

2019

990-PF

PUBLIC

DISCLOSURE

Form **990-PF**

Department of the Treasury
Internal Revenue Service

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. 1545-0047

2019

Open to Public Inspection

For calendar year 2019 or tax year beginning **OCT 1, 2019**, and ending **SEP 30, 2020**

Name of foundation LEICHTAG FOUNDATION		A Employer identification number 33-0466189
Number and street (or P.O. box number if mail is not delivered to street address) 441 SAXONY ROAD	Room/suite	B Telephone number (760) 929-1090
City or town, state or province, country, and ZIP or foreign postal code ENCINITAS, CA 92024		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 97,554,372.	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	46,879.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	35,253.	35,253.		STATEMENT 1
	4 Dividends and interest from securities	1,676,273.	1,676,273.		STATEMENT 2
	5a Gross rents	1,853,410.	1,853,410.		STATEMENT 3
	b Net rental income or (loss) 1,853,410.				
	6a Net gain or (loss) from sale of assets not on line 10	4,039,713.			
	b Gross sales price for all assets on line 6a 14,716,329.				
	7 Capital gain net income (from Part IV, line 2)		4,039,713.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income	67,008.	0.		STATEMENT 4	
12 Total. Add lines 1 through 11	7,718,536.	7,604,649.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	847,930.	492,658.		250,680.
	14 Other employee salaries and wages	1,840,128.	396,912.		805,329.
	15 Pension plans, employee benefits	499,872.	166,790.		197,996.
	16a Legal fees STMT 5	182,271.	169,961.		0.
	b Accounting fees STMT 6	42,300.	1,300.		0.
	c Other professional fees STMT 7	308,816.	132,625.		120,844.
	17 Interest				
	18 Taxes STMT 8	350,337.	115,606.		62,460.
	19 Depreciation and depletion	748,085.	748,085.		
	20 Occupancy				
	21 Travel, conferences, and meetings	96,776.	33.		83,252.
	22 Printing and publications				
	23 Other expenses STMT 9	972,613.	600,473.		160,127.
	24 Total operating and administrative expenses. Add lines 13 through 23	5,889,128.	2,824,443.		1,680,688.
	25 Contributions, gifts, grants paid	5,885,046.			5,885,046.
26 Total expenses and disbursements. Add lines 24 and 25	11,774,174.	2,824,443.		7,565,734.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements ..	-4,055,638.				
b Net investment income (if negative, enter -0-)		4,780,206.			
c Adjusted net income (if negative, enter -0-)			N/A		

Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1 Cash - non-interest-bearing				
	2 Savings and temporary cash investments	2,454,173.	3,984,054.	3,984,054.	
	3 Accounts receivable	333,432.			
	Less: allowance for doubtful accounts	130,148.	333,432.	333,432.	
	4 Pledges receivable				
	Less: allowance for doubtful accounts				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons				
	7 Other notes and loans receivable	487,585.			
	Less: allowance for doubtful accounts	0.	487,585.	487,585.	
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges	134,441.	78,189.	78,189.	
	10a Investments - U.S. and state government obligations				
	b Investments - corporate stock				
	c Investments - corporate bonds	STMT 11	21,625,110.	19,858,934.	19,858,934.
	11 Investments - land, buildings, and equipment: basis	26,646,277.			
Less: accumulated depreciation	3,123,859.	22,976,794.	23,522,418.	23,522,418.	
12 Investments - mortgage loans					
13 Investments - other	STMT 12	52,605,887.	49,134,806.	49,134,806.	
14 Land, buildings, and equipment: basis					
Less: accumulated depreciation					
15 Other assets (describe DEPOSITS)		64.	154,954.	154,954.	
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		100,414,202.	97,554,372.	97,554,372.	
Liabilities	17 Accounts payable and accrued expenses	714,969.	566,552.		
	18 Grants payable	7,431,806.	6,173,424.		
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable				
	22 Other liabilities (describe)				
	23 Total liabilities (add lines 17 through 22)		8,146,775.	6,739,976.	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30.			<input checked="" type="checkbox"/>	
	24 Net assets without donor restrictions	92,267,427.	90,814,396.		
	25 Net assets with donor restrictions				
	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30.			<input type="checkbox"/>	
	26 Capital stock, trust principal, or current funds				
	27 Paid-in or capital surplus, or land, bldg., and equipment fund				
	28 Retained earnings, accumulated income, endowment, or other funds				
29 Total net assets or fund balances		92,267,427.	90,814,396.		
30 Total liabilities and net assets/fund balances		100,414,202.	97,554,372.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	92,267,427.
2 Enter amount from Part I, line 27a	2	-4,055,638.
3 Other increases not included in line 2 (itemize) SEE STATEMENT 10	3	2,602,607.
4 Add lines 1, 2, and 3	4	90,814,396.
5 Decreases not included in line 2 (itemize)	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	90,814,396.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a CHARLES SCHWAB PUBLICLY TRADED SECURITIES	P	01/01/19	09/30/20
b NET GAIN VINTAGE INVESTMENTS	P	01/01/19	09/30/20
c NET GAIN JVP OPPORTUNITIES VII-VIII	P	01/01/19	09/30/20
d NET GAIN GENERATION IM ASIA INVESTMENTS	P	01/01/19	09/30/20
e 187 MANAGANO CIRCLE, ENCINITAS CA 92024	P	01/01/18	04/03/20

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a 13,903,309.		10,096,033.	3,807,276.
b 119,013.			119,013.
c 74,507.			74,507.
d		25,788.	-25,788.
e 619,500.	113,779.	668,574.	64,705.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
			3,807,276.
			119,013.
			74,507.
			-25,788.
			64,705.

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	4,039,713.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	7,477,668.	101,430,197.	.073722
2017	8,443,580.	110,282,156.	.076563
2016	6,292,523.	110,503,401.	.056944
2015	5,040,080.	115,546,892.	.043619
2014	10,550,230.	128,748,045.	.081945

2 Total of line 1, column (d)	2	.332793
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	.066559
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	96,721,951.
5 Multiply line 4 by line 3	5	6,437,716.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	47,802.
7 Add lines 5 and 6	7	6,485,518.
8 Enter qualifying distributions from Part XII, line 4	8	7,565,734.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	47,802.
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-)		2	0.
3 Add lines 1 and 2		3	47,802.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	47,802.
6 Credits/Payments:			
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a	219,505.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	219,505.	
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> 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	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	171,703.	
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax <input checked="" type="checkbox"/> 171,703. Refunded <input type="checkbox"/>	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 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.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input checked="" type="checkbox"/> \$ 0. (2) On foundation managers. <input checked="" type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		X
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 remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input checked="" type="checkbox"/> <u>CA</u>		
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) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	X	
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 year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions STMT 13
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?
Website address WWW.LEICHTAG.ORG
14 The books are in care of LEICHTAG FOUNDATION Telephone no. 760.929.1090
Located at 441 SAXONY ROAD, ENCINITAS, CA ZIP+4 92024
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year 15 N/A
16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country

Part 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.

1a 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?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?
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)):
a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019?
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
b If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.)
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
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 2019?

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

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))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions			5b
	Organizations relying on a current notice regarding disaster assistance, check here			<input checked="" type="checkbox"/>
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	If "Yes," attach the statement required by Regulations section 53.4945-5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			6b
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A		
				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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 14		847,930.	91,780.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SHARYN GOODSON 441 SAXONY RD, ENCINITAS, CA 92024	VICE PRESIDENT, PHILANTHROPY 40.00	226,883.	47,428.	0.
LEILANI RASMUSSEN 441 SAXONY RD, ENCINITAS, CA 92024	VP, FINANCE AND OPERATIONS 40.00	242,658.	28,617.	0.
JENNIFER CAMHI 441 SAXONY RD, ENCINITAS, CA 92024	DIRECTOR OF THE HIVE 40.00	150,026.	31,830.	0.
DEMPSEY SAWYER 441 SAXONY RD, ENCINITAS, CA 92024	ENGINEERING DIRECTOR 40.00	130,580.	18,264.	0.
BRACHA SPRUNG 441 SAXONY RD, ENCINITAS, CA 92024	DIRECTOR OF JERUSALEM PARTNERSHIP 40.00	52,018.	1,940.	0.
Total number of other employees paid over \$50,000				7

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

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 P.O. BOX 597, LA MESA, CA 91944	CONSTRUCTION SERVICES	592,645.
TVD, INC. P.O. BOX 1205, CARDIFF, CA 92007	CONSTRUCTION SERVICES	307,000.
AGRA TECH, INC. 2131 PIEDMONT WAY, PITTSBURG, CA 94565	CONSTRUCTION SERVICES	286,922.
AG-CON CONSTRUCTION, INC. 580 HARRISON STREET, SAN JOSE, CA 92125	CONSTRUCTION SERVICES	209,823.
SCHMIDT ELECTRIC P.O. BOX 230123, ENCINITAS, CA 92024	REPAIRS & MAINTENANCE	120,987.
Total number of others receiving over \$50,000 for professional services		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
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 lines 1 and 2.	Amount
1 N/A	
2	
3 All other program-related investments. See instructions.	
Total. Add lines 1 through 3	0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	67,478,778.
b	Average of monthly cash balances	1b	4,069,819.
c	Fair market value of all other assets	1c	26,646,277.
d	Total (add lines 1a, b, and c)	1d	98,194,874.
e	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	98,194,874.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,472,923.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	96,721,951.
6	Minimum investment return. Enter 5% of line 5	6	4,836,098.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	4,836,098.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	47,802.
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	47,802.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,788,296.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	4,788,296.
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	4,788,296.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	7,565,734.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	7,565,734.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	47,802.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	7,517,932.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				4,788,296.
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014	5,557,824.			
b From 2015	4,261,140.			
c From 2016	828,816.			
d From 2017	3,049,722.			
e From 2018	2,574,778.			
f Total of lines 3a through e	16,272,280.			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$	7,565,734.			
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2019 distributable amount				4,788,296.
e Remaining amount distributed out of corpus	2,777,438.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	19,049,718.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7	5,557,824.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	13,491,894.			
10 Analysis of line 9:				
a Excess from 2015	4,261,140.			
b Excess from 2016	828,816.			
c Excess from 2017	3,049,722.			
d Excess from 2018	2,574,778.			
e Excess from 2019	2,777,438.			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

Table with 5 columns: (a) 2019, (b) 2018, (c) 2017, (d) 2016, (e) Total. Rows include: 2 a Enter the lesser of the adjusted net income...; 2 b 85% of line 2a; 2 c Qualifying distributions from Part XII...; 2 d Amounts included in line 2c not used directly for active conduct of exempt activities; 2 e Qualifying distributions made directly for active conduct of exempt activities; 3 Complete 3a, b, or c for the alternative test relied upon; 3 a "Assets" alternative test - enter: (1) Value of all assets; (2) Value of assets qualifying under section 4942(j)(3)(B)(i); 3 b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed; 3 c "Support" alternative test - enter: (1) Total support other than gross investment income; (2) Support from general public and 5 or more exempt organizations; (3) Largest amount of support from an exempt organization; (4) Gross investment income.

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here [X] if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
2-1-1 SAN DIEGO PO BOX 420039 SAN DIEGO, CA 92142	NONE	PC	THANK YOU GIFT CARDS FOR STAFF	2,000.
A FOUNDATION OF PHILANTHROPIC FUNDS 520 EIGHTH AVENUE 20TH FLOOR NEW YORK, NY 10018	NONE	PC	NATANFOCUS INTIATIVE	40,000.
ACCION SAN DIEGO 404 EUCLID AVE. SUITE 271 SAN DIEGO, CA 92114	NONE	PC	GRANT#19-22298, FOR NC BUSINESS SUPPORT	15,000.
ALLIANCE SAN DIEGO P.O. BOX 12266 SAN DIEGO, CA 92112	NONE	PC	IMMIGRATION RELIEF FUND	500.
ALZHEIMER'S DISEASE & REL DISORDERS ASSOC 6055 SOUTH LOOP EAST HOUSTON, TX 77087	NONE	PC	GENERAL OPERATING SUPPORT	2,500.
Total	SEE CONTINUATION SHEET(S)			5,885,046.
b Approved for future payment				
NONE				
Total				0.

Part XVI-A Analysis of Income-Producing Activities

Table with 5 columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include Program service revenue (CONSULTING, CATERING), Membership dues, Interest on savings, Dividends, Net rental income, and Subtotal.

(See worksheet in line 13 instructions to verify calculations.)

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

Table with 2 columns: 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 the foundation's exempt purposes.

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
a Transfers from the reporting foundation to a noncharitable exempt organization of:
(1) Cash
(2) Other assets
b Other transactions:
(1) Sales of assets to a noncharitable exempt organization
(2) Purchases of assets from a noncharitable exempt organization
(3) Rental of facilities, equipment, or other assets
(4) Reimbursement arrangements
(5) Loans or loan guarantees
(6) Performance of services or membership or fundraising solicitations
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation.

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Content: N/A

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? [] Yes [X] No

b If "Yes," complete the following schedule. Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Content: N/A

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Signature of officer or trustee: [Signature] Date: [Date] Title: PRESIDENT

Paid Preparer Use Only Print/Type preparer's name, Preparer's signature, Date: 08/05/21, Check [] if self-employed, PTIN, Firm's name: ALDRICH CPAS AND ADVISORS, LLP, Firm's address: 5946 PRIESTLY DRIVE, SUITE 200 CARLSBAD, CA 92008, Firm's EIN, Phone no. (760) 431-8440

May the IRS discuss this return with the preparer shown below? See instr. [X] Yes [] No

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
ALZHEIMER'S DISEASE & REL DISORDERS ASSOC 6055 SOUTH LOOP EAST HOUSTON, TX 77087	NONE	PC	GENERAL OPERATING SUPPORT	500.
ALZHEIMER'S DISEASE & REL DISORDERS ASSOC 6055 SOUTH LOOP EAST HOUSTON, TX 77087	NONE	PC	GENERAL OPERATING SUPPORT	2,000.
AMERICA ISRAEL CULTURAL FOUNDATION 1140 BROADWAY, SUITE 304 NEW YORK, NY 10001	NONE	PC	JERUSALEM CULTURE UNLIMITED - GENERAL OPERATING SUPPORT	50,000.
AMERICA ISRAEL CULTURAL FOUNDATION 1140 BROADWAY, SUITE 304 NEW YORK, NY 10001	NONE	PC	JERUSALEM CULTURE UNLIMITED - ARTIST RELIEF FUND	3,600.
AMERICAN CIVIL LIBERTIES UNION FOUNDATION P.O. BOX 87131 SAN DIEGO, CA 92138	NONE	PC	GENERAL OPERATING SUPPORT	100.
AMERICAN FRIENDS OF ASSOC ADV CCISRAEL 1466 MANOR RD STATEN ISLAND, NY 10314	NONE	PC	JMG:MAALOT DAPHNA CC COVID-19	1,150.
AMERICAN FRIENDS OF ASSOC ADV CCISRAEL 1466 MANOR RD STATEN ISLAND, NY 10314	NONE	PC	JMG:NEVE YAACOV COMMUNITY CENTER COVID-19	2,570.
Total from continuation sheets				5,825,046.

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
AMERICAN FRIENDS OF MENIFA 3145 CONEY ISLAND AVENUE BROOKLYN, NY 11235	NONE	PC	JMG - JERUSALEM MODEL - NISSIM TOUBOUL COVID-19	2,470.
AMERICAN PUBLIC GARDENS ASSOCIATION 351 LONGWOOD ROAD KENNETT SQUARE, PA 19348	NONE	PC	2 ANNUAL CONFERENCE SCHOLARSHIPS	5,000.
AMERICAN PUBLIC GARDENS ASSOCIATION 351 LONGWOOD ROAD KENNETT SQUARE, PA 19348	NONE	PC	APGA MEMBERSHIP	2,136.
AMIT CHILDREN 49 W. 37TH STREET 5TH FLOOR NEW YORK, NY 10018	NONE	PC	JMG GRANT# 20-24458 RESHIT SCHOOL - COVID-19	2,500.
AMIT CHILDREN 49 W. 37TH STREET 5TH FLOOR NEW YORK, NY 10018	NONE	PC	JMG: RESHIT SCHOOL - JUST IN TIME -COVID-19	2,600.
ANTI-DEFAMATION LEAGUE FOUNDATION 4950 MURPHY CANYON ROAD, SUITE 250 SAN DIEGO, CA 92123	NONE	PC	GRANT#19-22616B, GEN OPER SUPPORT	25,000.
BALBOA PARK CONSERVANCY 1549 EL PRADO, SUITE 1 SAN DIEGO, CA 92101	NONE	PC	CONSERVATOR CIRCLE MEMBERSHIP - JIM FARLEY	1,000.
Total from continuation sheets				

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
BAYLOR COLLEGE OF MEDICINE 1549 EL PRADO, SUITE 1 SAN DIEGO, CA 92101	NONE	PC	DEPT OF NEUROLOGY - PARKINSON'S DISEASE CENTER-DR JANKOVIC	2,500.
BOYS & GIRLS CLUB OF OCEANSIDE, INC. 401 COUNTRY CLUB LANE OCEANSIDE, CA 92054	NONE	PC	GENERAL OPERATING SUPPORT	180.
BOYS & GIRLS CLUB OF OCEANSIDE, INC. 401 COUNTRY CLUB LANE OCEANSIDE, CA 92054	NONE	PC	BGCO FOOD PROGRAM	10,000.
BOYS & GIRLS CLUB OF OCEANSIDE, INC. 401 COUNTRY CLUB LANE OCEANSIDE, CA 92054	NONE	PC	HIVE/LEICHTAG WORKSHOP APPRECIATION	500.
BOYS & GIRLS CLUB OF SAN MARCOS 1 POSITIVE PLACE SAN MARCOS, CA 92069	NONE	PC	MEAL DISTRIBUTION COVID-19	6,000.
BUCKMINSTER FULLER INSTITUTE 2261 MARKET STREET, UNIT 469 SAN FRANCISCO, CA 94114	NONE	PC	REGEN FOUNDATION	500.
CAMP MOUNTAIN CHAI 4950 MURPHY CANYON ROAD SAN DIEGO, CA 92123	NONE	PC	CAMP SCHOLARSHIPS	2,500.

Total from continuation sheets

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
CAMP MOUNTAIN CHAI 4950 MURPHY CANYON ROAD SAN DIEGO, CA 92123	NONE	PC	CAMP SCHOLARSHIPS	250.
CAMP MOUNTAIN CHAI 4950 MURPHY CANYON ROAD SAN DIEGO, CA 92123	NONE	PC	DGF CS 20-24168 IMO JIM LEWIS - GENERAL OPERATING SUPPORT	180.
CAMP MOUNTAIN CHAI 4950 MURPHY CANYON ROAD SAN DIEGO, CA 92123	NONE	PC	GENERAL OPERATING SUPPORT	30,000.
CAMP MOUNTAIN CHAI 4950 MURPHY CANYON ROAD SAN DIEGO, CA 92123	NONE	PC	COVID-19 CAMP-IN-A-BOX	3,000.
CAMP MOUNTAIN CHAI 4950 MURPHY CANYON ROAD SAN DIEGO, CA 92123	NONE	PC	GENERAL OPERATING SUPPORT	180.
CARDIFF-BY-THE-SEA FOUNDATION 1144 NORTH COAST HIGHWAY 101 ENCINITAS, CA 92024	NONE	PC	ENCINITAS SMALL BUSINESS FUND	7,500.
CASA CORNELIA LAW CENTER 2760 5TH AVENUE, SUITE 200 SAN DIEGO, CA 92103	NONE	PC	GENERAL OPERATING SUPPORT	180.

Total from continuation sheets

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
CHINO V'CHISDA 535 DAHIL ROAD BROOKLYN, NY 11218	NONE	PC	JMG:MEA SHEARIM NEIGHBORHOOD COVID-19	2,600.
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	SUPPORT	33,712.
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	SUPPORT	735,288.
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	CHARLENE SEIDLE-FARM FOUNDERS CIRCLE MEMBERSHIP	3,600.
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	JIM FARLEY - FARM FOUNDERS CIRCLE MEMBERSHIP	3,600.
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	EMILY'S FOUNDERS CIRCLE MEMBERSHIP & YEAR END APPEAL	7,200.
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	NOURISH YOUR NEIGHBOR CAMPAIGN	500.

Total from continuation sheets

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
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	FARM FOUNDERS CIRCLE - LEILANI RASMUSSEN	1,000.
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	NOURISH YOUR NEIGHBORS CAMPAIGN	300.
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	NOURISH YOUR NEIGHBORS CAMPAIGN	500.
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	ANGELICA BERRIE FARM FOUNDERS CIRCLE	3,600.
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	JEFFREY SOLOMON FARM FOUNDERS CIRCLE	3,600.
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	BERNARD REITER- FARM FOUNDERS CIRCLE	3,600.
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	GRANT#20-24032, FOR SUPPORT OF CKIDS, A PROGRAM OF CHABAD LA COSTA	900.

Total from continuation sheets

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
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	NOURISH YOUR NEIGHBORS 2019 CAMPAIGN	2,500.
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	DGF DRB 20-24056, FARM FOUNDERS CIRCLE FOR DR. BRUNST	3,600.
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	OPERATING SUPPORT - IHO SHIRA JACOBS BIRTHDAY	50.
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	STAFF LUNCHESES DURING COVID-19 PANDEMIC	1,000.
COASTAL ROOTS FARM 441 SAXONY ROAD ENCINITAS, CA 92024	RELATED	PC	GENERAL OPERATING SUPPORT	400.
COMMUNITY CLOTHES CLOSET P.O. BOX 475 JUSTIN, TX 16247	NONE	PC	GENERAL OPERATING SUPPORT	2,500.
COMMUNITY HEALTH IMPROVEMENT PARTNERS 5095 MURPHY CANYON ROAD, STE105 SANDIEGO, CA 92123	NONE	PC	GRANT#19-22305, FOR FARM-TO-SCHOOL EFFORTS	20,000.

Total from continuation sheets

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
COMMUNITY RESOURCE CENTER 650 SECOND STREET ENCINITAS, CA 92024	NONE	PC	GENERAL OPERATING SUPPORT FISCAL YEAR 2021	25,000.
COMMUNITY RESOURCE CENTER 650 SECOND STREET ENCINITAS, CA 92024	NONE	PC	GENERAL OPERATING SUPPORT	25,000.
CONGREGATION ADAT YESHURUN 8625 LA JOLLA SCENIC DR N LA JOLLA, CA 92037	NONE	PC	GENERAL OPERATING SUPPORT	500.
CONGREGATION NER TAMID OF SOUTH BAY 5721 CRESTRIDGE ROAD RANCHO PALOS VERDES, CA 90275	NONE	PC	DGF CS 20-24046, IMO BETH SIRULL'S FATHER	180.
CROSS TIMBERS CHURCH 312 W. MCKINNEY ST. DENTON, TX 76201	NONE	PC	CELEBRATION OFFERING	25,000.
DESERT ARC 73255 COUNTRY CLUB DRIVE PALM DESERT, CA 92260	NONE	PC	GENERAL OPERATING SUPPORT	500.
DESERT ARC 73255 COUNTRY CLUB DRIVE PALM DESERT, CA 92260	NONE	PC	GENERAL OPERATING SUPPORT	1,000.

Total from continuation sheets

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
DETOUR EMPOWERS 404 EUCLID AVENUE SUITE 261 SAN DIEGO, CA 92114	NONE	PC	GENERAL OPERATING SUPPORT	200.
EDEN VILLAGE CAMP, INC. 392 DENNYTOWN ROAD PUTMAN, NY 10579	NONE	PC	PHASE I GENERAL OPERATING SUPPORT	35,000.
ELDERHELP OF SAN DIEGO 3860 CALLE FORTUNADA, SUITE 101 SAN DIEGO, CA 92123	NONE	PC	IHO CEO DEBORAH MARTIN	250.
ELDERHELP OF SAN DIEGO 3860 CALLE FORTUNADA, SUITE 101 SAN DIEGO, CA 92123	NONE	PC	APPRECIATE OF HOLOCAUST SURVIVORS	180.
ENCINITAS EDUCATIONAL FOUNDATION 101 S. RANCHO SANTA FE ROAD ENCINITAS, CA 92024	NONE	PC	BE STRONG/SE FUERTE PROGRAM	7,500.
ENCINITAS FRIENDS OF THE ARTS 1155 MELBA ROAD ENCINITAS, CA 92024	NONE	PC	MEMBERSHIP/GENERAL OPERATING SUPPORT	200.
ENCINITAS FRIENDS OF THE ARTS 1155 MELBA ROAD ENCINITAS, CA 92024	NONE	PC	GENERAL OPERATING SUPPORT	2,000.

Total from continuation sheets

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
ENCOUNTER PROGRAMS 25 BROADWAY, 9TH FLOOR NEW YORK, NY 10004	NONE	PC	GENERAL OPERATING SUPPORT	15,000.
FEEDING SAN DIEGO 9455 WAPLE ST, STE 135 SAN DIEGO, CA 92121	NONE	PC	NORTH COUNTY FOOD BANK EFFORTS	10,000.
FORESTWOOD MIDDLE SCHOOL 2810 MORRISS ROAD FLOWER MOUND, TX 75028	NONE	PC	ORCHESTRA, BAND & GENERAL FUND	6,000.
FORESTWOOD MIDDLE SCHOOL 2810 MORRISS ROAD FLOWER MOUND, TX 75028	NONE	PC	SUPPORT ORCHESTRA (\$500) & BAND (\$500)	1,000.
FOUNDATION FOR WOMEN WARRIORS 1185 PARK CENTER DRIVE, SUITE O VISTA, CA 92081	NONE	PC	WOMEN VETERANS OF NORTH SAN DIEGO COUNTY	15,000.
FRIENDS OF ISRAEL SCI-TECH SCHOOLS 25 WEST 45TH STREET, SUITE 1405 NEW YORK, NY 10036	NONE	PC	BRIT HAARAVA SCHOOL IN ISRAEL	500.
FRIENDS OF JERUSALEM COLLEGE OF TECH P.O. BOX 1703 NEW YORK, NY 10150	NONE	PC	JMG:MACHON LEV COLLEGE: CENTER FOR INNOVATION COVID-19	2,570.
Total from continuation sheets				

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
FRIENDS OF JERUSALEM INTERNATIONAL YMCA 9956 WELLINGTON LANE WOODBURY, MN 55125	NONE	PC	IHO HANNEN MAGADLH - GENERAL OPERATING SUPPORT	1,000.
FRIENDS OF JERUSALEM INTERNATIONAL YMCA 9956 WELLINGTON LANE WOODBURY, MN 55125	NONE	PC	COVID-19 - AFTER SCHOOL LEARNING CENTER	2,600.
FRIENDS OF JERUSALEM INTERNATIONAL YMCA 9956 WELLINGTON LANE WOODBURY, MN 55125	NONE	PC	STRATEGIC PLANNING CONSULTANT	7,500.
FRIENDS OF OROT FUND 111 JOHN STREET, SUITE 1720 NEW YORK, NY 10038	NONE	PC	JMG - COVID-19 JERUSALEM MODEL BEZZALEL STAUBER	2,430.
FRIENDS OF OROT FUND 111 JOHN STREET, SUITE 1720 NEW YORK, NY 10038	NONE	PC	JMG - PLUGTA COVID-19 RELIEF EFFORTS	2,600.
GATEWAY CHURCH 500 SOUTH NOLEN DRIVE, SUITE 300 SOUTHLAKE, TX 76092	NONE	PC	SOUTHLAKE CAMPUS	500.
GATEWAY CHURCH 500 SOUTH NOLEN DRIVE, SUITE 300 SOUTHLAKE, TX 76092	NONE	PC	SOUTHLAKE CAMPUS	500.

Total from continuation sheets

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
GOOD PEOPLE FUND INC. 384 WYOMING AVENUE MILBURN, NJ 07041	NONE	PC	BAASHER TELCHI -WHEREVER YOU GO PROGRAM	1,000.
GOOD PEOPLE FUND INC. 384 WYOMING AVENUE MILBURN, NJ 07041	NONE	PC	JMG-BEASHER TILCHI COVID-19	2,500.
GOOD PEOPLE FUND INC. 384 WYOMING AVENUE MILBURN, NJ 07041	NONE	PC	KUCHINATE IHO KAREN BRUNWASSER JERUSALEM ADVISORY COMMITTEE	1,000.
GOOD PEOPLE FUND INC. 384 WYOMING AVENUE MILBURN, NJ 07041	NONE	PC	JMG - KAIMA FARM COVID-19	2,500.
GOOD PEOPLE FUND INC. 384 WYOMING AVENUE MILBURN, NJ 07041	NONE	PC	JMG - BEASHER TILCHI COVID-19 RELIEF	2,600.
GOOD PEOPLE FUND INC. 384 WYOMING AVENUE MILBURN, NJ 07041	NONE	PC	IHO HANNEN MAGADLH - GENERAL OPERATING SUPPORT	500.
HADASSAH FOUNDATION 40 WALL STREET 8TH FLOOR NEW YORK, NY 10005	NONE	PC	DOMESTIC VIOLENCE RELIEF	1,400.

Total from continuation sheets

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
HAMMIFAL COOPERATIVE HA-MA'ARAVIM STREEET NUMBER 3 JERUSALEM, JERUSALEM, ISRAEL 91014	NONE	PC	GENERAL OPERATING SUPPORT	72,200.
HILLEL OF SAN DIEGO 5717 LINDO PASEO SAN DIEGO, CA 92115	NONE	PC	NORTH COUNTY JEWISH STUDENT ENGAGEMENT CSUSM, PALOMAR, MIRACOSTA	50,000.
HILLEL OF SAN DIEGO 5717 LINDO PASEO SAN DIEGO, CA 92115	NONE	PC	IHO LAURA GALINSON	1,666.
HOLOCAUST CENTER FOR HUMANITY 2045 2ND AVENUE SEATTLE, WA 98121	NONE	PC	GENERAL OPERATING SUPPORT	1,000.
HOPE THROUGH HOUSING FOUNDATION 6315 IMPERIAL AVENUE SAN DIEGO, CA 92114	NONE	PC	BLACK WOMEN RESILIENCE FUND	5,000.
HOSPICE OF THE NORTH COAST 2525 PIO PIC, SUITE 301 CARLSBAD, CA 92008	NONE	PC	GENERAL OPERATING SUPPORT	1,000.
HOSPICE OF THE NORTH COAST 2525 PIO PIC, SUITE 301 CARLSBAD, CA 92008	NONE	PC	IHO - JEFF WILSON - GENERAL OPERATING SUPPORT	250.

Total from continuation sheets

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
IMPACT CUBED 441 SAXONY RD ENCINITAS, CA 92024	RELATED	PC	GENERAL OPERATING EXPENSES	7,500.
IMPACT CUBED 441 SAXONY RD ENCINITAS, CA 92024	RELATED	PC	SOILLE SAN DIEGO HEBREW DAY SCHOOL- SECURITY GRANT WRITING	2,000.
IMPACT CUBED 441 SAXONY RD ENCINITAS, CA 92024	RELATED	PC	OHR SHALOM SYNAGOGUE-SECURITY GRANT WRITING	2,000.
IMPACT CUBED 441 SAXONY RD ENCINITAS, CA 92024	RELATED	PC	GRANT# 20-24248 KEN JEWISH COMMUNITY-SECURITY GRANT WRITING	2,000.
IMPACT CUBED 441 SAXONY RD ENCINITAS, CA 92024	RELATED	PC	JPI GENERAL OPERATING EXPENSES	45,189.
IMPACT CUBED 441 SAXONY RD ENCINITAS, CA 92024	RELATED	PC	GENERAL OPERATING SUPPORT - JERUSALEM MODEL	8,000.
IMPACT CUBED 441 SAXONY RD ENCINITAS, CA 92024	RELATED	PC	GENERAL OPERATING SUPPORT - MGSДИИ	7,500.

Total from continuation sheets

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
IMPACT CUBED 441 SAXONY RD ENCINITAS, CA 92024	RELATED	PC	MGS DII -GENERAL OPERATING SUPPORT	156,000.
INTERACT INTERNATIONAL INC. 7400 ORIOLE AVENUE SPRINGFIELD, VA 22150	NONE	PC	EMERGENCY RELIEF FOR VICTIMS OF BEIRUT, LEBANON EXPLOSIONS	18,000.
INTERFAITH COMMUNITY SERVICES 550 W. WASHINGTON AVE., SUITE B ESCONDIDO, CA 92025	NONE	PC	ALLIANCE FOR REGIONAL SOLUTIONS	40,000.
INTERFAITH COMMUNITY SERVICES 550 W. WASHINGTON AVE., SUITE B ESCONDIDO, CA 92025	NONE	PC	GENERAL OPERATING SUPPORT	200,000.
INTERFAITH COMMUNITY SERVICES 550 W. WASHINGTON AVE., SUITE B ESCONDIDO, CA 92025	NONE	PC	GENERAL OPERATING SUPPORT	250.
INTERFAITH COMMUNITY SERVICES 550 W. WASHINGTON AVE., SUITE B ESCONDIDO, CA 92025	NONE	PC	STAFF APPRECIATION DURING COVID-19	683.
INTERFAITH COMMUNITY SERVICES 550 W. WASHINGTON AVE., SUITE B ESCONDIDO, CA 92025	NONE	PC	STAFF RESTORATIVE LUNCHES AND OUTDOOR ACTIVITIES	2,500.

Total from continuation sheets

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
INTERFAITH COMMUNITY SERVICES 550 W. WASHINGTON AVE., SUITE B ESCONDIDO, CA 92025	NONE	PC	ALLIANCE FOR REGIONAL SOLUTIONS FISCAL YEAR 2021	35,000.
INTERNATIONAL MEDICAL CORPS 12400 WILSHIRE BLVD, STE 1500 LOS ANGELES, CA 90025	NONE	PC	SUPPORT VICTIMS OF BEIRUT, LEBANON EXPLOSION	500.
ISRAEL INSTITUTE INC. 1250 EYE ST., NW SUITE 710 WASHINGTON, DC 20005	NONE	PC	SUPPORT	107,500.
JACOBS & CUSHMAN SAN DIEGO FOOD BANK 9850 DISTRIBUTION AVENUE SAN DIEGO, CA 92121	NONE	PC	NORTH COUNTY FOOD BANK WORK	10,000.
JERUSALEM FOUNDATION 420 LEXINGTON AVENUE, SUITE 1645 NEW YORK, NY 10170	NONE	PC	JMG-GONENIM CC KATAMONIM COVID-19	2,000.
JERUSALEM FOUNDATION 420 LEXINGTON AVENUE, SUITE 1645 NEW YORK, NY 10170	NONE	PC	JMG - STUDIO OF HER OWN COVID-19	2,600.
JERUSALEM INTERCULTURAL CENTER PO BOX 1477 JERUSALEM, JERUSALEM, ISRAEL 91014	NONE	PC	OPERATING AND PROJECT SUPPORT	129,668.
Total from continuation sheets				

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 PHILANTHROPIC INITIATIVES DERECH BEIR LEHEM 7 JERUSALEM, JERUSALEM, ISRAEL 91014	NONE	PC	GENERAL OPERATING SUPPORT	185,000.
JERUSALEM SECULAR YESHIVA DERECH BEIR LEHEM 7 JERUSALEM, JERUSALEM, ISRAEL 91014	NONE	PC	GENERAL OPERATING SUPPORT	40,000.
JEWISH AGENCY FOR ISRAEL-N.A. COUNCIL 25 BROADWAY, SUITE 1700 NEW YORK, NY 10004	NONE	PC	JMG-SPIRIT OF ISRAEL YAARIM YOUTH VILLAGE -COVID-19	2,500.
JEWISH COMMUNITY FOUNDATION 4950 MURPHY CANYON ROAD SAN DIEGO, CA 92123	NONE	PC	COVID-19 EMERGENCY FUND SD JEWISH COMMUNITY	250,000.
JEWISH CREATIVITY INTERNATIONAL 2472 BROADWAY, #331 NEW YORK, NY 10025	NONE	PC	JEJEWISH PHILANTHROPY - GENERAL OPERATING SUPPORT	7,500.
JEWISH FAMILY SERVICE OF SAN DIEGO 8804 BALBOA AVE. SAN DIEGO, CA 92123	NONE	PC	GENERAL OPERATING SUPPORT	50,000.
JEWISH FAMILY SERVICE OF SAN DIEGO 8804 BALBOA AVE. SAN DIEGO, CA 92123	NONE	PC	GENERAL OPERATING SUPPORT	250.

Total from continuation sheets

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
JEWISH FAMILY SERVICE OF SAN DIEGO 8804 BALBOA AVE. SAN DIEGO, CA 92123	NONE	PC	COVID-19 STAFF APPRECIATION LUNCH	1,383.
JEWISH FAMILY SERVICE OF SAN DIEGO 8804 BALBOA AVE. SAN DIEGO, CA 92123	NONE	PC	GRANT# 20-25026 HIVE AT LEICHTAG WORKSHOP APPRECIATION	500.
JEWISH FEDERATION OF PALM SPRINGS 69710 HWY 111 RANCHO MIRAGE, CA 92270	NONE	PC	SECURITY COMMUNAL FUND	5,000.
JEWISH FEDERATION OF PALM SPRINGS 69710 HWY 111 RANCHO MIRAGE, CA 92270	NONE	PC	DGF BR 19-23827, BOYS & GIRLS CLUB	1,000.
JEWISH FEDERATION OF PALM SPRINGS 69710 HWY 111 RANCHO MIRAGE, CA 92270	NONE	PC	GRANT#DGF BR 20-24050, SUPPORT OF AIR MUSEUM	4,000.
JEWISH FEDERATION OF PALM SPRINGS 69710 HWY 111 RANCHO MIRAGE, CA 92270	NONE	PC	DGF BR 20-24049, GUIDE DOGS OF THE DESERT, GENERAL OPERATING SUPPORT	500.
JEWISH FEDERATION OF PALM SPRINGS 69710 HWY 111 RANCHO MIRAGE, CA 92270	NONE	PC	DESERT ARC -CLIENT TRANSPORTATION EXPENSES	1,000.

Total from continuation sheets

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
JEWISH FEDERATION OF PALM SPRINGS 69710 HWY 111 RANCHO MIRAGE, CA 92270	NONE	PC	READ WITH ME VOLUNTEER PROGRAMS - DOCENT TRANSPORTATION	1,000.
JEWISH FEDERATION OF PALM SPRINGS 69710 HWY 111 RANCHO MIRAGE, CA 92270	NONE	PC	JUMP INC. - CLIENT TRANSPORTATION EXPENSES	1,000.
JEWISH FEDERATION OF PALM SPRINGS 69710 HWY 111 RANCHO MIRAGE, CA 92270	NONE	PC	TEMPLE SINAI - CHILD EDUCATION PROGRAMS	1,000.
JEWISH FEDERATION OF PALM SPRINGS 69710 HWY 111 RANCHO MIRAGE, CA 92270	NONE	PC	COASTAL ROOTS FARM - ENCINITAS	1,000.
JEWISH FEDERATION OF PALM SPRINGS 69710 HWY 111 RANCHO MIRAGE, CA 92270	NONE	PC	PALM SPRINGS SCRIPPS MEMORIAL - OUTPATIENT PHYSICAL THERAPY	1,000.
JEWISH FEDERATIONS OF NORTH AMERICA 25 BROADWAY, SUITE 1700 NEW YORK, NY 10004	NONE	PC	JMG-RESHUT HARABIM - KIRYAT HAYOVEL COVID-19	2,500.
JEWISH FEDERATIONS OF NORTH AMERICA 25 BROADWAY, SUITE 1700 NEW YORK, NY 10004	NONE	PC	BELIBA CHOMA COVID-19 RELIEF	20,000.
Total from continuation sheets				

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
JEWISH FEDERATIONS OF NORTH AMERICA 25 BROADWAY, SUITE 1700 NEW YORK, NY 10004	NONE	PC	JMG: SHAHAF FOUNDATION COVID-19 RELIEF EFFORTS	2,600.
JEWISH FUNDERS NETWORK 150 WEST 30TH STREET, SUITE 900 NEW YORK, NY 10001	NONE	PC	LEICHTAG FOUNDATION ANNUAL MEMBERSHIP	10,000.
JEWISH FUNDERS NETWORK 150 WEST 30TH STREET, SUITE 900 NEW YORK, NY 10001	NONE	PC	2020 JEWISH FUNDERS NETWORK CONFERENCE	10,000.
JEWISH FUNDERS NETWORK 150 WEST 30TH STREET, SUITE 900 NEW YORK, NY 10001	NONE	PC	IMO ILIA SALITA Z'L JEWISH STUDIES MOSCOW STATE UNIVERSITY	360.
JEWISH FUNDERS NETWORK 150 WEST 30TH STREET, SUITE 900 NEW YORK, NY 10001	NONE	PC	IMO ILIA SALITZ Z'L JEWISH STUDIES MSU	1,800.
JEWISH FUNDERS NETWORK 150 WEST 30TH STREET, SUITE 900 NEW YORK, NY 10001	NONE	PC	LEICHTAG FOUNDATION MEMBERSHIP FY 2021	10,000.
JEWISH JUMPSTART 2801 OCEAN PARK BLVD #348 SANTA MONICA, CA 90405	NONE	PC	JLENS 2020 JEWISH IMPACT INVESTING SUMMIT	5,000.
Total from continuation sheets				

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
JFNA 25 BROADWAY STE 1700 NEW YORK, NY 10004	NONE	PC	BELIBA CHOMA	20,000.
JPRO 25 BROADWAY, SUITE 1700 NEW YORK, NY 10004	NONE	PC	LEICHTAG FOUNDATION PROFESSIONAL MEMBERSHIP	1,000.
JPRO 25 BROADWAY, SUITE 1700 NEW YORK, NY 10004	NONE	PC	LEICHTAG FOUNDATION MEMBERSHI FY 2021	1,000.
JUST IN TIME P.O. BOX 601627 SAN DIEGO, CA 92160	NONE	PC	PANEL PARTICIPATION APPRECIATION-1/14/2020	250.
JUST IN TIME P.O. BOX 601627 SAN DIEGO, CA 92160	NONE	PC	HIVE/LEICHTAG WORKSHOP APPRECIATION	500.
KBY CONGREGATIONS TOGETHER, INC. P. O. BOX 23170 BROOKLYN, NY 11202	NONE	PC	JMG-TO SUPPORT KEHILAT ZION, JERUSALEM	2,500.
KPBS SAN DIEGO 5250 CAMPANILE DRIVE, MC 1931 SAN DIEGO, CA 92182	NONE	PC	AGP PRODUCTIONS "A GROWING PASSION" TV SHOW	5,000.
Total from continuation sheets				

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
KPBS SAN DIEGO 5250 CAMPANILE DRIVE, MC 1931 SAN DIEGO, CA 92182	NONE	PC	GENERAL OPERATING SUPPORT	3,000.
KPBS SAN DIEGO 5250 CAMPANILE DRIVE, MC 1931 SAN DIEGO, CA 92182	NONE	PC	GENERAL OPERATING SUPPORT	700.
LA JOLLA PLAYHOUSE P.O. BOX 12039 LA JOLLA, CA 92039	NONE	PC	GENERAL OPERATING SUPPORT	15,000.
LA JOLLA PLAYHOUSE P.O. BOX 12039 LA JOLLA, CA 92039	NONE	PC	GENERAL OPERATING SUPPORT	5,000.
LA JOLLA PLAYHOUSE P.O. BOX 12039 LA JOLLA, CA 92039	NONE	PC	GENERAL OPERATING SUPPORT	700.
LAWRENCE FAMILY JCC OF SD COUNTY 4126 EXECUTIVE DRIVE LA JOLLA, CA 92037	NONE	PC	GENERAL OPERATING SUPPORT	47,500.
LAWRENCE FAMILY JCC OF SD COUNTY 4126 EXECUTIVE DRIVE LA JOLLA, CA 92037	NONE	PC	GENERAL OPERATING SUPPORT	50,000.

Total from continuation sheets

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
LAWRENCE FAMILY JCC OF SD COUNTY 4126 EXECUTIVE DRIVE LA JOLLA, CA 92037	NONE	PC	COVID-19 STAFF APPRECIATION LUNCH	981.
LEAH'S PANTRY INC. 3019 MISSION STREET LA JOLLA, CA 92037	NONE	PC	COVER COSTS FOR NEW ASSOC DIR	50,000.
LEAH'S PANTRY INC. 3019 MISSION STREET LA JOLLA, CA 92037	NONE	PC	OPERATING SUPPORT	25,000.
LEAH'S PANTRY INC. 3019 MISSION STREET SAN FRANCISCO, CA 94110	NONE	PC	GRANT# 20-23953 MULTI-STAKEHOLDER COLLABORATION - SAN FRANCISCO	2,000.
LIFE ACTS 1079 B THIRD AVENUE CHULA VISTA, CA 91911	NONE	PC	GENERAL OPERATING SUPPORT	250.
LOS ANGELITOS DE ENCINITAS, INC P.O. BOX 232682 LEUCADIA, CA 92023	NONE	PC	GRANT# 20-24744 FOOD SECURITY DURING COVID19	3,500.
LOVEPACS LEWISVILLE 5541 NORRIS DRIVE THE COLONY, TX 95056	NONE	PC	GENERAL OPERATING SUPPORT	2,000.

Total from continuation sheets

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
MAGDELENA ECKE FAMILY YMCA 200 SAXONY RD ENCINITAS, CA 92024	NONE	PC	PAUL ECKE JR. POINSETTIA BALL 12/14/19	2,500.
MAGDELENA ECKE FAMILY YMCA 200 SAXONY RD ENCINITAS, CA 92024	NONE	PC	POINSETTIA BALL SPONSOR	2,500.
MATI-USA 11 E. 44TH STREET, 19TH FLR NEW YORK, NY 10017	NONE	PC	EAST JERUSALEM ACCELERATOR PROGRAM	50,000.
MIDDLE COLLEGIATE CHURCH 50 EAST 7TH STREET NEW YORK, NY 10003	NONE	PC	GENERAL OPERATING SUPPORT	500.
MOISHE HOUSE 441 SAXONY ROAD ENCINITAS, CA 92024	NONE	PC	GENERAL OPERATING SUPPORT	250,000.
MOISHE HOUSE 441 SAXONY ROAD ENCINITAS, CA 92024	NONE	PC	INTERNATIONAL FUND	750.
MOISHE HOUSE 441 SAXONY ROAD ENCINITAS, CA 92024	NONE	PC	RIGHEOUS CROWD MEMBERSHIP FOR SHARYN GOODSON	360.

Total from continuation sheets

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
MONA FOUNDATION 1802 136TH PLACE NE SUITE 2 BELLEVUE, WA 98005	NONE	PC	GENERAL OPERATING SUPPORT	16,000.
MONA FOUNDATION 1802 136TH PLACE NE SUITE 2 BELLEVUE, WA 98005	NONE	PC	GENERAL OPERATING SUPPORT	5,000.
MONARCH SCHOOLS 1625 NEWTON AVENUE SAN DIEGO, CA 92113	NONE	PC	GENERAL OPERATING SUPPORT	2,500.
MUSICIANS ON CALL, INC. 110 WEST 40TH ST., SUITE 702 NEW YORK, NY 10018	NONE	PC	GENERAL OPERATING SUPPORT	20,000.
MY JUMP P.O. BOX 119 LA QUINTA, CA 92247	NONE	PC	GENERAL OPERATING SUPPORT	2,000.
MY JUMP P.O. BOX 119 LA QUINTA, CA 92247	NONE	PC	GENERAL OPERATING SUPPORT	2,500.
NATIONAL YOUNG FARMERS COALITION P.O. BOX 1074 HUDSON, NY 12534	NONE	PC	SUPPORT SD YOUNG FARMERS	7,500.
Total from continuation sheets				

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
NATURE COLLECTIVE P.O. BOX 230634 ENCINITAS, CA 92023	NONE	PC	GENERAL OPERATING SUPPORT - IMO MORGAN MALLORY	180.
NEW AMERICANS MUSEUM 2825 DEWEY ROAD, STE 102 SAN DIEGO, CA 92106	NONE	PC	2019 SOIREE- BENEFACTOR SPONSOR	2,500.
NEW ISRAEL FUND 6 EAST 39TH STREET, SUITE 301 NEW YORK, NY 10016	NONE	PC	JERUSALEM AFRICAN COMMUNITY CENTER - GENERAL OPERATING	20,000.
NEW ISRAEL FUND 6 EAST 39TH STREET, SUITE 301 NEW YORK, NY 10016	NONE	PC	MADRASSA - GENERAL OPERATING SUPPORT	35,000.
NEW ISRAEL FUND 6 EAST 39TH STREET, SUITE 301 NEW YORK, NY 10016	NONE	PC	JERUSALEM AFRICAN COMMUNITY CENTER-GENERAL OPERATING SUPPORT	30,000.
NEW ISRAEL FUND 6 EAST 39TH STREET, SUITE 301 NEW YORK, NY 10016	NONE	PC	IPCRI - BRIDGING THE DIVIDES CONFERENCE	5,000.
NEW ISRAEL FUND 6 EAST 39TH STREET, SUITE 301 NEW YORK, NY 10016	NONE	PC	JERUSALEM AFRICAN COMMUNITY CENTER	10,000.

Total from continuation sheets

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
NEW ISRAEL FUND 6 EAST 39TH STREET, SUITE 301 NEW YORK, NY 10016	NONE	PC	JMG-JERUSALEM AFRICAN COMMUNITY CENTER COVID-19 RELIEF	2,500.
NEW ISRAEL FUND 6 EAST 39TH STREET, SUITE 301 NEW YORK, NY 10016	NONE	PC	JMG-YOD BET B'HESHVAN COVID-19	2,500.
NEW ISRAEL FUND 6 EAST 39TH STREET, SUITE 301 NEW YORK, NY 10016	NONE	PC	JMG:JACC - MEUCHEDET MEDICAL INSURANCE	2,570.
NEW ISRAEL FUND 6 EAST 39TH STREET, SUITE 301 NEW YORK, NY 10016	NONE	PC	JMG - DERECH SHIRA BANKI COVID-19 : CREATING CONVERSATION	2,600.
NEW SPIRIT PO BOX 2750 JERUSALEM, JERUSALEM, ISRAEL 9102602	NONE	PC	GENERAL OPERATING SUPPORT	184,500.
NEW VILLAGE ARTS 2787 STATE STREET CARLSBAD, CA 92008	NONE	PC	PANEL PARTICIPATION APPRECIATION-1/14/2020	250.
NORTH COUNTY LGBTQ RESOURCE CNTR 3220 MISSION AVENUE SUITE #2 OCEANSIDE, CA 92058	NONE	PC	PANEL PARTICIPATION APPRECIATION-1/14/2020	250.
Total from continuation sheets				

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
NORTH COUNTY LIFELINE INC. 200 MICHIGAN AVENUE VISTA, CA 92084	NONE	PC	GENERAL OPERATING SUPPORT	35,000.
NORTH COUNTY LIFELINE INC. 200 MICHIGAN AVENUE VISTA, CA 92084	NONE	PC	LIFELINE EMERGENCY FUND	370.
NORTH COUNTY LIFELINE INC. 200 MICHIGAN AVENUE VISTA, CA 92084	NONE	PC	NORTH SAN DIEGO COUNTY -EMERGENCY NEEDS	20,000.
NORTH COUNTY LIFELINE INC. 200 MICHIGAN AVENUE VISTA, CA 92084	NONE	PC	GENERAL OPERATING SUPPORT FY 2021	35,000.
NORTH COUNTY PHILANTHROPY COUNCIL P. O. BOX 1641 CARLSBAD, CA 92018	NONE	PC	NCPC VOLUNTEER AWARDS	2,500.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	SUPPORT	15,000.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JERUSALEM BIENNALE FOR GENERAL OPERATING SUPPORT	25,000.

Total from continuation sheets

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
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	OUT FOR CHANGE - GENERAL OPERATING SUPPORT	40,000.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	AVRATECH - GENERAL OPERATING SUPPORT	40,000.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JERUSALEM SEASON OF CULTURE - GENERAL OPERATING SUPPORT	30,000.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JERUSALEM INSTITUTE FOR ISRAEL STUDIES -STATISTICAL YEARBOOK	25,000.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG - NA'OT V DORSHOT PROJ	2,300.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	RESTREET CO-WORKING SPACE	4,200.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	CATAMON DANCE GROUP - INCREASE OF \$5,000 ON 11.12.19 BY CHARLENE SEIDLE	5,000.
Total from continuation sheets				

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
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	BEIT MIDRASH YISRAELI - EIN PRAT	80,000.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	THE SCHOOL OF VISUAL THEATRE - AMUTAH 580352482	2,250.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	CATAMON DANCE GROUP - GENERAL OPERATING SUPPORT	20,000.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	0202 POINTS OF VIEW IHO MICHAL SHILOR (JM ADVISORY COMMITTEE)	7,500.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	ENGLISH TRANSLATION SERVICES FOR FUNDERS INTERESTED IN JERUSALEM NEEDS	25,000.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG - MUSLALA-ROOFTOP CENTER SHEIKH JARACH LIBRARY	10,000.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG - SUPPORT OF RO'OT OLAM	3,030.
Total from continuation sheets				

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
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	TO SUPPORT KULNA YERUSHALAYIM	45,000.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JERUSALEM STATISTICAL YEARBOOK	25,000.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG-KULNA YERUSHALAYIM -SHUAFAT REFUGEE CAMP COVID-19	2,500.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG-KULNA YERUSHALAYIM - BEIT SAFAFA COVID-19	2,500.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG-KULNA YERUSHALAYIM - MENLO BOOM COVID-19	2,500.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG-KULNA YERUSHALAYIM SHUAFAT REFUGEE CAMP MEDICAL SUPPLIES COVID-19	2,500.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG-TENE YERUSHAIMI COVID-19	2,500.
Total from continuation sheets				

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
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG- MUSLALA COVID-19	5,000.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG-DAM HAMACABIM - JERUSALEM MODEL ADVISORY COMMITTEE	3,435.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG - SHLAVIM COVID-19	2,500.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG - SAHI-NOCHAH COVID-19	2,500.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG:MIN HAMEYTZAR - COVID-19 CALL CENTER	2,500.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG:MASHU MASHU COMMUNITY THEATRE COVID-19	2,570.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG:MEA YADOT -KLB MEMORIAL FUND	2,600.

Total from continuation sheets

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
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG:KULNA YERUSHALAYIM (IYAD ABU SHAMA) COVID-19	2,570.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG - NEHORA DE'ORAITA DOCUMENTARY	2,600.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG - MADE IN JLM COVID-19	2,600.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG - LE-OVDAH COVID-19 GARDENING MOVIES	2,310.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG - SHLAVIM COVID-19 BNOT YERUSHALAYIM SCHOOL	1,300.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG - KULNA YERUSHALAYIM COVID-19	2,600.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG - GINOT HA'IR COMMUNITY COUNCIL PEN PAL PROGRAM	870.

Total from continuation sheets

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
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG - KULNA YERUSHALAYIM SHUAFAT REFUGEE CAMP COVID-19	2,600.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG: KVUTSAT REUT COVID-19	2,600.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	MUSLALA - THE BASTA PROJECT	5,000.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	JMG: SAHI-NOCHAH COVID-19 RELIEF EFFORTS	2,600.
P.E.F. ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE, . 15TH FLR NEW YORK, NY 10017	NONE	PC	IHO KAREN BRUNWASSER - JERUSALEM SEASON OF CULTURE	535.
PLANNED PARENTHOOD, SAN DIEGO 1075 CAMINO DE RIO SOUTH SAN DIEGO, CA 92108	NONE	PC	GENERAL OPERATING SUPPORT	250.
PRODUCEGOOD 4057 VIA DE LA PAZ OCEANSIDE, CA 92057	NONE	PC	GENERAL OPERATING SUPPORT	30,000.
Total from continuation sheets				

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
RANCHO SANTA FE FOUNDATION P.O. BOX 8111 RANCHO SANTE FE, CA 92067	NONE	PC	NORTH COUNTY COVID-19 RESPONSE FUND	100,000.
RANCHO SANTA FE FOUNDATION P.O. BOX 8111 RANCHO SANTE FE, CA 92067	NONE	PC	NORTH COUNTY COVID-19 RESPONSE FUND	50,000.
RAVI SHANKAR FOUNDATION 277 VIA DEL CERRITO ENCINITAS, CA 92024	NONE	PC	GENERAL OPERATING SUPPORT	2,000.
RAY OF SUNSHINE 4571 S. MISSION ROAD FALLBROOK, CA 92028	NONE	PC	GENERAL OPERATING SUPPORT	2,500.
RAY OF SUNSHINE 4571 S. MISSION ROAD FALLBROOK, CA 92028	NONE	PC	PROPERTY SUPPLIES/GENERAL OPERATING SUPPORT	5,000.
REACHING THE HUNGRY 1018 RANGER ROAD FALLBROOK, CA 92028	NONE	PC	GENERAL OPERATING SUPPORT	250.
READ WITH ME VOLUNTEER PROGRAMS P.O. BOX 1016 RANCHO MIRAGE, CA 92270	NONE	PC	GENERAL OPERATING SUPPORT	1,000.

Total from continuation sheets

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
SALK INSTITUTE 10010 N TORREY PINES ROAD LA JOLLA, CA 92037	NONE	PC	PLANT CARBON DRAWDOWN SYMPOSIUM 2020	1,000.
SAN DIEGO BOTANIC GARDEN P. O. BOX 230005 ENCINITAS, CA 92023	NONE	PC	E3 CLUSTER LUNCHEON 10/7/19	500.
SAN DIEGO BOTANIC GARDEN P. O. BOX 230005 ENCINITAS, CA 92023	NONE	PC	GALA - PACIFIC PROMENADE & VISITOR'S CENTER	5,000.
SAN DIEGO BOTANIC GARDEN P. O. BOX 230005 ENCINITAS, CA 92023	NONE	PC	GENERAL OPERATING SUPPORT	1,000.
SAN DIEGO BOTANIC GARDEN P. O. BOX 230005 ENCINITAS, CA 92023	NONE	PC	ANNUAL MEMBERSHIP	5,000.
SAN DIEGO BOTANIC GARDEN P.O. BOX 23005 ENCINITAS, CA 92037	NONE	PC	SUPPORT	180,000.
SAN DIEGO FIRE RESCUE FOUNDATION P.O. BOX 235837 ENCINITAS, CA 92024	NONE	PC	GENERAL OPERATING SUPPORT	250.

Total from continuation sheets 50

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SAN DIEGO FIRST CHURCH OF THE NAZARENE 3901 LOMALAND DRIVE SAN DIEGO, CA 92106	NONE	PC	GENERAL OPERATING SUPPORT	500.
SAN DIEGO GRANTMAKERS 5060 SHOREHAM PLACE, SUITE 350 SAN DIEGO, CA 92122	NONE	PC	LEICHTAG FOUNDATION MEMBERSHIP	8,175.
SAN DIEGO GRANTMAKERS 5060 SHOREHAM PLACE, SUITE 350 SAN DIEGO, CA 92122	NONE	PC	LEICHTAG FOUNDATION MEMBERSHIP	525.
SAN DIEGO GRANTMAKERS 5060 SHOREHAM PLACE, SUITE 350 SAN DIEGO, CA 92122	NONE	PC	BLACK BUSINESS GRANT RELIEF FUND	10,000.
SAN DIEGO GRANTMAKERS 5060 SHOREHAM PLACE, SUITE 350 SAN DIEGO, CA 92122	NONE	PC	LEICHTAG FOUNDATION FY 2021 MEMBERSHIP	8,175.
SAN DIEGO JEWISH EXPERIENCE 8946 LA JOLLA SCENIC DRIVE NORTH LA JOLLA, CA 92037	NONE	PC	GENERAL OPERATING SUPPORT	2,000.
SAN DIEGO LGBT COMMUNITY CENTER P.O. BOX 3357 SAN DIEGO, CA 92163	NONE	PC	END OF YEAR CAMPAIGN	500.

Total from continuation sheets

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SAN DIEGO REPERTORY THEATRE 79 HORTON PLAZA SAN DIEGO, CA 92101	NONE	PC	LIPINSKY ART FERSTIVAL	20,000.
SAN DIEGUITO ACADEMY FOUNDATION P.O. BOX 235109 ENCINITAS, CA 92023	NONE	PC	ROBOTICS CLUB, TEAM PARADOX	250.
SAN MARCOS PROMISE 255 PICO AVE SAN MARCOS, CA 92069	NONE	PC	JOLI ANN LEICHTAG SCHOOL AND PACE	500,000.
SAY SAN DIEGO 8755 AERO DRIVE, SUITE 100 SAN DIEGO, CA 92123	NONE	PC	GENERAL OPERATING SUPPORT	200.
SCRIPPS HEALTH FOUNDATION 354 SANTA FE DRIVE ENCINITAS, CA 92024	NONE	PC	JIM'S ANNUAL PRESIDENT COUNCIL GIFT	2,500.
SCRIPPS HEALTH FOUNDATION 354 SANTA FE DRIVE ENCINITAS, CA 92024	NONE	PC	NATIONAL NURSES WEEK	500.
SCRIPPS HEALTH FOUNDATION 354 SANTA FE DRIVE ENCINITAS, CA 92024	NONE	PC	SCRIPPS MEMORIAL HOSPITAL ENCINITAS	1,000.

Total from continuation sheets

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
SEACREST FOUNDATION 211 SAXONY ROAD ENCINITAS, CA 92024	NONE	PC	GRANT#19-23592, 2020 WOMENS AUX GALA	2,500.
SEACREST FOUNDATION 211 SAXONY ROAD ENCINITAS, CA 92024	NONE	PC	STAFF APPRECIATION DURING COVID-19	2,000.
SEACREST FOUNDATION 211 SAXONY ROAD ENCINITAS, CA 92024	NONE	PC	STAFF APPRECIATION LUNCH	2,000.
SEEDS OF PEACE 370 LEXINGTON AVENUE SUITE 1201 NEW YORK, NY 10017	NONE	PC	JERUSALEM YOUTH CHORUS - SAN DIEGO PERFORMANCE	4,465.
SHADES OF PINK FOUNDATION OF CA 1084 NORTH EL CAMINO REAL SUITE B345 ENCINITAS, CA 92024	NONE	PC	IHO KEN CHURCH - GENERAL OPERATING SUPPORT	250.
SHALOM HARTMAN INST. OF NORTH AMERICA 2095 ROSE STREET, #202 BERKELEY, CA 94709	NONE	PC	JMG:COVID-19 BINI MEIR	2,500.
SHALOM HARTMAN INST. OF NORTH AMERICA 2095 ROSE STREET, #202 BERKELEY, CA 94709	NONE	PC	GENERAL OPERATING SUPPORT	30,000.
Total from continuation sheets				

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
SOILLE SAN DIEGO HEBREW DAY SCHOOL 3630 AFTON ROAD SAN DIEGO, CA 92123	NONE	PC	GENERAL OPERATING SUPPORT	10,000.
SOILLE SAN DIEGO HEBREW DAY SCHOOL 3630 AFTON ROAD SAN DIEGO, CA 92123	NONE	PC	TO SUPPORT COVID-19 RELATED NEEDS	4,000.
SOILLE SAN DIEGO HEBREW DAY SCHOOL 3630 AFTON ROAD SAN DIEGO, CA 92123	NONE	PC	ANNUAL GALA & E-TRIBUTE JOURNAL	5,000.
SOILLE SAN DIEGO HEBREW DAY SCHOOL 3630 AFTON ROAD SAN DIEGO, CA 92123	NONE	PC	GENERAL OPERATING SUPPORT	7,800.
ST. JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST. JUDE PLACE MEMPHIS, TN 38105	NONE	PC	GENERAL OPERATING SUPPORT	250.
STAND WITH US P.O. BOX 341069 LOS ANGELES, CA 90034	NONE	PC	GENERAL OPERATING SUPPORT	750.
SUSAN G. KOMEN FOUNDATION, ORANGE COUNTY 3191-A AIRPORT LOOP DRIVE COSTA MESA, CA 92626	NONE	PC	MILEA MERRITT - KOMEN ORANGE COUNTY RACE	500.

Total from continuation sheets

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
TABLET MAGAZINE/NEXT BOOK INC P.O. BOX 20079 NEW YORK, NY 10001	NONE	PC	UNORTHODOX PODCAST RESIDENCY AT THE HIVE	10,000.
TEMECH, INC. 45 BROADWAY, 25TH FLOOR NEW YORK, NY 10006	NONE	PC	CAREER ADVANCEMENT PROGRAM-CHAREDI	30,000.
TEMECH, INC. 45 BROADWAY, 25TH FLOOR NEW YORK, NY 10006	NONE	PC	COMMUNA PROGRAM	20,000.
TEMPLE EMANU-EL OF SAN DIEGO 6299 CAPRI DRIVE SAN DIEGO, CA 92120	NONE	PC	DGF CS 20-24169 IMO JIM LEWIS - GENERAL OPERATING SUPPORT	180.
TEMPLE EMANU-EL OF SAN DIEGO 6299 CAPRI DRIVE SAN DIEGO, CA 92120	NONE	PC	DGF SG 20-24173 IMO JIM LEWIS - GENERAL OPERATING SUPPORT	180.
TEMPLE EMANU-EL OF SAN DIEGO 6299 CAPRI DRIVE SAN DIEGO, CA 92120	NONE	PC	GENERAL OPERATING SUPPORT	360.
TEMPLE SINAI-JEWISH COMM CNTR 2808 SUMMIT STREET OAKLAND, CA 94609	NONE	PC	CHILDREN'S PROGRAMMING	2,000.
Total from continuation sheets				

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
TEMPLE SINAI-JEWISH COMM CNTR 2808 SUMMIT STREET OAKLAND, CA 94609	NONE	PC	TO SUPPORT CHILDREN'S PROGRAMMING	2,000.
TEMPLE SOLEL 3575 MANCHESTER AVE. CARDIFF BY THE SEA, CA 92007	NONE	PC	DGF CS 20-24047, FOR CHARLENE'S CIRCLE OF HONOR MEMBERSHIP, MADE IN HONOR OF THE LEADERSHIP OF R...	5,000.
TEMPLE SOLEL 3575 MANCHESTER AVE. CARDIFF BY THE SEA, CA 92007	NONE	PC	IMO DAN GREEN - GENERAL OPERATING SUPPORT	1,800.
THE NORTH COUNTY PHILANTHROPY COUNCIL P.O. BOX 1641 CARLSBAD, CA 92018	NONE	PC	LEICHTAG FOUNDATION ANNUAL MEMBERSHIP	500.
TIDES CENTER 1014 TORNEY AVENUE SAN FRANCISCO, CA 92129	NONE	PC	JEWS OF COLOR - COVID-19	50,000.
TIDES/EPIP 1014 TORNEY AVENUE SAN FRANCISCO, CA 92129	NONE	PC	LEICHTAG FOUNDATION MEMBERSHI FY 2021	350.
TRUE BLUE ANIMAL RESCUE P.O. BOX 1107 BRENHAM, TX 77837	NONE	PC	GENERAL OPERATING SUPPORT	500.

Total from continuation sheets

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
UC SAN DIEGO FOUNDATION 9500 GILMAN DRIVE, #0937 LA JOLLA, CA 92093	NONE	PC	BIOMEDICAL RESEARCH BUILDING	500,000.
ULYSSES S. GRANT HIGH SCHOOL 1300 OXNARD STREET VALLEY GLEN, CA 91401	NONE	PC	U.S. GRANT HIGH SCHOOL '67 SCHOLARSHIP FUND	1,000.
UPSTART BAY AREA 1111 BROADWAY 3RD FLOOR OAKLAND, CA 94607	NONE	PC	THE COLLABORATORY SPRING 2020 CHICAGO, IL	2,500.
UPSTART BAY AREA 1111 BROADWAY 3RD FLOOR OAKLAND, CA 94607	NONE	PC	COVID-19 JEWISH INNOVATOR PAYROLL RELIEF FUND	2,500.
URBAN ADAMAH 1050 PARKER STREET BERKELEY, CA 94710	NONE	PC	GENERAL OPERATING SUPPORT	1,800.
VISTA COMMUNITY CLINIC 1000 VALE TERRACE VISTA, CA 92084	NONE	PC	COVID-19 FARM WORKER CARE COALITION	7,500.
VOICES OF OUR CITY CHOIR P.O. BOX 122241 SAN DIEGO, CA 92112	NONE	PC	DGF JC 20-24048, GENERAL OPERATING SUPPORT	500.
Total from continuation sheets				

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
WOMEN OF PROMISE P.O. BOX 2655 VISTA, CA 92085	NONE	PC	GENERAL OPERATING SUPPORT	250.

Total from continuation sheets

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2019

Name of the organization

LEICHTAG FOUNDATION

Employer identification number

33-0466189

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

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

Name of organization LEICHTAG FOUNDATION	Employer identification number 33-0466189
--------------------------------------------------------	---------------------------------------------------------

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	<hr/> <hr/> <hr/> <hr/>	\$ <u>36,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEICHTAG FOUNDATION	Employer identification number 33-0466189
--------------------------------------------------------	---------------------------------------------------------

Part II Noncash Property (see instructions). Use duplicate copies of 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
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization LEICHTAG FOUNDATION	Employer identification number 33-0466189
--------------------------------------------------------	---------------------------------------------------------

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 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 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 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	

Underpayment of Estimated Tax by Corporations

Department of the Treasury
Internal Revenue Service

▶ Attach to the corporation's tax return. **FORM 990-PF**

2019

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

Name LEICHTAG FOUNDATION	Employer identification number 33-0466189
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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.

Part I Required Annual Payment			
1 Total tax (see instructions)		1	47,802.
2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a		
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	2b		
c Credit for federal tax paid on fuels (see instructions)	2c		
d Total. Add lines 2a through 2c		2d	
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		3	47,802.
4 Enter the tax shown on the corporation's 2018 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	84,310.
5 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		5	47,802.

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.	
6	<input type="checkbox"/> The corporation is using the adjusted seasonal installment method.
7	<input checked="" type="checkbox"/> The corporation is using the annualized income installment method.
8	<input checked="" type="checkbox"/> 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	9	02/15/20	03/15/20	06/15/20	09/15/20
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	10				
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	11	152,505.	47,000.	20,000.	
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	12		152,505.	199,505.	219,505.
13 Add lines 11 and 12	13		199,505.	219,505.	219,505.
14 Add amounts on lines 16 and 17 of the preceding column	14				
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	152,505.	199,505.	219,505.	219,505.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	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 from line 15. Then go to line 12 of the next column	18	152,505.	199,505.	219,505.	

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.

LHA For Paperwork Reduction Act Notice, see separate instructions. Form 2220 (2019)

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 4/15/2019 and before 7/1/2019	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 6\% (0.06)}{365}$	22 \$	\$	\$	\$
23 Number of days on line 20 after 06/30/2019 and before 10/1/2019	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 5\% (0.05)}{365}$	24 \$	\$	\$	\$
25 Number of days on line 20 after 9/30/2019 and before 1/1/2020	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 5\% (0.05)}{365}$	26 \$	\$	\$	\$
27 Number of days on line 20 after 12/31/2019 and before 4/1/2020	27			
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 5\% (0.05)}{366}$	28 \$	\$	\$	\$
29 Number of days on line 20 after 3/31/2020 and before 7/1/2020	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{366}$	30 \$	\$	\$	\$
31 Number of days on line 20 after 6/30/2020 and before 10/1/2020	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{366}$	32 \$	\$	\$	\$
33 Number of days on line 20 after 9/30/2020 and before 1/1/2021	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{366}$	34 \$	\$	\$	\$
35 Number of days on line 20 after 12/31/2020 and before 3/16/2021	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$	36 \$	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37 \$	\$	\$	\$
38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns	38			\$ 0.

* 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.

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method

See instructions.

Form 1120-S 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.

Table with 5 columns: (a) First 3 months, (b) First 5 months, (c) First 8 months, (d) First 11 months. Rows include taxable income for various periods (1-3), calculations (4-6), and final tax amounts (14-19).

Part II Annualized Income Installment Method

		(a)	(b)	(c)	(d)
		First <u>2</u> months	First <u>3</u> months	First <u>6</u> months	First <u>9</u> months
20	Annualization periods (see instructions)				
21	Enter taxable income for each annualization period. See instructions for the treatment of extraordinary items				
22	Annualization amounts (see instructions)	6.000000	4.000000	2.000000	1.333330
23a	Annualized taxable income. Multiply line 21 by line 22				
23b	Extraordinary items (see instructions)				
23c	Add lines 23a and 23b				
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				
25	Enter any alternative minimum tax (trusts only) for each payment period (see instructions)				
26	Enter any other taxes for each payment period. See instr.				
27	Total tax. Add lines 24 through 26				
28	For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions				
29	Total tax after credits. Subtract line 28 from line 27. If zero or less, enter -0-				
30	Applicable percentage	25%	50%	75%	100%
31	Multiply line 29 by line 30				

Part III Required Installments

		1st installment	2nd installment	3rd installment	4th installment
		Note: Complete lines 32 through 38 of one column before completing the next column.			
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 smaller of the amounts in each column from line 19 or line 31	0.	0.	0.	0.
33	Add the amounts in all preceding columns of line 32. See instructions				
34	Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0-				
35	Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter	11,951.	11,950.	11,951.	11,950.
36	Subtract line 38 of the preceding column from line 37 of the preceding column		11,951.	23,901.	35,852.
37	Add lines 35 and 36	11,951.	23,901.	35,852.	47,802.
38	Required installments. Enter the smaller of line 34 or line 37 here and on page 1 of Form 2220, line 10. See instructions	0.	0.	0.	0.

Form 2220 (2019)

**** ANNUALIZED INCOME INSTALLMENT METHOD USING STANDARD OPTION**

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
HADIR OFAIMME INVESTMENT	33,377.	33,377.	
INTEREST INCOME	1,597.	1,597.	
JVP II OPP	279.	279.	
TOTAL TO PART I, LINE 3	35,253.	35,253.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
GENERATION INVESTMENT MANAGEMENT SCHWAB	11,371. 1,664,902.	0. 0.	11,371. 1,664,902.	11,371. 1,664,902.	
TO PART I, LINE 4	1,676,273.	0.	1,676,273.	1,676,273.	

FORM 990-PF RENTAL INCOME STATEMENT 3

KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
RENTAL INCOME	1	1,853,410.
TOTAL TO FORM 990-PF, PART I, LINE 5A		1,853,410.

FORM 990-PF	OTHER INCOME		STATEMENT	4
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
CONSULTING	25,200.	0.		
CATERING	41,808.	0.		
TOTAL TO FORM 990-PF, PART I, LINE 11	67,008.	0.		

FORM 990-PF	LEGAL FEES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL	182,271.	169,961.		0.	
TO FM 990-PF, PG 1, LN 16A	182,271.	169,961.		0.	

FORM 990-PF	ACCOUNTING FEES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING	42,300.	1,300.		0.	
TO FORM 990-PF, PG 1, LN 16B	42,300.	1,300.		0.	

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT CONSULTING	94,000.	94,000.		0.	
OTHER CONSULTING FEES	181,269.	38,625.		110,557.	
MARKETING	10,287.	0.		10,287.	
PAYROLL FEES	23,260.	0.		0.	
TO FORM 990-PF, PG 1, LN 16C	308,816.	132,625.		120,844.	

FORM 990-PF	TAXES			STATEMENT	8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
EXCISE TAXES	82,000.	0.		0.	
PAYROLL TAXES	157,690.	52,616.		62,460.	
STATE TAXES	47,235.	0.		0.	
PROPERTY TAXES	62,990.	62,990.		0.	
SALES & USE TAX	422.	0.		0.	
TO FORM 990-PF, PG 1, LN 18	350,337.	115,606.		62,460.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	9
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
SYSTEMS SUPPORT	47,669.	8,909.		8,474.	
OFFICE EXPENSES	193,834.	29,019.		77,292.	
SUPPLIES	42,561.	17,911.		16,948.	
MAINTENANCE & REPAIRS	234,348.	216,014.		8,998.	
COMMUNITY EVENTS	41,204.	0.		27,931.	
INSURANCE	97,958.	66,421.		0.	
VILLAS EXPENSE	4,440.	4,440.		0.	
OTHER EXPENSES	8,331.	801.		3,148.	
SECURITY	92,027.	58,752.		13,461.	
INVESTMENT EXPENSES	197,536.	197,536.		0.	
MEALS & ENTERTAINMENT	12,705.	670.		3,875.	
TO FORM 990-PF, PG 1, LN 23	972,613.	600,473.		160,127.	

FORM 990-PF	OTHER INCREASES IN NET ASSETS OR FUND BALANCES	STATEMENT	10
DESCRIPTION		AMOUNT	
UNREALIZED GAIN ON INVESTMENTS		1,345,748.	
PRESENT VALUE OF CONTRIBUTIONS ADJUSTMENT GAAP		1,256,859.	
TOTAL TO FORM 990-PF, PART III, LINE 3		2,602,607.	

FORM 990-PF	CORPORATE BONDS	STATEMENT	11
DESCRIPTION	BOOK VALUE	FAIR MARKET	VALUE
BOND FUNDS	19,858,934.	19,858,934.	
TOTAL TO FORM 990-PF, PART II, LINE 10C	19,858,934.	19,858,934.	

FORM 990-PF	OTHER INVESTMENTS	STATEMENT	12
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
ALTERNATIVE INVESTMENT	FMV	14,009,945.	14,009,945.
EQUITY SECURITIES	FMV	35,124,861.	35,124,861.
TOTAL TO FORM 990-PF, PART II, LINE 13		49,134,806.	49,134,806.

FORM 990-PF

SCHEDULE OF CONTROLLED ENTITIES
PART VII-A, LINE 11

STATEMENT 13

NAME OF CONTROLLED ENTITY

EMPLOYER ID NO

LF VILLAS, LLC

TAX EXEMPT

ADDRESS

EXCESS BUSINESS HOLDING [] YES [X] NO

441 SAXONY ROAD
ENCINITAS, CA 92024

NAME OF CONTROLLED ENTITY

EMPLOYER ID NO

LF ENCINITAS PROPERTIES, LLC

45-4867829

ADDRESS

EXCESS BUSINESS HOLDING [] YES [X] NO

441 SAXONY ROAD
ENCINITAS, CA 92024

NAME OF CONTROLLED ENTITY

EMPLOYER ID NO

LF MANAGER LLC

TAX EXEMPT

ADDRESS

EXCESS BUSINESS HOLDING [] YES [X] NO

441 SAXONY ROAD
ENCINITAS, CA 92024

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS STATEMENT 14
 TRUSTEES AND FOUNDATION MANAGERS

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ROBERT BRUNST, M.D., PH.D. 441 SAXONY RD ENCINITAS, CA 92024	CFO AND TREASURER 2.00	4,000.	0.	0.
BERNARD REITER 441 SAXONY RD ENCINITAS, CA 92024	CHAIRMAN 2.00	0.	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	6,000.	0.	0.
JAMES S. FARLEY 441 SAXONY RD ENCINITAS, CA 92024	PRESIDENT/CEO 40.00	503,802.	42,547.	0.
CHARLENE SEIDLE 441 SAXONY RD ENCINITAS, CA 92024	EVP/EXECUTIVE DIRECTOR 40.00	322,128.	49,233.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		847,930.	91,780.	0.

FORM 8865		AFFILIATION SCHEDULE		STATEMENT	15
NAME	ADDRESS	IDENTIFYING NUMBER	TOTAL ORDINARY INCOME OR (LOSS)	CK IF FOR- EIGN P'SH	
JVP VII CYBER STRATEGIC LP	24 HEBRON ROAD JERUSALEM, ISRAEL 93542	98-1135769			X
JVP MEDIA STUDIO	24 HEBRON ROAD JERUSALEM, ISRAEL 93542	55-0227300			X

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

Department of the Treasury
Internal Revenue Service

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

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

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

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

Type or print	Name of exempt organization or other filer, see instructions. LEICHTAG FOUNDATION	Taxpayer identification number (TIN) 33-0466189
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 441 SAXONY ROAD	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ENCINITAS, CA 92024	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

LEICHTAG FOUNDATION

- The books are in the care of ▶ **441 SAXONY ROAD - ENCINITAS, CA 92024**
Telephone No. ▶ **760.929.1090** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **AUGUST 16, 2021**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning **OCT 1, 2019**, and ending **SEP 30, 2020**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	110,000.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	219,505.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.