,000
IEW ISRAEL FUND 5 EAST 39TH STREET, SUITE 301	NONE	PC	MADRASA - ARABIC LANGUAGE COURSES	
JEW YORK, NY 10016				3,635
NEW SPIRIT	NONE	NC	EXPENSES FOR JERUSALEM MODEL, SUPPORT SHAVUOT,	
P.O. BOX 2750 VERUSALEM, ISRAEL 92102602			RESTREET SPACE, GENERAL SUPPORT	339,000
NEW VENTURE FUND	NONE	PC	LF COALITION PARTICIPATION	
201 CONNECTICUT AVENUE, NW, STE 300				
VASHINGTON, DC 20036				50,000
NEW VILLAGE ARTS	NONE	PC	APPRECIATION OF TU B'AV EVENT	
2787 STATE STREET				
CARLSBAD, CA 92008				400

Recipient	If recipient is an individual,	Foundation	Durnage of grant or	
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
	0. 002014.1114.00114.124.10	,		
NORTH COUNTY LGBTQ RESOURCE CNTR	NONE	₽C	GENERAL SUPPORT	
3220 MISSION AVENUE SUITE #2				
OCEANSIDE, CA 92058				500
NORTH COUNTY LGBTQ RESOURCE CNTR	NONE	PC	GENERAL SUPPORT	
3220 MISSION AVENUE SUITE #2				
OCEANSIDE, CA 92058				1,000
NORTH COUNTY LIFELINE INC. 200 MICHIGAN AVENUE	NONE	PC	GENERAL OPERATING SUPPORT	
VISTA, CA 92084				35,000
NORTH COUNTY PHILANTHROPY COUNCIL	NONE	PC	LUNCHEON FOR LAURA GALINSON	
P. O. BOX 1641 CARLSBAD, CA 92018				5,000
ANDERD, CA 92010				3,000
NORTH COUNTY PHILANTHROPY COUNCIL	NONE	PC	VOLUNTEER LUNCHEON	
P. O. BOX 1641				
CARLSBAD, CA 92018				750
NORTH COUNTY PHILANTHROPY COUNCIL P. O. BOX 1641	NONE	PC	FOR LF MEMBERSHIP	
CARLSBAD, CA 92018				500
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	PC	NEW FUND FOR CINEMA & TV	
630 THIRD AVENUE, . 15TH FLR				10.000
NEW YORK, NY 10017				10,000

3a Grants and Contributions Paid During the Ye				
Recipient  Name and address (home or hyginess)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	PC	GENERAL SUPPORT	
630 THIRD AVENUE, . 15TH FLR				
NEW YORK, NY 10017				60,000.
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	PC	CATAMON DANCE GROUP	
630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017				30,000.
Mill Tokk, NI 10017				30,000.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR	NONE	PC	JERUSALEM VILLAGE	
NEW YORK, NY 10017				25,000.
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	PC	GINOT HA'IR COMMUNITY COUNCIL - 2019 SHABBAT	
630 THIRD AVENUE, . 15TH FLR	NONE		GINOT HA IN COMMONTH COUNCIL - 2019 SHABBAT	
NEW YORK, NY 10017				20,000.
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	PC	FOR MASHU MASHU	
630 THIRD AVENUE, . 15TH FLR				
NEW YORK, NY 10017				7,500.
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	PC	FOR JERUSALEM VILLAGE	
630 THIRD AVENUE, . 15TH FLR				4 000
NEW YORK, NY 10017				4,000.
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	PC	0 FOR KULNA YERUSHALAYIM	
630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017				45,000.
				,
lotal from continuation sheets				

3a Grants and Contributions Paid During the Ye				
Recipient  Name and address (home or husiness)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	PC	JERUSALEM LABORATORY	
630 THIRD AVENUE, . 15TH FLR				
NEW YORK, NY 10017				12,500.
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	₽C	NFCT WORKSHOP	
630 THIRD AVENUE, . 15TH FLR				
NEW YORK, NY 10017				11,760.
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	₽C	FOR SHAHARIT	
630 THIRD AVENUE, . 15TH FLR				
NEW YORK, NY 10017				25,000.
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	₽C	KULNA YERUSHALAYIM RAMADAN EVENT	
630 THIRD AVENUE, . 15TH FLR				
NEW YORK, NY 10017				6,955.
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	PC	YESHIVAT KNESSET YITZCHAK	
630 THIRD AVENUE, . 15TH FLR				
NEW YORK, NY 10017				25,000.
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	PC	KULNA YERUSHALAYIM SAHARANA EVENT	
630 THIRD AVENUE, . 15TH FLR				
NEW YORK, NY 10017				5,544.
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	PC	SHAHARIT-BESOD SIACH ANNUAL CONFERENCE	
630 THIRD AVENUE, . 15TH FLR				
NEW YORK, NY 10017				5,000.
Total from continuation sheets	L	<u>l</u>		
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## Form 990-PF LEICHTAG FOUND Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Ye 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 Gallotantial contributor			
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	PC	MUSLALA-2019 MATCHMAKER PROJECT	
630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017				5,000
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	PC	JERUSALEM BIENNALE - STAFFING COSTS	
630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017				20,000
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR	NONE	PC	BINA - JERUSALEM SECULAR YESHIVA IHO ARIEL LEVINSON JERUSALEM MODEL	
NEW YORK, NY 10017				4,500
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	₽C	JERUSALEM INSTITUTE FOR ISRAEL STUDIES-TRANSALATION	
630 THIRD AVENUE, . 15TH FLR	NONE	FC	DERUSALEM INSTITUTE FOR ISRAEL STUDIES-TRANSALATION	
NEW YORK, NY 10017				1,600
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	₽C	JERUSALEM LABORATORY	
630 THIRD AVENUE, . 15TH FLR				
NEW YORK, NY 10017				12,500
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	₽C	BINA	
630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017				500
P.E.F. ISRAEL ENDOWMENT FUNDS	NONE	PC	THE SCHOOL OF VISUAL THEATRE	
630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017				2,250
Total from continuation sheets				

### Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year	If recipient is an individual		1	
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		
PARKINSON'S FOUNDATION	NONE	PC	GENERAL SUPPORT	
1359 BROADWAY STE 1509				
NEW YORK, NY 10018				500.
PARTNERSHIP FOR THE ADV OF NEW AMERICANS	NONE	PC	TALL'S FUNDRAISING CAMPAIGN	
4089 FARIMOUNT AVENUE				2 000
SAN DIEGO, CA 92105				2,000.
PEACEWORKS NETWORK FOUNDATION	NONE	₽C	GENERAL SUPPORT	
P.O. BOX 1577-OCS	10112			
NEW YORK, NY 10113				25,000.
PLANNED PARENTHOOD, SAN DIEGO	NONE	₽C	GENERAL SUPPORT	
1075 CAMINO DE RIO SOUTH				
SAN DIEGO, CA 92108				500.
PONDER FINE ARTS BOOSTER CLUB	NONE	PC	GENERAL SUPPORT	
P.O. BOX 501				
PONDER, TX 76259				5,000.
RADY CHILDRENS HOSPITAL FOUNDATION, SD 3020 CHILDREN'S WAY MC 5005	NONE	PC	GENERAL SUPPORT	
SAN DIEGO, CA 92123				250.
RADY CHILDRENS HOSPITAL FOUNDATION, SD	NONE	PC	GENERAL SUPPORT	
3020 CHILDREN'S WAY MC 5005				
SAN DIEGO, CA 92123				500.
Total from continuation sheets		<u> </u>	<u> </u>	

3a Grants and Contributions Paid During the Ye	ear			
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		
RANCHO COASTAL HUMANE SOCIETY	NONE	₽C	GENERAL SUPPORT	
389 REQUEZA STREET				
ENCINITAS, CA 92024				1,000.
·				,
RAY OF SUNSHINE	NONE	PC	GENERAL SUPPORT	
4571 S. MISSION ROAD FALLBROOK, CA 92028				5,000.
Indibacca, en 52020				3,000.
RAY OF SUNSHINE	NONE	PC	GENERAL SUPPORT	
4571 S. MISSION ROAD				
FALLBROOK, CA 92028				3,900.
REACHING THE HUNGRY	NONE	PC	GENERAL SUPPORT	
1018 RANGER ROAD				
FALLBROOK, CA 92028				400.
RISE UP INDUSTRIES	NONE	PC	GENERAL SUPPORT	
8530 ROLAND ACRES DRIVE				
SANTEE, CA 92071				500.
SAN DIEGO BOTANIC GARDEN	NONE	₽C	COMPREHENSIVE DEVELOPMENT AUDIT & FUNDRAISING PLAN	
P. O. BOX 230005	1.51.2		SUPPORT	
ENCINITAS, CA 92023				6,500.
·				,
GAN DIEGO DOMANIG GARREN	NONE	D.C.	2010 CALA IN MUE CARDEN	
SAN DIEGO BOTANIC GARDEN P. O. BOX 230005	NONE	PC	2019 GALA IN THE GARDEN	
ENCINITAS, CA 92023				9,200.
				2,230.
Total from continuation sheets				

#### Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year				
Recipient  Name and address (home or hypiness)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
SAN DIEGO BOTANIC GARDEN	NONE	PC	GALA IN THE GARDEN	
P. O. BOX 230005				
ENCINITAS, CA 92023				500.
SAN DIEGO BOTANIC GARDEN	NONE	₽C	GENERAL SUPPORT	
P. O. BOX 230005				
ENCINITAS, CA 92023				2,500.
SAN DIEGO BOTANIC GARDEN	NONE	PC	ANNUAL MEMBERSHIP	
P. O. BOX 230005				
ENCINITAS, CA 92023				5,000.
SAN DIEGO BOTANIC GARDEN	NONE	PC	GENERAL SUPPORT	
P. O. BOX 230005				
ENCINITAS, CA 92023				250.
SAN DIEGO BOTANIC GARDEN	NONE	PC	GENERAL SUPPORT	
P. O. BOX 230005				
ENCINITAS, CA 92023				180,000.
SAN DIEGO FIRST CHURCH OF THE NAZARENE	NONE	PC	GENERAL SUPPORT	
3901 LOMALAND DRIVE				
SAN DIEGO, CA 92106				500.
SAN DIEGO FIRST CHURCH OF THE NAZARENE	NONE	PC	TEEN CAMP PROGRAM	
3901 LOMALAND DRIVE				
SAN DIEGO, CA 92106				500.
Total from continuation sheets				

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#### Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Ye Recipient	If recipient is an individual,	Foundation	Durnoss of grant or	
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
	or substantial contributor	rodipiont		
SAN DIEGO FOOD BANK	NONE	PC	GENERAL SUPPORT	
9850 DISTRIBUTION AVE.				
SAN DIEGO, CA 92121				18,000
SAN DIEGO GRANTMAKERS	NONE	₽C	FAREWELL PARTY SUPPORT	
5060 SHOREHAM PLACE, SUITE 350				
SAN DIEGO, CA 92122				600
SAN DIEGO HUNGER COALITION	NONE	PC	GENERAL SUPPORT	
4305 UNIVERSITY AVE. SUITE 545 SAN DIEGO, CA 92105				250
om pipee, en pipe				250
SAN DIEGO LGBT COMMUNITY CENTER	NONE	PC	IHO MAKANA ROWAN'S YPCA GRADUATION	
P.O. BOX 3357				
SANDIEGO, CA 92163				100
SAN DIEGO REPERTORY THEATER	NONE	₽C	LIPINSKY FAMILY SD JEWISH ARTS FESTIVAL	
79 HORTON PLAZA				
SAN DIEGO, CA 92101				17,000
AND DIDGO VOLUM GERVIARIA	NONE	D.G.	ANTENNE PREVENETAN A TAMERAMETAN PROG	
SAN DIEGO YOUTH SERVICES 3255 WING STREET	NONE	PC	SUICIDE PREVENTION & INTERVENTION PROG	
SAN DIEGO, CA 92110				750
SAN DIEGUITO ACADEMY FOUNDATION	NONE	PC	TEAM PARADOX	
P.O. BOX 235109				
ENCINITAS, CA 92023		1		500
Total from continuation sheets				

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

3a Grants and Contributions Paid During the Ye		1	1	
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
	or substantial contributor	recipient		
SAN DIEGUITO HERITAGE MUSEUM	NONE	PC	FLOWER GROWERS EXHIBIT	
450 QUAIL GARDENS DRIVE ENCINITAS, CA 92024				610
SAN ELIJO LAGOON CONSERVANCY P.O. BOX 230634	NONE	PC	PRESIDENT'S COUNCIL LEVEL	
ENCINITAS, CA 92023				1,000
SAN MARCOS PROMISE	NONE	₽C	FOR JOLI ANN LEICHTAG SCHOOL AND PACE	
255 PICO AVENUE SAN MARCAS, CA 92069				500,000
SAN MARCOS PROMISE 255 PICO AVENUE, SUITE 103	NONE	PC	PROJECT LEAP - PROMISE PROM CHALLENGE MATCH	
SAN MARCAS, CA 92069				350
SAN MARCOS PROMISE	NONE	PC	MARIOU BUNDDATIONAL CAMBATON	
255 PICO AVENUE, SUITE 103	NOME	FC	MATCH FUNDRAISING CAMPAIGN	250
SAN MARCAS, CA 92069				250
SAY SAN DIEGO	NONE	₽C	GENERAL SUPPORT	
8755 AERO DRIVE, SUITE 100 SAN DIEGO, CA 92123				300
SCHECK HILLEL COMMUNITY SCHOOL 19000 NE 25TH AVENUE	NONE	₽C	KULANU SCHOLARSHIP FUND	
NORTH MIAMI BEACH, FL 33180				180
Total from continuation sheets				

3a Grants and Contributions Paid During the Yea	If recipient is an individual,			
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
<u> </u>	or substantial contributor	recipient		
SCHUSTERMAN INITIATIVES, INC	NONE	₽C	ROI COMMUNITY	
P.O. BOX 699				
TULSA, OK 74101				5,000
SCRIPPS HEALTH FOUNDATION	NONE	₽C	ANNUAL PRESIDENT'S COUNCIL GIFT	
354 SANTA FE DRIVE				
ENCINITAS, CA 92024				2,500
SD ROOTS SUSTAINABLE FOOD PROJECT	NONE	PC	GENERAL SUPPORT	
P.O. BOX 640				250
IMPERIAL BEACH, CA 91933				250
SD ROOTS SUSTAINABLE FOOD PROJECT	NONE	₽C	GENERAL SUPPORT	
P.O. BOX 640				
IMPERIAL BEACH, CA 91933				250
SEACREST FOUNDATION	NONE	₽C	ANNUAL WOMEN'S GALA	
211 SAXONY ROAD	None			
ENCINITAS, CA 92024				5,000
SEACREST FOUNDATION	NONE	PC	2019 WOMENS AUXILIARY	
211 SAXONY ROAD ENCINITAS, CA 92024				1,000
arearring, on 72021				1,000
SEACREST FOUNDATION	NONE	PC	GENERAL SUPPORT	
211 SAXONY ROAD				
ENCINITAS, CA 92024				180
Total from continuation sheets	I	1		

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
wante and address (nome of business)	or substantial contributor	recipient		
SEACREST FOUNDATION	NONE	PC	GENERAL SUPPORT	
211 SAXONY ROAD				
ENCINITAS, CA 92024				180.
SEACREST FOUNDATION	NONE	PC	MEMBERSHIP	
211 SAXONY ROAD				
ENCINITAS, CA 92024				2,500.
SEEDS OF PEACE	NONE	PC	JERUSALEM YOUTH CHORUS' - SINGING CAMP	
370 LEXINGTON AVENUE SUITE 1201				
NEW YORK, NY 10017				4,000.
SHALOM INSTITUTE CAMP & CONFERENCE	NONE	PC	SUPPORT PARTICIPATION IN ECOFARM	
1014 S WESTLAKE BOULEVARD, SUITE 14-175				
WESTLAKE VILLAGE, CA 91361				500.
SHARYN GOODSON	NONE	PC	REIMB PADDLE RAISE AT H&S GALA	
3473 CAMINO VALENCIA				1 000
CARLSBAD, CA 92009				1,000.
SOILLE SAN DIEGO HEBREW DAY SCHOOL	NONE	PC	SUPPORT ANNUAL GALA	
3630 AFTON ROAD SAN DIEGO, CA 92123				1,800.
bin biloo, ch 32123				1,000.
SOILLE SAN DIEGO HEBREW DAY SCHOOL	NONE	PC	PARTNERSHIP COASTAL ROOTS & SOILLE SDHDS 2019-2020	
3630 AFTON ROAD SAN DIEGO, CA 92123				8,000.
				-,
Total from continuation sheets		·····		

If recipient is an individual,	Foundation	Purpose of grant or	
any foundation manager or substantial contributor	status of recipient	contribution	Amount
none	PC	GENERAL SUPPORT	
			20,000
NONE	₽C	ANNUAL GALA-ALUMNI UNDERWRITER	1.000
			1,000
NONE	PC	GENERAL SUPPORT	500
NONE	PC	GENERAL SUPPORT	500
NONE	PC	ANTISEMITISM CAMPAIGN	500
NONE	PC	HEALTH CARE PARTNERS PROGRAM	500
NONE	PC	IHO MILEA MERRITT - ORANGE COUNTY RACE	500
	NONE NONE NONE	NONE PC  NONE PC  NONE PC  NONE PC  NONE PC	NONE PC GENERAL SUPPORT  NONE PC ANNUAL GALA-ALUMNI UNDERWRITER  NONE PC GENERAL SUPPORT  NONE PC ANTISEMITISM CAMPAIGN  NONE PC HEALTH CARE PARTNERS PROGRAM

#### Part XV Supplementary Information (continued)

SWEETWATER UNION HIGH SCHOOL DISTRICT 130 FIFTH AVENUE CHULA VISTA, CA 91911  7  SWEETWATER UNION HIGH SCHOOL DISTRICT NONE PC HILLTOP HIGH SCHOOL FOOTBALL TEAM  7  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YEAR END CAMPAIGN PC FALLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YORK, NY 10001  1,8  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YEAR END CAMPAIGN 1,8  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YEAR END CAMPAIGN 1,0  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YEAR END CAMPAIGN 1,0  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YEAR END CAMPAIGN 1,0  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YEAR END CAMPAIGN 1,0  TABLET MAGAZINE/NEXT BOOK INC PC SEMERAL SUPPORT 5,0  TARBUTON NONE PC FOR STARTUP18  TEMPLE SINAI 2808 SUMMIT STREET	3a Grants and Contributions Paid During the Year Recipient	If recipient is an individual,	Foundation	Durnoss of grant or	
SWEETWATER UNION HIGH SCHOOL DISTRICT  NONE  PC  NILLTOP HIGH SCHOOL POOTBALL TEAM  7  SWEETWATER UNION HIGH SCHOOL DISTRICT  NONE  PC  NILLTOP HIGH SCHOOL POOTBALL TEAM  7  SWEETWATER UNION HIGH SCHOOL DISTRICT  NONE  PC  NILLTOP HIGH SCHOOL POOTBALL TEAM  1130 FIFTH AVENUE  CHULA VISTA, CA 91911  7  TABLET MAGAZINE/NEXT BOOK INC  PO. BOX 20079  NEW YORK, NY 10001  1,0  TABLET MAGAZINE/NEXT BOOK INC  PO. BOX 20079  NEW YORK, NY 10001  1,0  TABLET MAGAZINE/NEXT BOOK INC  PO. BOX 20079  NEW YORK, NY 10001  1,0  TAHIRIH JUSTICE CENTER  6402 ABLINGTON BLUD, SUITE 300  FALLS CHURCH, VA 22042  5,0  TARBUTON  PALLS CHURCH, VA 22042  6  TEMBUL SINAI  NONE  PC  SUILDING JEWISH BRIDGES	Name and address (home or business)	any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
1330 FIFTH AVENUE CHULA VISTA, CA 91911  SWEETWATER UNION HIGH SCHOOL DISTRICT NONE PC HILLTOP HIGH SCHOOL FOOTBALL TEAM  1330 FIFTH AVENUE CHULA VISTA, CA 91911  7  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YORK, NY 10001  1,8  TABLET MAGAZINE/NEXT BOOK INC NONE PC INORTHODOX PODCAST  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YORK, NY 10001  1,0  TABLET MAGAZINE/NEXT BOOK INC PC JENERAL SUPPORT  6402 ARLINGTON BLVD. SUITE 300 PALLS CHURCH, VA 22042  5,0  TARBUTON PALLS CHURCH, VA 22042  5,0  TARBUTON PALLS CHURCH, VA 22042  6  TEMPLE SINAI RONE PC BUILDING JENISH BRIDGES					
CHULA VISTA, CA 91911  SWEETWATER UNION HIGH SCHOOL DISTRICT NONE  PC HILLTOP HIGH SCHOOL FOOTBALL TEAM  1130 FIFTH AVENUE  CHULA VISTA, CA 91911  7  TABLET MAGAZINE/NEXT BOOK INC PC. DOX 20079  NONE  TABLET MAGAZINE/NEXT BOOK INC NONE  PC UNORTHODOX PODCAST  1,8  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079  NEW YORK, NY 10001  1,0  TARRIH JUSTICE CENTER NONE  FC SENERAL SUPPORT  FALLS CHURCH, VA 22042  5,0  TARBUTON NONE  PC FOR STARTUP18  FOR STARTUP18  6  TEMBLE SINAI NONE  PC BUILDING JEWISH BRIDGES	SWEETWATER UNION HIGH SCHOOL DISTRICT	NONE	PC	HILLTOP HIGH SCHOOL FOOTBALL TEAM	
SWEETWATER UNION HIGH SCHOOL DISTRICT  NONE  PC  HILLTOP HIGH SCHOOL FOOTBALL TEAM  7  TABLET MAGAZINE/NEXT BOOK INC  P.O. BOX 20079  NEW YORK, NY 10001  TABLET MAGAZINE/NEXT BOOK INC  P.O. BOX 20079  NEW YORK, NY 10001  TABLET MAGAZINE/NEXT BOOK INC  P.O. BOX 20079  NEW YORK, NY 10001  TABLET MAGAZINE/NEXT BOOK INC  P.O. BOX 20079  NEW YORK, NY 10001  TAHLIH JUSTICE CENTER  NONE  PC  JENERAL SUPPORT  402 ARLINGTON BLVD. SUITE 300  FALLS CHURCH, VA 22042  TARBUTON  NONE  PC  FOR STARTUP18  6  TEMBLE SINAI  TEMBLE SINAI  NONE  PC  BUILDING JEWISH BRIDGES					
CRULA VISTA, CA 91911  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YORK, NY 10001  TABLET MAGAZINE/NEXT BOOK INC NONE PC UNORTHODOX FODCAST  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YORK, NY 10001  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YORK, NY 10001  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YORK, NY 10001  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079  NONE PC DENERAL SUPPORT  FOR STARTUP18  FOR STARTUP18  TARBUTON PA41 SAXONY ROAD FALLS CHURCH, VA 22042  FOR STARTUP18  TEMPLE SINAI SOUMLI STREET	CHULA VISTA, CA 91911				750
TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YORK, NY 10001  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YORK, NY 10001  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YORK, NY 10001  TAHIRIH JUSTICE CENTER 6402 ARLINOTON BLVD. SUITE 300 FALLS CHURCH, VA 22042  TARBUTON NONE PC FOR STARTUP18  TARBUTON P441 SAXONY ROAD ENCINITAS, CA 92024  TEMPLE SINAI 2808 SUMMIT STREET	SWEETWATER UNION HIGH SCHOOL DISTRICT	NONE	PC	HILLTOP HIGH SCHOOL FOOTBALL TEAM	
TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YORK, NY 10001  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YORK, NY 10001  TAHIRIH JUSTICE CENTER 6402 ARLINGTON BLVD, SUITE 300 FALLS CHURCH, VA 22042  TARBUTON P441 SAXONY ROAD ENCINITAS, CA 92024  TEMPLE SINAI 2808 SUMMIT STREET  NONE PC YEAR END CAMPAIGN YEAR END CAMPAIGN  SENERAL SUPPORT  FOR STARTUP18  BUILDING JEWISH BRIDGES	1130 FIFTH AVENUE				
P.O. BOX 20079  NEW YORK, NY 10001  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079  NEW YORK, NY 10001  TAHIRIH JUSTICE CENTER 6402 ARLINGTON BLVD. SUITE 300 FALLS CHURCH, VA 22042  TARBUTON P441 SAXONY ROAD ENCINITAS, CA 92024  TEMPLE SINAI 2808 SUMMIT STREET  NONE PC JUNORTHODOX PODCAST  SENERAL SUPPORT  FOR STARTUP18  FOR STARTUP18  BUILDING JEWISH BRIDGES	CHULA VISTA, CA 91911				750
P.O. BOX 20079  NEW YORK, NY 10001  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079  NEW YORK, NY 10001  TAHIRIH JUSTICE CENTER 6402 ARLINGTON BLVD. SUITE 300 FALLS CHURCH, VA 22042  TARBUTON P441 SAXONY ROAD ENCINITAS, CA 92024  TEMPLE SINAI 2808 SUMMIT STREET  NONE PC JUNORTHODOX PODCAST  SENERAL SUPPORT  FOR STARTUP18  FOR STARTUP18  BUILDING JEWISH BRIDGES	MADIEM WACANTHE/NEWM DOOF THE	NONE	D.C.	WEAD END CAMBAIGN	
NEW YORK, NY 10001  TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YORK, NY 10001  TAHIRIH JUSTICE CENTER 6402 ARLINGTON BLVD. SUITE 300 FALLS CHURCH, VA 22042  TARBUTON P441 SAXONY ROAD ENCINITAS, CA 92024  TEMPLE SINAI 2808 SUMMIT STREET  NONE PC JNORTHODOX PODCAST  PC JNORTHODOX PODCAST  SENERAL SUPPORT  FC FOR STARTUP18  FC BUILDING JEWISH BRIDGES		NONE		ILAR END CAMPAIGN	
P.O. BOX 20079  NEW YORK, NY 10001  TAHIRIH JUSTICE CENTER 6402 ARLINGTON BLVD. SUITE 300  FALLS CHURCH, VA 22042  TARBUTON P441 SAXONY ROAD ENCINITAS, CA 92024  TEMPLE SINAI 2808 SUMMIT STREET  NONE  PC SENERAL SUPPORT  SENERAL SUPPORT  FOR STARTUP18  A  BUILDING JEWISH BRIDGES					1,800
P.O. BOX 20079  NEW YORK, NY 10001  TAHIRIH JUSTICE CENTER 6402 ARLINGTON BLVD. SUITE 300  FALLS CHURCH, VA 22042  TARBUTON P441 SAXONY ROAD ENCINITAS, CA 92024  TEMPLE SINAI 2808 SUMMIT STREET  NONE  PC SENERAL SUPPORT  SENERAL SUPPORT  FOR STARTUP18  A  BUILDING JEWISH BRIDGES					
NEW YORK, NY 10001  TAHIRIH JUSTICE CENTER 6402 ARLINGTON BLVD. SUITE 300 FALLS CHURCH, VA 22042  TARBUTON P441 SAXONY ROAD ENCINITAS, CA 92024  NONE PC BUILDING JEWISH BRIDGES  1,0  SENERAL SUPPORT  FOR STARTUP18  FOR STARTUP18	TABLET MAGAZINE/NEXT BOOK INC	NONE	PC	UNORTHODOX PODCAST	
TAHIRIH JUSTICE CENTER 6402 ARLINGTON BLVD. SUITE 300 FALLS CHURCH, VA 22042  TARBUTON P441 SAXONY ROAD ENCINITAS, CA 92024  TEMPLE SINAI 2808 SUMMIT STREET  NONE PC SENERAL SUPPORT  FOR STARTUP18  FOR STARTUP18  6  BUILDING JEWISH BRIDGES					
6402 ARLINGTON BLVD. SUITE 300  FALLS CHURCH, VA 22042  TARBUTON P441 SAXONY ROAD ENCINITAS, CA 92024  TEMPLE SINAI 2808 SUMMIT STREET  PC FOR STARTUP18  6	NEW YORK, NY 10001				1,000
6402 ARLINGTON BLVD. SUITE 300  FALLS CHURCH, VA 22042  TARBUTON P441 SAXONY ROAD ENCINITAS, CA 92024  TEMPLE SINAI 2808 SUMMIT STREET  PC BUILDING JEWISH BRIDGES	TANTETH THEFTOE CENTER	NONE	PC	GENERAL SUPPORT	
TARBUTON P441 SAXONY ROAD ENCINITAS, CA 92024  TEMPLE SINAI 2808 SUMMIT STREET  NONE PC FOR STARTUP18  FOR STARTUP18  BUILDING JEWISH BRIDGES		Non2		SEMERAL BOLLOWS	
P441 SAXONY ROAD ENCINITAS, CA 92024  TEMPLE SINAI 2808 SUMMIT STREET  ROAD  PC BUILDING JEWISH BRIDGES	FALLS CHURCH, VA 22042				5,000
P441 SAXONY ROAD ENCINITAS, CA 92024  TEMPLE SINAI 2808 SUMMIT STREET  ROAD  PC BUILDING JEWISH BRIDGES					
ENCINITAS, CA 92024  TEMPLE SINAI 2808 SUMMIT STREET  NONE  PC BUILDING JEWISH BRIDGES		NONE	PC	FOR STARTUP18	
TEMPLE SINAI 2808 SUMMIT STREET  NONE PC BUILDING JEWISH BRIDGES					600
2808 SUMMIT STREET					
	TEMPLE SINAI	NONE	₽C	BUILDING JEWISH BRIDGES	
OAKLAND, CA 94609 3	2808 SUMMIT STREET				
	OAKLAND, CA 94609				360

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Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year Recipient	If recipient is an individual,	Foundation	Durnoss of grant or	
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
	or substantial contributor	rooipione		
TEMPLE SOLEL	NONE	PC	SUMMER CAMP	
3575 MANCHESTER AVE.				
CARDIFF BY THE SEA, CA 92007				2,600
TRUE BLUE ANIMAL RESCUE	NONE	PC	GENERAL SUPPORT	
P.O. BOX 1107				
BRENHAM, TX 77837				500
TOOL TOWNS TOOL				
UCSD FOUNDATION N9500 GILMAN DRIVE, #0937	NONE	PC	BREAKFAST OF CHAMPIONS CANCER FUND.	
LA JOLLA, CA 92093				6,400
,				,
UCSD FOUNDATION	NONE	PC	BIOMEDICAL RESEARCH BUILDING	
N9500 GILMAN DRIVE, #0937				
LA JOLLA, CA 92093				500,000
ULYSSES S. GRANT HIGH SCHOOL	NONE	₽C	US GRANT '67 SCHOLARSHIP FUND	
1300 OXNARD STREET	NONE		ob GRANI 07 BellollARBIIII FOND	
VALLEY GLEN, CA 91401				1,000
UNITED STATES ASSOC OF BLIND ATHLETES	NONE	PC	AMY DIXON'S CAMP-NO SIGHT, NO LIMBS	
1 OLYMPIC PLAZA COLORADO SPRINGS, CA 91913				1,000
COLORADO SFRINGS, CA 91913				1,000
UPSTART BAY AREA	NONE	PC	THE COLLABORATORY 2019 SPONSORSHIP	
1111 BROADWAY 3RD FLOOR				
OAKLAND, CA 94607				1,800
Total from continuation sheets	I	1		

57

823641 04-01-18

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
- Hame and address (nome of business)	or substantial contributor	recipient		
URBAN ADAMAH	NONE	₽C	JFN PRE-CONFERENCE APPRECIATION	
1050 PARKER STREET	1.52.2			
BERKELEY, CA 94710				1,000.
,				,
VALLEY CREEK CHURCH	NONE	PC	FLOWER MOUND CAMPUS	
5800 LONG PRAIRIE ROAD				
FLOWER MOUND, TX 75028				5,000.
Total from continuation sheets	•	•	•	

#### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Employer identification number

2018

LEICHTAG FOUNDATION 33-0466189 Organization type (check one): Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an 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 sections 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 any 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; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \_\_\_\_\_\_ 🕨 \$ \_ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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

 $LHA \quad \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. } \\$ 

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Employer identification number

LEICHTAG FOUNDATION

33-0466189

111 T C11	IAG FOUNDATION	33	0400107
Part I	Contributors (see instructions). Use duplicate copies of Part I if addit	ional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WALTER & ELISE HAAS FUND  ONE LOMBARD STREET SUITE 305  SAN FRANCISCO, CA 94111		Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CHARLES & LYNN SCHUSTERMAN FAMILY FOUNDATION  P.O. BOX 51  TULSA, OK 74101		Person X Payroll
(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 noncash contributions.)

#### LEICHTAG FOUNDATION

33-0466189

Part II	Noncash Property (see instructions). Use duplicate copies of P	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
		<del></del>	
		\$	

Name of organization **Employer identification number** 33-0466189 LEICHTAG FOUNDATION Part III 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 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 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

#### 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

► Go to www.irs.gov/Form2220 for instructions and the latest information.

2018

#### LEICHTAG FOUNDATION

Employer identification number 33-0466189

Note: Generally, the corporation is not 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.

14. Otherwise, enter -0-  17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18  18 Overpayment. If line 10 is less than line 15, subtract line 10	Part I Required Annual Payment		n, but <b>do not</b> attach F	OIIII ZZZO.				
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  2	1 Total tax (see instructions)						1	84,310.
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  2	2 a Personal holding company tax (Schedule PH (Form 1120) lin	e 26)	included on line 1	و ا	<u>,  </u>			
c Credit for federal tax paid on fuels (see instructions) c Credit for federal tax paid on fuels (see instructions) d Total. Add lines 2a 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 does not owe the penalty does not owe the penalty 4 Enter the tax shown on the corporation's 2017 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 60 , 125.  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 III Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even If it does not owe a perially. See instructions  The corporation is using the annualized income installment method.  Tax The corporation is using the annualized income installment method.  Tax The corporation is using the annualized income installment method.  Part III Figuring the Underpayment  (a) (b) (c) (d)  Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th; form 990-PF files: Use 5th month), 6th, 9th, and 12th months of the corporations is 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) not, enter the amounts 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 before going to the next column.  13 29,815. 29,815. 124,815. 154,815.  14 Add amounts on lines 16 and 17 of the preceding column 14 and 15 and 15 and 15 and 15 and 15 and 15				······	_		-	
c Credit for federal tax paid on fuels (see instructions)  d Total. Add lines 2a 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 does not owe the penalty  4. Enter the tax shown on the corporation's 2017 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  7. 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  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  9. 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  10. The corporation is using the adjusted seasonal installment method.  11. The corporation is using the adjusted seasonal installment method.  12. The corporation is using the annualized income installment method.  13. The corporation is using the annualized income installment based on the prior year's tax.  14. The corporation is a Thomator of the corporation's figuring its first required installment based on the prior year's tax.  15. The corporation is a large corporation's figuring its first required installment based on the prior year's tax.  16. The corporation is a large corporation's figuring its first required installment based on the prior year's tax.  17. The corporation is a first product of the corporation's tax year  18. The corporation's tax year  19. On 15. The spirit of the line 15. The box on line 8 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  19. On 15. The spirit of the line 15 the production of these boxes are checked, enter 25% (0.25) of line 5 above in each column  10. Estimated tax paid or credited for each period. For column	, , , ,			2	ь			
d Total. Add lines 2a 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 does not owe the penalty  4 Enter the tax shown on the corporation's 2017 income tax return. See instructions. Gaution; 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  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 III Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty. See instructions.  6 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 (a) through (d) the 15th day of the 4th (Form 990-PF filers). Use 5th month), 6th, 9th, and 12th months of the corporation is 14th and 12th months of the corporation is 14th annualized income installment method.  10 Required installments. If the box on line 6 and/or line 7 above is checked, either 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 before going to the next column.  10 1 29 , 815 . 95 , 000 . 30 , 000 . 30 , 000 . Complete lines 12 through 18 of one column before going to the next column.  11 29 , 815 . 29 , 815 . 124 , 815 . 154 , 815 . 154 , 815 . 16 . 194 .	(8)				-			
d Total. Add lines 2a 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 does not owe the penalty  4 Enter the tax shown on the corporation's 2017 income tax return. See instructions. Gaution; 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  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 III Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty. See instructions.  6 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 (a) through (d) the 15th day of the 4th (Form 990-PF filers). Use 5th month), 6th, 9th, and 12th months of the corporation is 14th and 12th months of the corporation is 14th annualized income installment method.  10 Required installments. If the box on line 6 and/or line 7 above is checked, either 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 before going to the next column.  10 1 29 , 815 . 95 , 000 . 30 , 000 . 30 , 000 . Complete lines 12 through 18 of one column before going to the next column.  11 29 , 815 . 29 , 815 . 124 , 815 . 154 , 815 . 154 , 815 . 16 . 194 .	<b>c</b> Credit for federal tax paid on fuels (see instructions)			2	c			
3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty 4 Enter the tax shown on the corporation's 2017 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  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  9 Part II   Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty. See instructions.  1 The corporation is using the adjusted seasonal installment method.  2 The corporation is using the adjusted seasonal installment method.  3 The corporation is using the adjusted seasonal installment method.  4 The corporation is using the adjusted seasonal installment method.  5 The corporation is using the adjusted seasonal installment method.  8 The corporation is using the adjusted seasonal installment method.  9 Installment due dates. Enter in columns (a) through (b) the 15th day of the 4th (Ferm 990-PF Hiers: Use 5th month), 6th, 9th, and 12th months of the corporation is a tay ear.  9 02/15/19 03/15/19 06/15/19 09/15/19 09/15/19 09/15/19 09/15/19 09/15/19 10 Required installments. If the box on line 6 (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 before going to the next column.  10 Enter amount, If any, from line 18 of the preceding column before going to the next column.  11 Enter amount, If any, from line 18 of the preceding column but a form line 11, 12 gar or less, enter -0  15 29,815. 29,815. 124,815. 154,815.  16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0  16 29,815. 29,815. 124,815. 154,815.  17 Underpayment. Hilline 10 is less than line 15, subtract line 10 line 10, subtract							2d	
# Enter the tax shown on the corporation's 2017 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.  # Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, so that is a considerable in the amount from line 3 or line 4. If the corporation is using the annualized income installment method.  # The corporation is using the adjusted seasonal installment method.  # The corporation is using the annualized income installment method.  # The corporation is using the annualized income installment method.  # The corporation is using the annualized income installment method.  # The corporation is a large corporation* figuring its first required installment based on the prior year's tax.  # Part III   Figuring the Underpayment  # (a)   (b)   (c)   (d)    # Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year 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 before going to the next column.  # 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.  # Add dines 11 and 12  # Add amounts on lines 16 and 17 of the preceding column 13 Madd lines 11 and 12  # Add amounts on lines 16 and 17 of the preceding column 14 of the internal subtract line 18 of the preceding column 14 or line 15 is zero, subtract line 13 from line 11.  # Underwise, enter -0-  # Underwise, enter -0-  # Underwise, of the line 10 is less than or equal to line 10, subtract line 15 from line 13. It is less than or equal to line 10, subtract lin	3 Subtract line 2d from line 1. If the result is less than \$500, do	not c	omplete or file this form.	The corporation	n			
4 60,125.  8 required annual payment. Enter the axe 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  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 it does not owe a penalty. See instructions.  1 The corporation is using the adjusted seasonal installment method.  2 The corporation is using the adjusted seasonal installment method.  3 The corporation is using the annualized income installment method.  4 60,125.  Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not ove a penalty. See instructions.  4 60,125.  Part III required installment in the corporation is using the adjusted seasonal installment method.  5 6 60,125.  Part III required installment is using the adjusted seasonal installment method.  8 2 The corporation is a 'large corporation' figuring its first required installment based on the prior year's tax.  Part III required the dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF files:  10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	does not owe the penalty						3	84,310.
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   60 , 125.								
enter the amount from line 3	or the tax year was for less than 12 months, skip this line a	nd en	ter the amount from line	e 3 on line 5			4	60,125.
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 it does not owe a penalty. See instructions.  The corporation is using the adjusted seasonal installment method. The corporation is using the annualized income installment method. The corporation is using the annualized income installment method. The corporation is using the annualized income installment method. The corporation is using the annualized income installment method.  The corporation is using the annualized income installment method.  The corporation is using the annualized income installment method.  The corporation is using the annualized income installment method.  The corporation is using the annualized income installment method.  The corporation is using the annualized income installment method.  The corporation is using the annualized income installment method.  The corporation is using the annualized income installment method.  The corporation is using the annualized income installment method.  The corporation is using the andjusted installment method.  The corporation is using the anjusted installment method.  The corporation is using the annualized installment method.  The corporation is using t				-				60 405
even if it does not owe a penalty. See instructions.    The corporation is using the adjusted seasonal installment method.	enter the amount from line 3							60,125.
The corporation is using the adjusted seasonal installment method.   The corporation is using the annualized income installment method.   The corporation is using the annualized income installment method.   The corporation is using the annualized income installment based on the prior year's tax.		w tha	t apply. If any boxes are	checked, the c	orporation	n <b>must</b> file Form 2	220	
7 X The corporation is using the annualized income installment method. 8 X The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.  Part III Figuring the Underpayment  (a) (b) (c) (d)  9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: 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 29,815. 29,815. 124,815. 154,815.  14 Add amounts on lines 16 and 17 of the preceding column 14. Otherwise, enter -0-  15 If the amount on line 15 is zero, subtract line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18  16 Overpayment. If line 10 is less than line 15, subtract line 10  17 Overpayment. If line 10 is less than line 15, subtract line 10  18 Overpayment. If line 10 is less than line 15, subtract line 10								
8								
Part III Figuring the Underpayment  (a) (b) (c) (d)  Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year  Pagured 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 enter 25% (0,25) of line 5 above in each column before going to the next 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  12 Enter amount, if any, from line 18 of the preceding column before going to the next 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. If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0. If the amount on line 15 is zero, subtract line 10 line 120 fthe next column. Otherwise, go to line 18  18 Overpayment. If line 10 is less than line 15, subtract line 10 Overpayment. If line 10 is less than line 15, subtract line 10								
Subtract line 14 from line 15 is less than or equal to line 10 is less than or of the amount on line 15 is zero, subtract line 13 from line 10. Then go to line 18 of voreyayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 18 of voreyayment. If line 15 is less than ine 15, subtract line 10 is less than line 16, subtra		st requ	uired installment based o	on the prior yea	r's tax.			
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF files: 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 15 Subtract line 14 from line 13. If zero or less, enter -0-  15 If the amount on line 15 is zero, subtract line 10 Subtract line 15 from line 10. Then go to line 18 Overpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10 sless than line 15, subtract line 10 Overpayment. If line 10 is less than line 15, subtract line 10 Overpayment. If line 10 is less than line 15, subtract line 10	Part III   Figuring the Onderpayment		(a)	<b>/</b> b)		[ (a)		(4)
(d) the 15th day of the 4th (Form 990-PF filers: 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 for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 6 above in each column to 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. If zero or less, enter -0- If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- If Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18  Overpayment. If line 10 is less than line 15, subtract line 10 overpayment. If line 10 is less than line 15, subtract line 10 overpayment. If line 10 is less than line 15, subtract line 10 overpayment. If line 10 is less than line 15, subtract line 10 overpayment. If line 10 is less than line 15, subtract line 10 overpayment. If line 10 is less than line 15, subtract line 10 overpayment. If line 10 is less than line 15, subtract line 10 overpayment. If line 10 is less than line 15, subtract line 10 overpayment. If line 10 is less than line 15, subtract line 10 overpayment. If line 10 is less than line 15, subtract line 10 overpayment. If line 10 is less than line 15, subtract line 10 overpayment. If line 10 is less than line 15, subtract line 10 overpayment. If line 10 is less than line 15, subtract line 10 overpayment. If line 15 is less than line 15, subtract line 10 overpayment. If line 15 is less than line 15, subtract line 10 overpayment. If line 15 is less than line 15, subtract line 10 overpayment	Q Installment due dates Enter in columns (a) through	$\vdash$	(a)	(0)		(6)		(a)
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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  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, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18  Overpayment. If line 10 is less than line 15, subtract line 10 from line 10, subtract line 10 is less than line 15, subtract line 10 is less than line 10.		۲	02/13/13	03/13	,, _,	00,13,		03/13/13
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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, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18  16 Overpayment. If line 10 is less than line 15, subtract line 10  17 Underpayment. If line 10 is less than line 15, subtract line 10  18 Overpayment. If line 10 is less than line 15, subtract line 10								· · · · · · · · · · · · · · · · · · ·
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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 16   17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 17   18 Overpayment. If line 10 is less than line 15, subtract line 10	13 Add lines 11 and 12	13		29	815.	124,8	315.	154,815.
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, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18  17 Overpayment. If line 10 is less than line 15, subtract line 10		14						
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17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	16 If the amount on line 15 is zero, subtract line 13 from line							
subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18		16			_			
column. Otherwise, go to line 18								
18 Overpayment. If line 10 is less than line 15, subtract line 10	subtract line 15 from line 10. Then go to line 12 of the next					1		
		17						
			00 01=		04-		_	
from line 15. Then go to line 12 of the next column							315.	

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** (2018)

#### 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 4/15/2018 and before 7/1/2018	21					
22	Underpayment on line 17 x Number of days on line 21 x 5% (0.05)	22	\$	\$	\$	\$	
23	Number of days on line 20 after 06/30/2018 and before 10/1/2018	23					
24	Underpayment on line 17 x Number of days on line 23 x 5% (0.05) $\dots$ 365	24	\$	\$	\$	\$	
25	Number of days on line 20 after 9/30/2018 and before 1/1/2019	25					
26	Underpayment on line 17 x Number of days on line 25 x 5% (0.05) $\dots$ 365	26	\$	\$	\$	\$	
27	Number of days on line 20 after 12/31/2018 and before 4/1/2019	27					
28	Underpayment on line 17 x Number of days on line 27 x 6% (0.06) $\dots$ 365	28	\$	\$	\$	\$	
29	Number of days on line 20 after 3/31/2019 and before 7/1/2019	29					
30	Underpayment on line 17 x Number of days on line 29 x *% 365	30	\$	\$	\$	\$	
31	Number of days on line 20 after 6/30/2019 and before 10/1/2019	31					
32	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$	\$	
33	Number of days on line 20 after 9/30/2019 and before 1/1/2020	33					
34	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$	\$	
35	Number of days on line 20 after 12/31/2019 and before 3/16/2020	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	\$	\$	\$	\$	
38	<b>Penalty.</b> Add columns (a) through (d) of line 37. Enter the to line for other income tax returns		ere and on Form 1120,		able	38 \$	0.

<sup>\*</sup> 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** (2018)

Form 2220 (2018) FORM 990-PF Page 3

## Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method See instructions.

**Form 1120S filers:** For lines 1, 2, 3, and 21 "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

#### Part I Adjusted Seasonal Installment Method

**Caution:** Use this method only if the base period percentage for any 6 consecutive months is at least 70%. See instructions.

		(a)	(b)	(c)	(d)
1 Enter taxable income for the following periods.		First 3 months	First 5 months	First 8 months	First 11 months
a Tax year beginning in 2015	1a				
<b>b</b> Tax year beginning in 2016	1b				
c Tax year beginning in 2017	1c				
2 Enter taxable income for each period for the tax year beginning in					
2018. See the instructions for the treatment of extraordinary items	2				
		First 4 months	First 6 months	First 9 months	Entire year
3 Enter taxable income for the following periods.		Thou Thionaid	THOSE O MONGIO	Thor o monaio	Entire your
<b>a</b> Tax year beginning in 2015	3a				
h Taurusan haninging in 0040	,,				
<b>b</b> Tax year beginning in 2016	3b				
c Tax year beginning in 2017	3c				
4 Divide the amount in each column on line 1a by the	36				
amount in column (d) on line 3a	4				
5 Divide the amount in each column on line 1b by the					
amount in column (d) on line 3b	5				
6 Divide the amount in each column on line 1c by the					
amount in column (d) on line 3c	6				
( )					
7 Add lines 4 through 6	7				
8 Divide line 7 by 3.0	8				
9a Divide line 2 by line 8	9a				
<b>b</b> Extraordinary items (see instructions)	9b				
<b>c</b> Add lines 9a and 9b	9с				
O Figure the tax on the amt on In 9c using the instr for Form					
1120, Sch J, line 2, or comparable line of corp's return $\dots$	10				
1a Divide the amount in columns (a) through (c) on line 3a					
by the amount in column (d) on line 3a	11a				
<b>b</b> Divide the amount in columns (a) through (c) on line 3b	l l				
by the amount in column (d) on line 3b	11b				
c Divide the amount in columns (a) through (c) on line 3c	l l				
by the amount in column (d) on line 3c	11c				
2 Add lines 11a through 11c	12				
3 Divide line 12 by 3.0	13				
by columns (a) through (c) of line 13. In column (d), enter					
11 16 11 40 1 41	14				
the amount from line 10, column (d)  5 Enter any alternative minimum tax for each payment	'				
period. See instructions	15				
p					
6 Enter any other taxes for each payment period. See instr.	16				
7 Add lines 14 through 16	17				
8 For each period, enter the same type of credits as allowed					
on Form 2220, lines 1 and 2c. See instructions	18				
9 Total tax after credits. Subtract line 18 from line 17. If					
zero or less, enter -0-	19				

Form 2220 (2018)

Form 2220 (2018) FORM 990-PF Page 4

## Part II Annualized Income Installment Method

		(a)	(b)	(c)	(d)
		First 2	First 3	First 6	First 9
20 Annualization periods (see instructions)	20	months	months	months	months
21 Enter taxable income for each annualization period. See					
instructions for the treatment of extraordinary items $\dots$	21				
22 Annualization amounts (see instructions)	22	6.000000	4.000000	2.000000	1.333330
23a Annualized taxable income. Multiply line 21 by line 22	23a				
<b>b</b> Extraordinary items (see instructions)	23b				
c Add lines 23a and 23b	23c				
24 Figure the tax on the amount on line 23c using the					
instructions for Form 1120, Schedule J, line 2,					
or comparable line of corporation's return	24				
25 Enter any alternative minimum tax for each payment					
period (see instructions)	25				
26 Enter any other taxes for each payment period. See instr.	26				
27. Total tay, Add lines 24 through 26	27				
27 Total tax. Add lines 24 through 26	21				
on Form 2220, lines 1 and 2c. See instructions	28				
29 Total tax after credits. Subtract line 28 from line 27. If	20				
zero or less, enter -0-	29				
<b>30</b> Applicable percentage	30	25%	50%	75%	100%
<b>31</b> Multiply line 29 by line 30	31				
Part III Required Installments					
Note: Complete lines 32 through 38 of one column		1st	2nd	3rd	4th
before completing the next column.		installment	installment	installment	installment
32 If only Part I or Part II is completed, enter the amount in					
each column from line 19 or line 31. If both parts are					
completed, enter the <b>smaller</b> of the amounts in each		_	_	_	_
column from line 19 or line 31	32	0.	0.	0.	0.
<b>33</b> Add the amounts in all preceding columns of line 38.					
See instructions	33				
34 Adjusted seasonal or annualized income installments.					
Subtract line 33 from line 32. If zero or less, enter -0- $\dots$	34				
<b>35</b> Enter 25% (0.25) of line 5 on page 1 of Form 2220 in					
each column. Note: "Large corporations," see the					04 000

Form **2220** (2018)

0.

21,077.

63,233.

84,310.

\*\* ANNUALIZED INCOME INSTALLMENT METHOD USING STANDARD OPTION

0.

15,031.

15,031.

35

36

37

38

27,124.

15,031.

42,155.

0.

21,078.

42,155.

63,233

instructions for line 10 for the amounts to enter .....

36 Subtract line 38 of the preceding column from line 37 of

**38 Required installments.** Enter the **smaller** of line 34 or line 37 here and on page 1 of Form 2220, line 10.

the preceding column

**37** Add lines 35 and 36

See instructions

FORM 990-PF INTER	EST ON SAVING	GS AND TEMPOR	ARY CASH	INVESTMENTS	STATEMENT	1
SOURCE		(A) REVENUE PER BOOK		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
INTEREST INCOME		1,9	13.	1,913.		
TOTAL TO PART I, L	INE 3	1,9	13.	1,913.		
FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SEC	URITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOK			
DIVIDEND INCOME	2,628,692.	0.	2,628,69	2. 2,628,69	92.	
TO PART I, LINE 4	2,628,692.	0.	2,628,69	2,628,69	92.	
FORM 990-PF		RENTAL INCOM	E		STATEMENT	3
KIND AND LOCATION (	OF PROPERTY			ACTIVITY NUMBER	GROSS RENTAL INCO	ME
RENTAL INCOME				1	1,752,36	4.
TOTAL TO FORM 990-1	PF, PART I, 1	LINE 5A			1,752,36	<del></del>

FORM 990-PF G	AIN OR (LOSS)	FROM SALE O	F ASSETS	STA	гемент 4
(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
CHARLES SCHWAB PUBLICLY TRADED SECURITIES	<del>-</del>		PURCHASED	01/01/18	09/30/19
(B) GROSS	(C) COST OR	(D) EXPENSE O			(F)
SALES PRICE	OTHER BASIS	SALE	DEPREC	. GAIN	OR LOSS
24,694,862.	18,329,063.	· · · · · · · · · · · · · · · · · · ·	0.	0.	6,365,799.
(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
NET GAIN VINTAGE INVEST	— MENTS		PURCHASED	01/01/18	09/30/19
(B) GROSS	(C) COST OR	(D) EXPENSE O	(E)		(F)
SALES PRICE	OTHER BASIS	SALE	DEPREC	. GAIN	OR LOSS
0.	76,097.		0.	0.	-76,097.
(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
NET GAIN JVP OPPORTUNIT	 IES		PURCHASED	01/01/18	09/30/19
(B) GROSS	(C) COST OR	(D) EXPENSE O	(E)		(F)
SALES PRICE	OTHER BASIS	SALE	DEPREC	. GAIN	OR LOSS
31,294.	0.		<u> </u>	0.	31,294.

(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRE	D DATE SOI
EQUIPMENT DISPOSAL		– F	URCHASED	01/01/1	8 09/30/1
	(C)	(D)	(E)		(F)
	ST OR E R BASIS	XPENSE OF SALE	DEPREC.	GAI	N OR LOSS
0.	68,829.	0.	53,90	)7.	-14,922
NET GAIN OR LOSS FROM SALE O	F ASSETS				6,306,074
CAPITAL GAINS DIVIDENDS FROM	PART IV				C
TOTAL TO FORM 990-PF, PART I	, LINE 6A				6,306,074
FORM 990-PF	OTHER I	NCOME		ST	ATEMENT
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOME
CONSULTING OTHER CATERING		28,000 82,269		0.	
TOTAL TO FORM 990-PF, PART I	, LINE 11	110,269	). =	0.	
FORM 990-PF	LEGAL	FEES		ST	ATEMENT
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		C) JSTED INCOME	(D) CHARITABI PURPOSES
LEGAL	132,922.	115,99	04.		8,458
TO FM 990-PF, PG 1, LN 16A	132,922.	115,99	94.		8,458

FORM 990-PF	ACCOUNTI	NG FEES	S'.	ratement 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	39,100.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	39,100.	0.		0.
FORM 990-PF (	OTHER PROFES	SIONAL FEES	S	ratement 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT CONSULTING OTHER CONSULTING FEES MARKETING PAYROLL FEES	94,000. 228,331. 10,720. 25,295.	94,000. 35,639. 86. 0.		0. 167,026. 4,359. 0.
TO FORM 990-PF, PG 1, LN 16C	358,346.	129,725.		171,385.
FORM 990-PF	TAX	ES	S	FATEMENT 9
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	125,000. 180,933. 7,760. 50,967. 1,478.	0. 44,656. 7,600. 50,967. 0.		0. 64,558. 0. 0.
TO FORM 990-PF, PG 1, LN 18	366,138.	103,223.		64,558.

FORM 990-PF	OTHER E	XPENSES		STATEMENT 10
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOM	_
SYSTEMS SUPPORT OFFICE EXPENSES SUPPLIES MAINTENANCE & REPAIRS COMMUNITY EVENTS INSURANCE VILLAS EXPENSE OTHER EXPENSES SECURITY INVESTMENT EXPENSES MEALS & ENTERTAINMENT	66,240. 216,805. 91,083. 292,961. 125,472. 90,786. 7,079. 8,247. 51,030. 160,926. 24,596.	10,350. 27,247. 8,127. 265,804. 739. 53,817. 7,079. 2,979. 33,002. 160,926. 553.		11,558. 86,884. 42,960. 12,824. 112,628. 1,882. 0. 3,147. 14,550. 0.
TO FORM 990-PF, PG 1, LN 23  FORM 990-PF OTHER INCREASES	1,135,225.	570,623.	ALANCES	305,237. STATEMENT 11
DESCRIPTION				AMOUNT
PRESENT VALUE OF CONTRIBUTION TOTAL TO FORM 990-PF, PART II		T GAAP		566,232.
FORM 990-PF	CORPORAT	E BONDS		STATEMENT 12
DESCRIPTION		ВО	OK VALUE	FAIR MARKET VALUE
BOND FUNDS		2	1,625,110.	21,625,110.
TOTAL TO FORM 990-PF, PART II	LINE 10C	2	1,625,110.	21,625,110.

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 13
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
ALTERNATIVE INVESTMENT EQUITY SECURITIES	FMV FMV	10,429,799. 42,176,088.	10,429,799. 42,176,088.
TOTAL TO FORM 990-PF, PART II,	LINE 13	52,605,887.	52,605,887.

FORM 990-PF

SCHEDULE OF CONTROLLED ENTITIES PART VII-A, LINE 11

STATEMENT 14

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

FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, D FOUNDATION MANA		STAT	EMENT 15
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
ROBERT BRUNST, M.D., PH.D. 441 SAXONY RD ENCINITAS, CA 92024	CFO AND TREASU	RER 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.
DR. JEFFREY R. SOLOMON 441 SAXONY RD ENCINITAS, CA 92024	VICE CHAIR 2.00	6,000.	0.	0.
ANGELICA BERRIE 441 SAXONY RD ENCINITAS, CA 92024	DIRECTOR 2.00	2,000.	0.	0.
JAMES S. FARLEY 441 SAXONY RD ENCINITAS, CA 92024	PRESIDENT/CEO 40.00	484,883.	41,439.	0.
CHARLENE SEIDLE 441 SAXONY RD ENCINITAS, CA 92024	EVP/EXECUTIVE 40.00		47,079.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	803,995.	88,518.	0.

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SUMMARY OF DIRECT CHARITABLE ACTIVITIES FORM 990-PF

STATEMENT

#### ACTIVITY ONE

LEICHTAG FOUNDATION IS A GRANTMAKING ORGANIZATION, AWARDING FUNDS TO ORGANIZATIONS THAT ARE WORKING TO PURSUE OUR IMPACT GOALS OF STRENGTHENING QUALITY OF LIFE, ADVANCING ECONOMIC OPPORTUNITY AND ALLEVIATING POVERTY IN NORTH COUNTY SAN DIEGO AND JERUSALEM.

**EXPENSES** 

TO FORM 990-PF, PART IX-A, LINE 1

5,540,132.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT

#### ACTIVITY TWO

IN ADDITION, LEICHTAG ACTIVELY PROVIDES A NEUTRAL SPACE FOR NONPROFIT PARTNERS TO CONVENE IN ORDER TO BUILD COLLABORATION AND ADVOCATE FOR COMMON ISSUES: AND PURSUES SYSTEMIC CHANGE THROUGH RESEARCH AND EDUCATION. UNDERPINNING THE FOUNDATION'S STRATEGIC INITIATIVES IS A STRONG BASE OF RESEARCH AND A DEEP COMMITMENT TO DEVELOPING TALENT AND INSTITUTIONAL SUSTAINABILITY IN THE SOCIAL SECTOR. THE FOUNDATION VIEWS ITS STRATEGIES HOLISTICALLY, EMPLOYING A BROAD RANGE OF TOOLS INCLUDING ADVOCATING FOR SYSTEMIC CHANGE, CONVENING PARTNERSHIPS, WORKING TO DEVELOP OTHER FUNDERS, NURTURING LEADERSHIP, STRENGTHENING GRANTEE CAPACITY, DEVELOPING TALENT, AND FORGING CONNECTIONS BETWEEN STRATEGIC AREAS TO ACHIEVE IMPACT. ONE OF THE PRIMARY TOOLS IS LEVERAGE: HELPING GRANTEES FIND THE RESOURCES REQUIRED TO THRIVE, PLAN FOR A VIABLE FUTURE, AND CONTINUE SERVING THE COMMUNITY AS RELEVANT NEEDS PERSIST.

**EXPENSES** 

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

2,021,846.

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FORM 8865	AFFILIATION SCHEDULE		STATEMEN	T 18
NAME	ADDRESS	IDENTIFYING NUMBER	TOTAL ORDINARY INCOME OR (LOSS)	CK IF FOR- EIGN P'SH
JVP VII CYBER STRATEGIC LP	24 HEBRON ROAD	98-1135769		x
JVP MEDIA STUDIO	JERUSALEM, ISRAEL 93542 24 HEBRON ROAD JERUSALEM, ISRAEL 93542	55-0227300		x