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Department of the Treasury

Internal Revenue Service

As Filed Data -

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2018

OMB No 1545-0052

Form 990-PF

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

| For | caler | ndar year 2018, or tax year beginning 01-01-20 | 018 , ar | nd ending | 12-31- | 2018 | | |
|----------------|----------|---|------------------------------|--------------|--------------|---|------------------------------------|----|
| HY | MAN LE | indation EVINE FAMILY FOUNDATION | | | | entification numb | er | |
| L'E | OR V'D | OOR | | 20- | 1917833 | | | |
| | | d street (or P O box number if mail is not delivered to street address) LSHIRE BLVD SUITE 300 |) Room/suite | ВТ | elephone nu | ımber (see ınstructio | ons) | |
| | | | | (31 | 0) 274-5291 | 1 | | |
| | | n, state or province, country, and ZIP or foreign postal code ILLS, CA 90212 | | C If | exemption | application is pendii | ng, check here | |
| G Ch | eck al | ll that apply 🔲 Initial return 🔲 Initial return of a | former public charity | D 1 | . Foreign or | ganızatıons, check h | nere | _ |
| | | \square Final return \square Amended return | | 2 | | ganizations meeting | | = |
| | | \square Address change $\ \square$ Name change | | | , | k here and attach co | | _ |
| | | $ \nabla$ pe of organization $ \nabla$ Section 501(c)(3) exempt private | foundation | | | undation status was n 507(b)(1)(A), che | | |
| | Section | n 4947(a)(1) nonexempt charitable trust 🔲 Other taxabl | le private foundation | | | | | |
| | | xet value of all assets at end from Part II, col (c), | ☑ Cash ☐ Accru | | | ation is in a 60-mon n 507(b)(1)(B), che | | |
| | | ●\$ 9,442,861 | he on cash hasis) | | ander sectio | 11 507(b)(1)(b), the | CK Here | |
| | | | T | | | Т | | _ |
| Pa | rt I | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily | (a) Revenue and expenses per | (b) Net in | vestment | (c) Adjusted net | (d) Disbursement for charitable | |
| | | equal the amounts in column (a) (see instructions) | books | In- | come | income | purposes (cash basıs onl | у) |
| | 1 | Contributions, gifts, grants, etc , received (attach | | | | | , | _ |
| | | schedule) | 242,944 | • | | | | _ |
| | 2 | Check ► ☐ If the foundation is not required to attach Sch B | | | | | | |
| | 3 | Interest on savings and temporary cash investments | | | | | | _ |
| | 4 | Dividends and interest from securities | 386,557 | | 386,557 | | | _ |
| | 5a | Gross rents | | | | | | |
| | b | Net rental income or (loss) | - | | | | | |
| ĸ | 6a | Net gain or (loss) from sale of assets not on line 10 | 87,083 | | | | | |
| Revenue | b | Gross sales price for all assets on line 6a 3,285,622 | 2 | | | | | |
| Re | 7 | Capital gain net income (from Part IV, line 2) | | | 87,083 | | | |
| | 8 | Net short-term capital gain | | | | | | |
| | 9 | Income modifications | | | | | | |
| | 10a b | Gross sales less returns and allowances Less Cost of goods sold | <u> </u> | | | | | |
| | c | Gross profit or (loss) (attach schedule) | 1 | | | | | _ |
| | 11 | Other income (attach schedule) | | | | | + | _ |
| | 12 | Total. Add lines 1 through 11 | 716,584 | | 473,640 | | + | _ |
| | 13 | Compensation of officers, directors, trustees, etc | , 10,55 | | 0 | | + | _ |
| | 14 | Other employee salaries and wages | | | | | | _ |
| S | 15 | Pension plans, employee benefits | | | | | + | |
| 156 | 16a | Legal fees (attach schedule) | | | | | | _ |
| Expenses | ь | Accounting fees (attach schedule) | 2,525 | | 1,262 | | 1,2 | 63 |
| | С | Other professional fees (attach schedule) | 41,720 | | 41,720 | | 1 | _ |
| tive | 17 | Interest | | | | | | _ |
| Administrative | 18 | Taxes (attach schedule) (see instructions) | 10,464 | | 703 | | 1 | 05 |
| IIIS | 19 | Depreciation (attach schedule) and depletion | | | | | 1 | _ |
| Ē | 20 | Occupancy | | | | | 1 | _ |
| ۲ ک | 21 | Travel, conferences, and meetings | | | | | | _ |
| and | 22 | Printing and publications | | | | | | |
| bu | 23 | Other expenses (attach schedule) | | | | | | _ |
| Operating | 24 | Total operating and administrative expenses. | | | | | | |
| <u>pe</u> | | Add lines 13 through 23 | 54,709 | | 43,685 | | 1,3 | |
| ں | 25 | Contributions, gifts, grants paid | 487,382 | | | | 487,3 | 82 |
| | 26 | Total expenses and disbursements. Add lines 24 and 25 | 542,091 | | 43,685 | | 488,7 | 50 |
| | 27 | Subtract line 26 from line 12 | 3.2,331 | | ,000 | | , | |
| | а | Excess of revenue over expenses and | | | | | | |
| | ь | disbursements Net investment income (if negative, enter -0-) | 174,493 | 1 | 420.055 | | + | _ |
| | С | Adjusted net income (if negative, enter -0-) | | | 429,955 | | | _ |
| For | | work Reduction Act Notice, see instructions. | 1 | L Cat N | lo 11289) | <u> </u> (Fo | <u> </u> orm 990-PF (201 | .8 |
| | | | | | / | . 10 | (20 | - |

3,702,942

4,416,372

25,000

8,819,013

8,819,013

8,819,013

8,819,013

0

4,004,350

4,570,536

200,000

25,000

8,966,041

8,966,041

8,966,041

8,966,041

2 3

4

5

8,819,013 174,493

8,993,506

8,966,041 Form **990-PF** (2018)

27,465

4,051,639

4,998,949

201,118

25,000

9,442,861

| | 6 |
|--------|-----|
| | 7 |
| 2 | 8 |
| Assets | 9 |
| As | 10a |
| | ь |
| | С |
| | 11 |

12

13 14

15

16

17

18

19

20

21

22

23

24 25

28

29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

3

5

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule) ▶

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow SFAS 117, check here ▶ ✓

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

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

Analysis of Changes in Net Assets or Fund Balances

Foundations that follow SFAS 117, check here

and complete lines 24 through 26 and lines 30 and 31.

Less accumulated depreciation (attach schedule) ▶

Total assets (to be completed by all filers—see the

Land, buildings, and equipment basis -

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe ▶_

Unrestricted

Permanently restricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶ .

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

Temporarily restricted

Grants payable

Investments—U S and state government obligations (attach schedule)

Investments—corporate bonds (attach schedule)

| • , | e the kınd(s) of property sold (e g , i irehouse, or common stock, 200 shs | • | How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
|--|--|---------------------------------|--|---|-------------------------------------|
| 1a See Additional Data Tabl | e | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| e | | | | | |
| (e) | (f) | | (g) | , | h) |
| Gross sales price | Depreciation allowed | | other basis | | r (loss) |
| a See Additional Data Table | (or allowable) | pius expe | ense of sale | (e) plus (r |) minus (g) |
| | e | | | | |
| b | | | | | |
| C | | | | | |
| d | | | | | |
| e | | | 10/21/60 | | |
| Complete only for assets | s showing gain in column (h) and owi | | | | (i) h) gain minus |
| (i) | (j) Adjusted basis | | (k) of col(ı) | | less than -0-) or |
| F M V as of 12/31/69 | as of 12/31/69 | | (j), if any | | om col (h)) |
| a See Additional Data Table | e | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| e | | | | | |
| | gain or (loss) as defined in sections 1 rt I, line 8, column (c) (see instruction | . , | · } | 3 | |
| | Jnder Section 4940(e) for Re | | | | |
| For optional use by domestic p | rivate foundations subject to the sec | tion 4940(a) tax on ne | t investment incor | ne) | |
| if section 4940(d)(2) applies, le | eave this part blank | | | | |
| | e section 4942 tax on the distributable qualify under section 4940(e) Do | | ın the base perioc | 7 Ye | es 🗸 No |
| 1 Enter the appropriate an | nount in each column for each year, | see instructions before | making any entrie | 25 | |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitab | le-use assets | (d) Distribution rati (col (b) divided by c | |
| 2017 | 448,132 | | 9,227,755 | . , , | 0 048563 |
| 2016 | 428,797 | | 8,861,541 | | 0 048389 |
| 2015 | 422,677 | | 8,437,581 | | 0 050095 |
| 2014 | 363,525 | | 7,449,338 | | 0 048800 |
| 2013 | 345,426 | | 6,834,381 | | 0 050542 |
| 2 Total of line 1, column (| d) | | 2 | | 0 246389 |
| number of years the four | o for the 5-year base period—divide to adation has been in existence if less t | than 5 years | <u>3</u> | | 0 049278 |
| | ncharitable-use assets for 2018 from | Part X, line 5 | 4 | | 9,527,679 |
| 5 Multiply line 4 by line 3 | | | 5 | | 469,505 |
| | ent income (1% of Part I, line 27b) | | 6 | | 4,300 |
| | | | | | 473,805 |
| | ons from Part XII, line 4 , | | 8_ | | 488,750 |
| If line 8 is equal to or gre | eater than line 7, check the box in Pa | irt VI, line 1b, and com | plete that part usi | ng a 1% tax rate Se | e the Part VI |

Page **6**

| 1. | Statements Regard | iiiig | ACTIVITIES IOI WITHCIT | FOITH 4720 May be | Kequirea (continuea |) | | | |
|------------|--|--------|------------------------------|----------------------------|---------------------------------|-------------|----------------------|-------|-------|
| 5a | During the year did the foundation p | oay o | r incur any amount to | | | | | Yes | No |
| | (1) Carry on propaganda, or otherw | vise a | ittempt to influence legisl | ation (section 4945(e))? | ☐ Yes | ✓ No | , | | |
| | (2) Influence the outcome of any sp | pecifi | c public election (see sect | tion 4955), or to carry | | | | | |
| | on, directly or indirectly, any vo | | - | | · · · 🔲 Yes | ✓ No | , | | |
| | (3) Provide a grant to an individual | for t | ravel, study, or other sım | ılar purposes? | | ✓ No | | | |
| | (4) Provide a grant to an organization section 4945(d)(4)(A)? See in | | • | , - | d | | | | |
| | (5) Provide for any purpose other t | han r | eligious, charitable, scien | tific, literary, or | ⊔ Yes | ⊻ No | ' | | |
| | educational purposes, or for the | • | · · | | ∟ Yes | ✓ No | , | | |
| b | If any answer is "Yes" to $5a(1)-(5)$, | did a | any of the transactions fa | nd to qualify under the ex | ceptions described in | | | | |
| | Regulations section 53 4945 or in a | curre | ent notice regarding disas | ter assistance? See instr | ructions | | 5b | | |
| | Organizations relying on a current n | otice | regarding disaster assist | ance check here | | П | | | |
| C | If the answer is "Yes" to question 5a | a(4), | does the foundation clain | n exemption from the | | _ | | | |
| | tax because it maintained expenditu | ire re | sponsibility for the grant? | ⁷ | · · 🔲 Yes | □ No | , | | |
| | If "Yes," attach the statement requi | red b | y Regulations section 53 | 4945-5(d) | | | ´ | | |
| 6 a | Did the foundation, during the year, | rece | ive any funds, directly or | indirectly, to pay premi | ums on | | | | |
| | a personal benefit contract? | | | | · 🔲 Yes | . | _ | | |
| b | Did the foundation, during the year, | | | | res : | NC | ° 6ь | | No |
| | If "Yes" to 6b, file Form 8870 | | | | | | | | |
| 7a | At any time during the tax year, wa | s the | foundation a party to a p | prohibited tax shelter tra | nsaction? Yes | | | | |
| b | If yes, did the foundation receive ar | | | | ∟ res i | ⊻ No | 7b | | |
| 8 | Is the foundation subject to the sec | | • | | | | | | |
| _ | excess parachute payment during th | | , , , | | | | | | |
| | | | | | ∟ Yes | ✓ No | | | l |
| Pai | and Contractors | JIIIC | ers, Directors, Trust | ices, roundation ma | anagers, Highly Paid | Emp | ioyees, | | |
| 1 | List all officers, directors, truste | es. fo | oundation managers ar | nd their compensation | . See instructions | | | | |
| | | | b) Title, and average | (c) Compensation (If | | Τ, | - \ | | |
| | (a) Name and address | | hours per week | not paid, enter | employee benefit plans a | and 1 | e) Expen other al | | |
| | | ļ | devoted to position | -0-) | deferred compensation | n | | | |
| See / | Additional Data Table | 1 | | | | | | | |
| | | | | | | | | | |
| | | 1 | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | 1 | | | | | | | |
| 2 | Compensation of five highest-pa | id en | nployees (other than t | hose included on line | 1-see instructions). If | none, | enter " | NONE. | ." |
| | | | (b) Title, and average | | (d) Contributions to | | | | |
| (a) | Name and address of each employee | paid | hours per week | (c) Compensation | employee benefit | (€ | Expens | | |
| | more than \$50,000 | | devoted to position | | plans and deferred compensation | | other all | owanc | es |
| NON | =============================== | | | | Compensation | | | | |
| | _ | | | | | | | | |
| | | | | | | | | | |
| | | | - | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
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| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Tota | I number of other employees paid ov | er \$5 | 0,000 | | | | | | |
| | | | | | | F | orm 99 0 | 0-PF | (2018 |

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|--|---------------------------------------|---------------------------|
| Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued) | Foundation Managers, Highly Pa | id Employees, |
| 3 Five highest-paid independent contractors for professional service | es (see instructions). If none, enter | "NONE". |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| 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 releving and other beneficiaries served, conferences convened, research papers produc | | Expenses |
| 1 | | |
| 2 | | |
| | | |
| 3 | | |
| | | |
| 4 | | |
| Part IX-B Summary of Program-Related Investments (see in | astructions) | |
| Describe the two largest program-related investments made by the foundation during the | <u>'</u> | Amount |
| 1 | | |
| | | |
| 2 | | |
| All other program-related investments See instructions | | |
| 3 | | |
| Total. Add lines 1 through 3 | | P 0 |
| | | Form 990-PF (2018) |

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

3

4

5

2

3a 3h

4

5

488.750

4,300

484.450

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2018

Page 9

472,084

472.084

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|---|----|---|---|--|
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| 90-PF (2 | 018) | | | |
|----------|----------------------|------|---------------|--|
| XIII | Undistributed Income | (see | instructions) | |

| Form | 990-PF | (2 | 018) |
|------|--------|----|------|
| | | Į | 11- |

- 1 Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018
- a Enter amount for 2017 only. Excess distributions carryover, if any, to 2018
- **b** Total for prior years a From 2013. **b** From 2014. . . .

b Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election

5 Excess distributions carryover applied to 2018

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . .

b Excess from 2015. . c Excess from 2016. . . . d Excess from 2017. . . e Excess from 2018. . .

(If an amount appears in column (d), the

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2013 not

indicated below:

d Applied to 2018 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

- 9.949 4,017 11 929

(a)

Corpus

25.895

16.666

42,561

9.949

32,612

4.017 11,929

16.666

0

(b)

Years prior to 2017

(c)

2017

- c From 2015. . . d From 2016. . . . e From 2017.
- f Total of lines 3a through e.
- 4 Qualifying distributions for 2018 from Part XII, line 4 🕨 \$ a Applied to 2017, but not more than line 2a



| inter gross | amounts unless otherwise indicated | Unrelated bu | isiness income | Excluded by section | 512, 513, or 514 | (e) Related or exempt |
|---|--|--|----------------------|-----------------------------------|--------------------|--|
| 1 Program | n service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function income (See instructions) |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| - | | | | | | |
| 2 Membe3 Interes | and contracts from government agencies ership dues and assessments | | | | | |
| 4 Divider | nents nds and interest from securities. ntal income or (loss) from real estate | | | 14 | 386,557 | |
| | financed property | | | | | |
| | ebt-financed property. | | | | | |
| | ntal income or (loss) from personal property | | | | | |
| | nvestment income | | | | | |
| B Gain or invento | r (loss) from sales of assets other than | | | 10 | 97.002 | |
| | ome or (loss) from special events | | | 18 | 87,083 | |
| | profit or (loss) from sales of inventory | | | | | |
| 1 Other i | revenue a | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | al Add columns (b), (d), and (e). | | 0 | | 473,640 | |
| | | | | | / | |
| | Add line 12, columns (b), (d), and (e) | | | | 3 | 473,640 |
| 3 Total. (See wo | Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) | | 13 | 3 | 473,640 |
| 3 Total. (See wo | Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | , |
| 3 Total. (See wo Part XVI Line No. | Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions. | lations) ne Accomplish ncome is reporte | ment of Exem | pt Purposes F Part XVI-A contribu | ted importantly to | 473,640 |

| • | , |
|---|---|
| | Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations |
| | Exchipt organizations |

| Part XVII | Exempt Organia | zations | | | | • | | | |
|---------------------|--|-------------------|---------------------------------|---|-------------------------------------|---|----------------------------|------------------|-----------------|
| | rganization directly or in than section 501(c)(3) | | | | | ion described in section 5 ins? | 01 | Yes | No |
| a Transfers | from the reporting foun | dation to a no | ncharitable ex | empt organization | of | | | | |
| (1) Cash | | | | | | | | | No |
| (2) Other assets | | | | | | | | | No |
| b Other tran | nsactions | | | | | | | | |
| | s of assets to a nonchari | • | - | | | | 1b(1) | | No |
| | hases of assets from a n | | | | | | 1b(2) | | No |
| ` ' | al of facilities, equipmen | • | | | | | 1b(3) | | No |
| | nbursement arrangemen Is or loan guarantees. | | | | | | 1b(4) 1b(5) | | No No |
| | rmance of services or m | | | | | | 1b(5) | | No |
| | f facilities, equipment, n | • | | | | | 1c | | No |
| - | | | | | | lways show the fair mark | | | |
| of the goo | ods, other assets, or ser | vices given by | the reporting | foundation If the | foundation receiv | yed less than fair market sets, or services received | | | |
| a) Line No | (b) Amount involved | (c) Name of n | noncharitable exe | mpt organization | (d) Description | of transfers, transactions, and | sharing arra | naemen | its |
| | (- , | | | γ | (-, | | | <u> </u> | |
| | | | | | | | | | |
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| | | | | | | | | | |
| 2a Is the fou | ndation directly or indire | ectly affiliated | with, or relate | d to, one or more | tax-exempt orga | nızatıons | | | |
| | in section 501(c) (other | • | • | * | | | ✓ No | | |
| | complete the following so | | ()()/ | | | | | | |
| | (a) Name of organization | | (1 |) Type of organization | on | (c) Description of r | elationship | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| of m | ny knowledge and belief | , it is true, coi | I have examın rrect, and com | ed this return, incl plete Declaration | uding accompan of preparer (othe | ying schedules and stater r than taxpayer) is based | nents, and on all infoi | to the mation | best 1 of |
| Sign | ch preparer has any kno | wledge | | 2019-04-29 | | | ay the IRS di | scuss th | 115 |
| lere | | | | 2015 0 1 25 | \ | w | turn ith the prepa | rer show | vn |
| | Signature of officer or t | rustee | | Date | Title | | elow see instr)? | ✓ Yes I | □ _{No} |
| | Print/Type preparer's | name | Preparer's Sigr | nature | Date | Check if self- | | | |
| Paid | TODD POSIVAK | | | | | employed ▶ □ | P01317 | '396 | |
| reparer | Thin shance 100 | VAK & JOFFE | LLP | | 1 | Firm | 's EIN ▶26 | -36798 | 392 |
| Jse Only | | 150 W OLVMD | PIC BLVD STE 8 | 260 | | | | | |
| | | S ANGELES, (| | JOU | | Pho | ne no (310 |) 473-7 | 7317 |
| | I | | | | | | | | |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation CHARLES SCHWAB Р CHARLES SCHWAB Р RIM SECURITIES Ρ RIM SECURITIES Р Ρ RIM SECURITIES Ρ NII HOLDINGS SETTLEMENT CAPITAL GAINS DIVIDENDS Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h Depreciation allowed Gain or (loss) (e) Gross sales price Cost or other basis (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 441,523 448,836 -7,313 1,918,782 1,948,486 -29,70455.490 60,074 -4,584 749.668 709,462 40,206 110,081 31,681 78,400 22 22 10.056 10.056 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -7,313 -29,704 -4,584 40.206 78,400 22 10,056

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, not paid, enter hours per week (e) other allowances Contributions to (b) devoted to position -0-) employee benefit plans and deferred compensation DENA SCHECHTER **PRESIDENT** ۵ ٥ 0 1 00 9460 WILSHIRE BLVD STE 300 BEVERLY HILLS, CA 90212 ROBERT LEVINE 0 0 VICE PRESIDENT n 1 00 9460 WILSHIRE BLVD STE 300 BEVERLY HILLS, CA 90212 0 MELDON LEVINE **TREASURER** 0 1 00 9460 WILSHIRE BLVD STE 300 BEVERLY HILLS, CA 90212 NANCY CLAVIN **SECRETARY** 0 0 0 1 00 9460 WILSHIRE BLVD STE 300 BEVERLY HILLS, CA 90212 ADAM PAUL LEVINE 0 0 DIRECTOR 0 1 00 9460 WILSHIRE BLVD STE 300 BEVERLY HILLS, CA 90212 ANDREW CLAVIN DIRECTOR 0 0 1 00 9460 WILSHIRE BLVD STE 300 BEVERLY HILLS, CA 90212 ASHER LEV SCHECHTER 0 DIRECTOR 0 1 00 9460 WILSHIRE BLVD STE 300 BEVERLY HILLS, CA 90212 CARA E LEVINE 0 0 DIRECTOR 0 1 00 9460 WILSHIRE BLVD STE 300 BEVERLY HILLS, CA 90212 DANIEL CLAVIN 0 0 DIRECTOR 0 1 00 9460 WILSHIRE BLVD STE 300 BEVERLY HILLS, CA 90212 ELIZABETH COHN DIRECTOR ٥ ٥ 0 1 00 9460 WILSHIRE BLVD STE 300 BEVERLY HILLS, CA 90212 JACOB C LEVINE DIRECTOR 0 0 0 1 00 9460 WILSHIRE BLVD STE 300 BEVERLY HILLS, CA 90212 JOSHUA SCHECHTER DIRECTOR 0 0 1 00 9460 WILSHIRE BLVD STE 300 BEVERLY HILLS, CA 90212 MIEKE NEUMANN DIRECTOR 0 0 0 1 00 9460 WILSHIRE BLVD STE 300 BEVERLY HILLS, CA 90212 NOAH BLUM SCHECHTER DIRECTOR 0 0 0 1 00 9460 WILSHIRE BLVD STE 300 BEVERLY HILLS, CA 90212

Form 990PF Part XV Line 1a - 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).

DENA SCHECHTER

MELDON LEVINE

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| AMERICAN CANCER SOCIETY PO BOX 22478 OKLAHOMA CITY, OK 73123 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5,000 |
|--|------|-------------------|-------------------|-------|
| a raid during the year | | | | 1 |

| OKLAHOMA CITY, OK 73123 | | | | |
|---|------|-------------------|-------------------|--------|
| AMERICAN CONSTITUTION SOCIETY 1333 H STREET 11TH FLR WASHINGTON, DC 20005 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,500 |
| AMERICAN FRIENDS OF TEL AVIV | NONE | PUBLIC | CHARITY/EDUCATION | 10,000 |

| 1333 H STREET 11TH FLR WASHINGTON, DC 20005 | THO IT | CHARITY | | 2,500 |
|--|--------|-------------------|-------------------|--------|
| AMERICAN FRIENDS OF TEL AVIV UNIVERSITY 39 BROADWAY STE 1510 NEW YORK, NY 10006 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 10,000 |

| WASHINGTON, DC 20005 | | CHARLETT | | |
|--|------|-------------------|-------------------|---------|
| AMERICAN FRIENDS OF TEL AVIV UNIVERSITY 39 BROADWAY STE 1510 NEW YORK, NY 10006 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 10,000 |
| Total | | | ▶ 3a | 487,382 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

| a Paid during the year | | | |
|-------------------------------------|--|-----------|--|
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | |

| AMEDICANS FOR DEACE | NONE | DUBLIC | CHARITY/EDUCATION | 2 500 |
|---|------|-------------------|-------------------|-------|
| AMERICAN JEWISH UNIVERSITY 15600 MULHOLLAND DRIVE BEL AIR, CA 90077 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5,000 |
| | | | | |

| BEL AIR, CA 90077 | | | | |
|---|------|-------------------|-------------------|-------|
| AMERICANS FOR PEACE 2100 M STREET NW STE 619 WASHINGTON, DC 20037 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,500 |
| ARAB AMERICAN INSTITUTE | NONE | PUBLIC | CHARITY/EDUCATION | 1,000 |

| 2100 M STREET NW STE 619 WASHINGTON, DC 20037 | NONE | CHARITY | CHARITY/EDUCATION | 2,500 |
|---|------|-------------------|-------------------|-------|
| ARAB AMERICAN INSTITUTE 1600 K STREET NW STE 601 WASHINGTON, DC 20006 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |

| WASHINGTON, DC 20037 | | | | |
|---|------|-------------------|-------------------|---------|
| ARAB AMERICAN INSTITUTE 1600 K STREET NW STE 601 WASHINGTON, DC 20006 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |
| Total | | | ▶ 3a | 487,382 |

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | | |
|---|------|-------------------|-------------------|-------|
| ASPCAPO BOX 96929 WASHINGTON, DC 20090 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 4,000 |

| ASPCAPO BOX 96929 WASHINGTON, DC 20090 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 4,000 |
|--|------|-------------------|-------------------|-------|
| B'TSELEMPO BOX 34064 WASHINGTON, DC 20043 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5,000 |
| | | | | |

| B'TSELEMPO BOX 34064 WASHINGTON, DC 20043 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5,000 |
|--|------|-------------------|-------------------|-------|
| BAD ASS BOXES 5850 CANOGA AVE STE 220 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 4,500 |

| WASHINGTON, DC 20043 | | CHARITT | | |
|--|------|-------------------|-------------------|-------|
| BAD ASS BOXES 5850 CANOGA AVE STE 220 WOODLAND HILLS, CA 91367 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 4,500 |

| BAD ASS BOXES NONE PUBLIC CHARITY/EDUCATION 4,500 5850 CANOGA AVE STE 220 WOODLAND HILLS, CA 91367 HONE PUBLIC CHARITY/EDUCATION 4,500 | Total | | | ▶ 3a | 487,382 |
|---|-------|------|-------------------|-------------------|---------|
| | | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 4,500 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

or substantial contributor

Name and address (home or business)

| a Paid during the year | | | | |
|--|------|-------------------|-------------------|-------|
| BERKLEY HILLEL2736 BANCROFT WAY BERKLEY, CA 94704 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |
| BEVERLY HILLS FIREFIGHTERS' | NONE | PUBLIC | CHARITY/EDUCATION | 1,000 |

| BEVERLY HILLS FIREFIGHTERS' ASSOCIATION PO BOX 1720 BEVERLY HILLS, CA 90213 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | |
|--|------|-------------------|-------------------|--|
| | | ı | | |

| PO BOX 1720 BEVERLY HILLS, CA 90213 | | CHARITT | | |
|---|------|-------------------|-------------------|-------|
| BRENNAN CENTER FOR JUSTICE 120 BROADWAY STE 1750 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5,000 |

| BEVERLY HILLS, CA 90213 | | | | |
|---|------|-------------------|-------------------|-------|
| BRENNAN CENTER FOR JUSTICE 120 BROADWAY STE 1750 NEW YORK, NY 10271 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5,000 |
| | | | | |

| NEW YORK, NY 10271 Total | | | ▶ 3a | 487,382 |
|---|------|-------------------|-------------------|---------|
| BRENNAN CENTER FOR JUSTICE 120 BROADWAY STE 1750 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

| , | or substantial contributor | | | |
|---|----------------------------|-------------------|-------------------|-------|
| a Paid during the year | | | | |
| BUCKCARDINAL CLUB 641 E CAMPUS DRIVE | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,030 |

| STANFORD, CA 94305 | | | | |
|--|------|-------------------|-------------------|-------|
| CALIFORNIA HEART CENTER 5836 WILSHIRE BLVD 3RD FLR BEVERLY HILLS, CA 90211 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 8,000 |

| 5836 WILSHIRE BLVD 3RD FLR BEVERLY HILLS, CA 90211 | NONE | CHARITY | CHARTITEDOCATION | 0,000 |
|---|------|-------------------|-------------------|-------|
| CENTRAL PARK CONSERVANCY 14 E 60TH STREET | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |

487,382

| 5836 WILSHIRE BLVD 3RD FLR BEVERLY HILLS, CA 90211 | | CHARITY | | |
|--|------|-------------------|-------------------|------|
| CENTRAL PARK CONSERVANCY 14 E 60TH STREET NEW YORK, NY 10022 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,00 |

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| CHABAD OF PARK CITYPO BOX 681818 PARK CITY, UT 84068 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 16,000 |
|---|------|-------------------|-------------------|--------|
| CHURCH IN OCEAN PARK 235 HILL STREET SANTA MONICA, CA 90405 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |

| CHURCH IN OCEAN PARK 235 HILL STREET SANTA MONICA, CA 90405 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |
|--|------|-------------------|-------------------|-------|
| CHURCH OF THE GOOD SHEPHERD 504 N ROXBURY DRIVE BEVERLY HILLS CA 90210 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |

| SANTA MONICA, CA 90405 | | | | |
|---|---------|-------------------|-------------------|-------|
| CHURCH OF THE GOOD SHEPHERD 504 N ROXBURY DRIVE BEVERLY HILLS, CA 90210 | | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |
| Total | 487,382 | | | |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

Total .

| a Paid during the year | | | | |
|------------------------|------|--------|-------------------|-------|
| COLLEGE MATCH | NONE | PUBLIC | CHARITY/EDUCATION | 2,000 |

| LOS ANGELES, CA 90012 | | 5.7. | | |
|---|------|-------------------|-------------------|--|
| COLLEGE SPRING 800 S FIGUEROA STREET STE 760 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | |

| COLLEGE SPRING 800 S FIGUEROA STREET STE 760 LOS ANGELES, CA 90017 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1, |
|--|------|-------------------|-------------------|-----|
| COLUMBIA JOURNALISM SCHOOL | NONE | PUBLIC | CHARITY/EDUCATION | 4,0 |

| LOS ANGELES, CA 90017 | | CHARTT | | |
|--|------|-------------------|-------------------|-------|
| COLUMBIA JOURNALISM SCHOOL 622 W 113TH STREET | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 4,000 |
| NEW YORK NY 1003E | | 1 | | |

| LOS ANGELES, CA 90017 | | | | |
|--|------|-------------------|-------------------|-------|
| COLUMBIA JOURNALISM SCHOOL 622 W 113TH STREET NEW YORK, NY 10025 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 4,000 |

.000

| COLUMBIA JOURNALISM SCHOOL | NONE | POBLIC | CHARITY/EDUCATION | 4,000 |
|----------------------------|------|---------|-------------------|-------|
| 622 W 113TH STREET | | CHARITY | | |
| NEW YORK, NY 10025 | | | | |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

| l | Name and address (home or business) | any foundation manager or substantial contributor | recipient | |
|---|-------------------------------------|--|-----------|--|
| I | a Paid during the year | | | |

| a Paid during the year | | | | |
|---------------------------------------|------|-------------------|-------------------|-------|
| DIDI HIRSCH MENTAL HEALTH SERVICES | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |
| ATICO C CEDITIVEDA DIVID | | | | |

| SERVICES 4760 S SEPULVEDA BLVD CULVER CITY, CA 90230 | | CHARITY | | |
|---|------|-------------------|-------------------|-------|
| DIRECT RELIEF27 S LA PATERA LANE SANTA BARBARA, CA 93117 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 7,500 |
| | | | | |

| COLVER CITT, CR 30230 | | | | |
|--|------|-------------------|-------------------|-------|
| DIRECT RELIEF27 S LA PATERA LANE SANTA BARBARA, CA 93117 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 7,500 |
| DISABLED AMERICAN VETERANS PO BOX 14301 CINCINNATI. OH 45250 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 3,500 |

| DIRECT RELIEF27 S LA PATERA LANE SANTA BARBARA, CA 93117 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 7,500 |
|--|------|-------------------|-------------------|-------|
| DISABLED AMERICAN VETERANS PO BOX 14301 CINCINNATI, OH 45250 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 3,500 |

| 5744177 5747657467, 677 33117 | | CHARLETT | | |
|--|------|-------------------|-------------------|---------|
| DISABLED AMERICAN VETERANS PO BOX 14301 CINCINNATI, OH 45250 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 3,500 |
| Total | | | ▶ 3a | 487,382 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| | | 2012120 | C | |
|--|------|-------------------|-------------------|-------|
| DOCTORS WITHOUT BORDERS USA PO BOX 5030 HAGERSTOWN, MD 21741 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5,000 |
| a Paid during the year | | | | |

| HAGERSTOWN, MD 21741 | | CHARTT | | |
|---|------|-------------------|-------------------|-------|
| GARY SINISE FOUNDATION PO BOX 50008 STUDIO CITY, CA 91614 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5,500 |
| GRUPEDSAC AV DE LAS FUENTES NO 184 NAUCALPAN 53950 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5,000 |

| GRUPEDSAC AV DE LAS FUENTES NO 184 NAUCALPAN 53950 MX | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5,000 |
|--|------|-------------------|-------------------|-------|
| PO BOX 50008 STUDIO CITY, CA 91614 | NONE | CHARITY | CHARITYEDUCATION | 5,500 |

| Total | | | ▶ 3a | 487,382 |
|--|------|-------------------|-------------------|---------|
| GRUPEDSAC AV DE LAS FUENTES NO 184 NAUCALPAN 53950 MX | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5,000 |
| STUDIO CITY, CA 91614 | | | | |

Recipient If recipient is an individual, Purpose of grant or Amount Foundation show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | | |
|--|------|-------------------|-------------------|-------|
| HARVARD LAW SCHOOL ANNUAL FUND 1563 MASSACHUSETTS AVE | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |

| CAMBRIDGE, MA 02138 | | CHARITT | | |
|--|------|-------------------|-------------------|-------|
| HUMAN RIGHTS FIRST 75 BROAD ST 31ST FLR NEW YORK, NY 10004 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 7,000 |
| | | | | |

| 350 FIFTH AVE 34TH FLR NEW YORK, NY 10118 | · |
|--|----------|
| HUMAN RIGHTS WATCH NONE PUBLIC CHARITY/EDUCATI | ON 2,500 |
| HUMAN RIGHTS FIRST NONE PUBLIC CHARITY/EDUCATI 75 BROAD ST 31ST FLR NEW YORK, NY 10004 CHARITY | ON 7,000 |

| Total | | | ▶ 3a | 487,382 |
|--|------|-------------------|-------------------|---------|
| HUMAN RIGHTS WATCH 350 FIFTH AVE 34TH FLR NEW YORK, NY 10118 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,500 |
| NEW YORK, NY 10004 | | CHARITT | | |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year INNER CITY LAW CENTER NONE PUBLIC CHARITY/EDUCATION 1,000 CLIADITY/

| LOS ANGELES, CA 90021 | | CHARITY | | |
|--|------|-------------------|-------------------|-------|
| J STREET EDUCATION FUND PO BOX 66073 WASHINGTON, DC 20035 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5,000 |
| JEWISH BIG BROTHERS BIG SISTERS OF LOS ANGELES 6505 WILSHIRE BLVD 6TH FLR LOS ANGELES, CA 90048 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |

| WASHINGTON, DC 20035 | | CHARTT | | |
|--|------|-------------------|-------------------|---------|
| JEWISH BIG BROTHERS BIG SISTERS OF LOS ANGELES 6505 WILSHIRE BLVD 6TH FLR LOS ANGELES, CA 90048 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,0 |
| Total | | | ▶ 3a | 487,382 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 1EWICH EVWILL CEDVICES NONE ם וופודכ CHARITY/EDUCATION 105 /117

| 3580 WILSHIRE BLVD STE 700 LOS ANGELES, CA 90010 | NONE | CHARITY | CHARITI/EDUCATION | 103,417 |
|--|------|-------------------|-------------------|---------|
| JEWISH VOICE FOR PEACE 1611 TELEGRAPH ROAD STE 1020 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |

| JEWISH VOICE FOR PEACE 1611 TELEGRAPH ROAD STE 1020 OAKLAND, CA 94612 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,0 |
|---|------|-------------------|-------------------|-----|
| KCRW1900 PICO BLVD | NONE | PUBLIC | CHARITY/EDUCATION | 2,0 |

Total . .

| OAKLAND, CA 94612 | | | | |
|--|------|-------------------|-------------------|-------|
| KCRW1900 PICO BLVD SANTA MONICA, CA 90405 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,000 |

487,382

▶ 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| 1 | | | I . | |
|---|------|-------------------|-------------------|-------|
| KINDER USAPO BOX 224846 DALLAS, TX 75222 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 3,000 |
| KUSCPO BOX 7913 | NONE | PUBLIC | CHARITY/EDUCATION | 2,500 |

| USCPO BOX 7913 OS ANGELES, CA 90007 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION |
|--|------|-------------------|-------------------|
| A OPERA135 NORTH GRAND AVE | NONE | PUBLIC | CHARITY/EDUCATION |

| LOS ANGELES, CA 90007 | NONE | CHARITY | CHARTITEDOCATION | |
|--|------|-------------------|-------------------|---|
| LA OPERA135 NORTH GRAND AVE LOS ANGELES, CA 90012 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 3 |

| LOS ANGELES, CA 90007 | NONE | CHARITY | CHARITY/EDUCATION | 2,50 |
|-----------------------------|------|---------|-------------------|------|
| LA OPERA135 NORTH GRAND AVE | NONE | PUBLIC | CHARITY/EDUCATION | 3.50 |

| OS ANGELES, CA 90007 | NONE | CHARITY | CHARITY/EDUCATION | 2,50 |
|----------------------|------|---------|-------------------|------|
| | | | | f |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

| Name and address (home or business) | or substantial contributor | recipient | | |
|-------------------------------------|----------------------------|-----------|-------------------|-----|
| a Paid during the year | | | | |
| LACMA5905 WILSHIRE BLVD | NONE | PUBLIC | CHARITY/EDUCATION | 850 |

| LOS ANGELES, CA 90036 | NONE | CHARITY | CHARTITEDOCATION | 030 |
|---|------|-------------------|-------------------|-------|
| LIBRARY FOUNDATION OF LOS ANGELES 630 W 5TH STREET LOS ANGELES, CA 90071 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |

| ANGELES 630 W 5TH STREET LOS ANGELES, CA 90071 | NONE | CHARITY | CHARITY/EDUCATION | 1,000 |
|---|------|-------------------|-------------------|-------|
| LOS ANGELES LEADERSHIP ACADEMY 234 EAST AVE 33 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |

| 630 W 5TH STREET LOS ANGELES, CA 90071 | | CIVICITY | | |
|--|------|-------------------|-------------------|-------|
| LOS ANGELES LEADERSHIP ACADEMY 234 EAST AVE 33 LOS ANGELES, CA 90031 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |
| | | | | |

| LOS ANGELES LEADERSHIP ACADEMY 234 EAST AVE 33 LOS ANGELES, CA 90031 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |
|--|------|-------------------|-------------------|---------|
| Total | | | ▶ 3a | 487,382 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year LOS ANGELES PHILHARMONIC NONE PUBLIC CHARITY/EDUCATION 61,000 ASSOCIATION CHARITY 151 SOUTH GRAND AVE

| LOS ANGELES, CA 90012 | | | | |
|--|------|-------------------|-------------------|-------|
| MUSLIM PUBLIC AFFAIRS COUNCIL FOUNDATION 4988 NORTH FIGUEROA STREET LOS ANGELES, CA 90042 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,000 |
| NATIONAL COALITION SUPPORTING EURASIAN JEWRY 1120 20TH ST NW STE 300N | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |

| 4988 NORTH FIGUEROA STREET LOS ANGELES, CA 90042 | | | | |
|---|------|-------------------|-------------------|---------|
| NATIONAL COALITION SUPPORTING EURASIAN JEWRY 1120 20TH ST NW STE 300N WASHINGTON, DC 20036 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |
| Total | | | ▶ 3a | 487,382 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| NEW ISRAEL FUNDPO BOX 177 LEWISTON, ME 04243 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 8,000 |
|--|------|-------------------|-------------------|--------|
| NO KID HUNGRYPO BOX 75475 BALTIMORE, MD 21275 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,000 |
| PACIFIC COUNCIL ON INTERNATIONAL POLICY | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 15,000 |

| NO KID HUNGRYPO BOX 75475 BALTIMORE, MD 21275 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,000 |
|--|------|-------------------|-------------------|---------|
| PACIFIC COUNCIL ON INTERNATIONAL POLICY 725 S FIGUEROA ST STE 450 LOS ANGELES, CA 90017 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 15,000 |
| Total | | | ▶ 3a | 487,382 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PHASE ONE NONE PUBLIC CHARITY/EDUCATION 10,000 5792 WEST JEFFERSON BLVD CHARITY

| LOS ANGELES, CA 90016 | | | | |
|---|------|-------------------|-------------------|-------|
| SEATTLE CHILDREN'S HOSPITAL FOUNDATION PO BOX 5371 SEATTLE, WA 98145 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,000 |

| PO BOX 5371 SEATTLE, WA 98145 | | J. W. W. L. L. | | |
|--|------|-------------------|-------------------|-------|
| SERVICES FOR THE UNDERSERVED 463 7TH AVE 17TH FLR NEW YORK, NY 10018 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |
| | | | | |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| | | | | - |
|---|------|-------------------|-------------------|-------|
| SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE MONTGOMERY, AL 36104 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,000 |
| ST JUDE'S CHILDREN'S RESEARCH | NONE | PUBLIC | CHARITY/EDUCATION | 2,500 |

| CTANEOUS IEWICH CENTED | NONE | D. ID. 70 | CUARTE VERY CATTON | |
|--|------|-------------------|--------------------|-------|
| ST JUDE'S CHILDREN'S RESEARCH HOSPITAL PO BOX 1893 MEMPHIS,TN 38101 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,500 |
| | | | | |

| PO BOX 1893 MEMPHIS, TN 38101 | | CHARITI | | |
|---|------|-------------------|-------------------|-------|
| STANFORD JEWISH CENTER 1289 COLLEGE AVE PALO ALTO, CA 94306 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 8,000 |

| MEMPHIS, TN 38101 | | | | |
|---|------|-------------------|-------------------|---------|
| STANFORD JEWISH CENTER 1289 COLLEGE AVE PALO ALTO, CA 94306 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 8,000 |
| Total | | | > 3a | 487,382 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| , | | | | |
|---|------|-------------------|-------------------|-------|
| T'RUAH266 W 37TH ST STE 803 NEW YORK, NY 10018 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,000 |
| TEMPLE ISAIAH10345 WEST PICO BLVD | NONE | PUBLIC | CHARITY/EDUCATION | 5,400 |

| NEW TORK, NT 10018 | | CHARITI | | |
|--|------|-------------------|-------------------|--|
| TEMPLE ISAIAH10345 WEST PICO BLVD LOS ANGELES, CA 90064 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | |
| | | | | |

| LOS ANGELES, CA 90064 | NONE | CHARITY | CHARITY/EDUCATION | 5,4 |
|--------------------------------|------|---------|-------------------|-----|
| THE BAY FOUNDATIONPO BOX 13336 | NONE | PUBLIC | CHARITY/EDUCATION | 1,0 |

| LOS ANGELES, CA 90064 | | CHARITY | | |
|--------------------------------|------|---------|-------------------|-------|
| THE BAY FOUNDATIONPO BOX 13336 | NONE | PUBLIC | CHARITY/EDUCATION | 1,000 |

| • | | | | |
|-------------------------------|------|------------|-------------------|-------|
| IE BAY FOUNDATIONPO BOX 13336 | NONE | PUBLIC | CHARITY/EDUCATION | 1,000 |
| | | CLIABITTI(| | |

| HE BAY FOUNDATIONPO BOX 13336 | NONE | PUBLIC | CHARITY/EDUCATION | 1,000 |
|-------------------------------|------|---------|-------------------|-------|
| OS ANGELES, CA 90013 | | CHARITY | | |

| THE BAT TOUNDATION FO BOX 13330 | NONE | FODLIC | CHARTITIEDOCATION | 1,000 |
|---------------------------------|------|---------|-------------------|-------|
| LOS ANGELES, CA 90013 | | CHARITY | | |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

| Name and address (home or business) | any foundation manager or substantial contributor | recipient | |
|-------------------------------------|--|-----------|--|
| a Paid during the year | | | |
| | | | |

| THE DAVID SHELDRICK WILDLIFE TRUST USA | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 3,000 |
|--|------|-------------------|-------------------|-------|
| 25283 CABOT RD STE 101 | | | | |
| LAGUNA HILLS, CA 92653 | | | | |

| 25283 CABOT RD STE 101 LAGUNA HILLS, CA 92653 | | | | |
|---|------|-------------------|-------------------|-------|
| THE DOE FUND232 E 84TH STREET NEW YORK, NY 10028 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |

| LAGUNA HILLS, CA 92653 | | | | |
|--|------|-------------------|-------------------|-------|
| THE DOE FUND232 E 84TH STREET NEW YORK, NY 10028 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |
| THE JANE GOODALL INSTITUTE 1595 SPRING HILL ROAD STE 550 VIENNA VA 22182 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,000 |

| NEW YORK, NY 10028 | | CHARITY | | , |
|---|------|-------------------|-------------------|-------|
| THE JANE GOODALL INSTITUTE 1595 SPRING HILL ROAD STE 550 VIENNA, VA 22182 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,000 |
| | | | _ | |

| THE JANE GOODALL INSTITUTE 1595 SPRING HILL ROAD STE 550 VIENNA, VA 22182 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,00 |
|---|------|-------------------|-------------------|---------|
| Total | | | ▶ 3a | 487,382 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE JEWISH FEDERATION OF GREATER | NONE PUBLIC CHARITY/EDUCATION 5,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| LOS ANGELES 6505 WILSHIRE BLVD STE 1100 LOS ANGELES, CA 90048 | | CHARITY | | |
|---|------|-------------------|-------------------|---|
| THE RAPE FOUNDATION 1223 WILSHIRE BLVD 410 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5 |

| LOS ANGELES, CA 90048 | | | | |
|---|------|-------------------|-------------------|-------|
| THE RAPE FOUNDATION 1223 WILSHIRE BLVD 410 SANTA MONICA, CA 90403 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |
| THE STECHER & HOROWITZ | NONE | PUBLIC | CHARITY/EDUCATION | 1,000 |

| THE RAPE FOUNDATION 1223 WILSHIRE BLVD 410 SANTA MONICA, CA 90403 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |
|---|------|-------------------|-------------------|-------|
| THE STECHER & HOROWITZ FOUNDATION 119 W 57TH ST STE 1401 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |

| 1223 WILSHIRE BLVD 410 SANTA MONICA, CA 90403 | | CHARITY | | |
|--|------|-------------------|-------------------|------|
| THE STECHER & HOROWITZ FOUNDATION 119 W 57TH ST STE 1401 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,00 |

| THE STECHER & HOROWITZ FOUNDATION 119 W 57TH ST STE 1401 NEW YORK, NY 10019 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |
|--|------|-------------------|-------------------|---------|
| Total | | | ▶ 3a | 487.382 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| TOWER CANCER RESEARCH FOUNDATION 8767 WILSHIRE BLVD STE 401 BEVERLY HILLS, CA 90211 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 11,000 |
|--|------|-------------------|-------------------|--------|
| UC BERKLEY FOUNDATION | NONE | PUBLIC | CHARITY/EDUCATION | 10,000 |

| BEVERLY HILLS, CA 90211 | | | | |
|---|------|-------------------|-------------------|--------|
| UC BERKLEY FOUNDATION 2607 HEARST AVE BERKLEY, CA 94720 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 10,000 |
| UCLA - WILLIAM J MARTIN FOUNDATION | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |

| UC BERKLEY FOUNDATION 2607 HEARST AVE BERKLEY, CA 94720 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 10,000 |
|--|------|-------------------|-------------------|--------|
| UCLA - WILLIAM J MARTIN FOUNDATION PO BOX 24044 LOS ANGELES. CA 90024 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |

| BERKLEY, CA 94720 | | CHARITY | | |
|--|------|-------------------|-------------------|---------|
| UCLA - WILLIAM J MARTIN FOUNDATION PO BOX 24044 LOS ANGELES, CA 90024 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |
| Total | | | ▶ 3a | 487,382 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an Foundation Purpose of grant or Amount

| ' | ındıvıdual, | status of | contribution | |
|--|--|-----------|--------------|--|
| Name and address (home or business) | show any relationship to any foundation manager or substantial contributor | recipient | | |

| | or substantial contributor | | | |
|------------------------|----------------------------|--------|-------------------|-------|
| a Paid during the year | | | | |
| USC CENTER ON PUBLIC | NONE | PUBLIC | CHARITY/EDUCATION | 5,000 |

| DIPLOMACY 3502 WATT WAY STE 232 LOS ANGELES, CA 90089 | NONE | CHARITY | CHARTITESCATION | 5,000 |
|---|------|---------|------------------------------------|-------|
| VISTA DEL MAR3200 MOTOR AVE | NONE | PUBLIC | CHARITY/EDUCATIONCHARITY/EDUCATION | 5,000 |

| 3502 WATT WAY STE 232 LOS ANGELES, CA 90089 | | | | |
|--|------|-------------------|------------------------------------|-------|
| VISTA DEL MAR3200 MOTOR AVE LOS ANGELES, CA 90034 | NONE | PUBLIC CHARITY | CHARITY/EDUCATIONCHARITY/EDUCATION | 5,000 |
| WELLESLEY COLLEGE | NONE | PUBLIC | CHARITY/EDUCATION | 2,500 |

| VISTA DEL MAR3200 MOTOR AVE LOS ANGELES, CA 90034 | NONE | PUBLIC CHARITY | CHARITY/EDUCATIONCHARITY/EDUCATION | 5,000 |
|--|------|-------------------|------------------------------------|-------|
| WELLESLEY COLLEGE 106 CENTRAL STREET WELLESLEY, MA 02481 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,500 |

| LOS ANGELES, CA 90034 | NONE | CHARITY | CHARITY/EDUCATIONCHARITY/EDUCATION | 5,00 |
|--|------|-------------------|------------------------------------|------|
| WELLESLEY COLLEGE 106 CENTRAL STREET WELLESLEY, MA 02481 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,50 |

| · | | | | |
|--|------|-------------------|-------------------|--|
| WELLESLEY COLLEGE 106 CENTRAL STREET WELLESLEY, MA 02481 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | |

| VELLESLEY COLLEGE 06 CENTRAL STREET VELLESLEY, MA 02481 | NONE | CHARITY | CHARITY/EDUCATION | 2 |
|---|------|---------|-------------------|---|
| VELLESEET, MA 02401 | | | | |

| WELLESLEY, MA 02481 | CHART | | |
|---------------------|-------|------|---------|
| Total | | ▶ 3a | 487,382 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| WOODROW WILSON SCHOOL PO BOX 5357 PRINCETON, NJ 08543 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |
|---|------|-------------------|-------------------|-------|
| PLANNED PARENTHOOD OF LOS ANGELES | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |

| PLANNED PARENTHOOD OF LOS ANGELES PO BOX 740528 LOS ANGELES, CA 90074 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |
|--|------|-------------------|-------------------|-------|
| CHILDREN'S BURN FOUNDATION | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |

| PO BOX 740528 LOS ANGELES, CA 90074 | | | | |
|--|------|-------------------|-------------------|-----|
| CHILDREN'S BURN FOUNDATION 5000 VAN NUYS BLVD SHERMAN OAKS, CA 91403 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |

| CHILDREN'S BURN FOUNDATION 5000 VAN NUYS BLVD SHERMAN OAKS, CA 91403 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |
|--|---------|-------------------|-------------------|-----|
| Total | 487.382 | | | |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | | |
|--|------|-------------------|-------------------|-------|
| INSIDEOUT WRITERS 1212 N VERMONT AVE LOS ANGELES, CA 90029 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,685 |

| LOS ANGELES, CA 90029 | | CHARTT | | |
|---|------|-------------------|-------------------|-----|
| HIAS411 FIFTH AVE NEW YORK, NY 10016 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |
| TEMPLE EMANUEL OF BEVERLY HILLS | NONE | PUBLIC | CHARITY/EDUCATION | 500 |

| NEW YORK, NY 10016 | NONE | CHARITY | CHARITYEDOCATION | 500 |
|---|------|-------------------|-------------------|-----|
| TEMPLE EMANUEL OF BEVERLY HILLS 8844 BURTON WAY BEVERLY HILLS, CA 90211 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |

Total .

487,382

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

| 1 | CCUN FOUNDATION | NONE | DUDLIC | CHADITY/EDUCATION | 2 |
|---|-------------------------------------|----------------------------|--------|-------------------|---|
| | a Paid during the year | | | | |
| ļ | Name and address (nome or business) | or substantial contributor | · | | |

| CSUN FOUNDATION 18111 NORDHOFF STREET NORTHRIDGE, CA 91330 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,500 |
|--|------|-------------------|-------------------|-------|
| MONTECITO FAMILY YMCA | NONE | PUBLIC | CHARITY/EDUCATION | 500 |

| NORTHRIDGE, CA 91330 | | CHARTT | | |
|---|------|-------------------|-------------------|-------|
| MONTECITO FAMILY YMCA 591 SANTA ROSA LANE SANTA BARBARA, CA 93108 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |
| PROJECT JUDATCA FOUNDATION | NONE | PUBLIC | CHARITY/EDUCATION | 2 500 |

| 591 SANTA ROSA LANE SANTA BARBARA, CA 93108 | | CHARITY | , | |
|---|------|-------------------|-------------------|-------|
| PROJECT JUDAICA FOUNDATION 8101 CONNECTICUT AVE CHEVY CHASE, MD 20815 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,500 |

| Total | | | ▶ 3a | 487,382 |
|---|------|-------------------|-------------------|---------|
| PROJECT JUDAICA FOUNDATION 8101 CONNECTICUT AVE CHEVY CHASE, MD 20815 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,500 |
| SANTA BARBARA, CA 93108 | | | | |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE LOTOS FOUNDATION NONE PUBLIC CHARITY/EDUCATION 500 FIVE EAST SIXTY SIXTH STREET CHARITY

| NEW YORK, NY 10065 | | | | |
|---|------|-------------------|-------------------|-------|
| DISABLED AMERICAN VETERANS CHARITABLE SERVICE TRUST 3725 ALEXANDRIA PIKE COLD SPRING, KY 41076 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 3,500 |
| GUILD DOGS FOR THE BLIND PO BOX 3950 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 4,000 |

| 3725 ALEXANDRIA PIKE COLD SPRING, KY 41076 | | | | |
|---|------|-------------------|-------------------|-----|
| GUILD DOGS FOR THE BLIND PO BOX 3950 SAN RAFAEL, CA 94912 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 4,0 |

| COLD SPRING, KY 41076 | | | | |
|---|------|-------------------|-------------------|---|
| GUILD DOGS FOR THE BLIND PO BOX 3950 SAN RAFAEL. CA 94912 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 4 |

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

NONE

CRATER LAKE COUNCIL

| | CHARITY | · | · |
|------|-------------------|-------------------|-------------------------------|
| NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 3,000 |
| | NONE | NONE PUBLIC | NONE PUBLIC CHARITY/EDUCATION |

PUBLIC

CHARITY/EDUCATION

4.000

| SUPERKID POWER INCPO BOX 1201 ASHLAND, OR 97520 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 3,000 |
|--|---------|-------------------|-------------------|-------|
| SHRINERS HOSPITALS FOR CHILDREN 2900 N ROCKY POINT DRIVE TAMPA, FL 33607 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,000 |
| Total | 487,382 | | | |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| FRED HUTCHINSON CANCER RESEARCH CENTER PO BOX 19024 SEATTLE, WA 98109 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5,000 |
|--|------|-------------------|-------------------|-------|
| FRIENDS OF THE ISRAEL DEFENSE | NONE | PUBLIC | CHARITY/EDUCATION | 500 |

| FRIENDS OF THE ISRAEL DEFENSE FORCES PO BOX 4224 NEW YORK, NY 10163 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 500 |
|--|------|-------------------|-------------------|-----|
| | | | | |

| PORCES PO BOX 4224 NEW YORK, NY 10163 | | CHARITY | | |
|---------------------------------------|------|---------|-------------------|-------|
| ACLU125 BROAD STREET | NONE | PUBLIC | CHARITY/EDUCATION | 5,000 |

| NEW YORK, NY 10163 | | | | |
|--|------|-------------------|-------------------|-------|
| ACLU125 BROAD STREET NEW YORK, NY 10004 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5,000 |

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Name and address (home or business) | or substantial contributor | recipient | |
|-------------------------------------|--|-----------|--|
| a Paid during the year | | | |
| | , and the second | | |

5,000

487,382

| COMMITTEE TO PROTECT JOURNALISTS 330 7TH AVE NEW YORK, NY 10001 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | |
|---|------|-------------------|-------------------|--|
| | | | | |

| EW TORK, NY 10001 | | | | |
|--|------|-------------------|-------------------|--|
| SRAEL POLICY FORUM 55 LEXINGTON AVE IEW YORK, NY 10017 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | |

Total .

| ISRAEL POLICY FORUM 355 LEXINGTON AVE NEW YORK, NY 10017 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,000 |
|--|------|-------------------|-------------------|--------|
| MAKE A WISH AMERICA 1702 EAST HIGHLAND AVE | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 10,000 |

| NEW YORK, NY 10017 | | | | |
|--|------|-------------------|-------------------|--------|
| MAKE A WISH AMERICA 1702 EAST HIGHLAND AVE PHOENIX, AZ 85016 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 10,000 |

| MAKE A WISH AMERICA 1702 EAST HIGHLAND AVE PHOENIX, AZ 85016 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 10,0 |
|--|------|-------------------|-------------------|------|
| | | | | |

| 702 EAST HIGHLAND AVE | CHARITY | |
|-----------------------|---------|--|
| HOENIX, AZ 85016 | | |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| GRID GREATER LOS ANGELES 1338 SOUTH FLOWER STREET LOS ANGELES, CA 90015 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 5,000 |
|--|------|-------------------|-------------------|-------|
| KINGDREW MAGNET HIGH SCHOOL 1601 EAST 120TH STREET LOS ANGELES, CA 90059 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,500 |

| · · | | | | |
|--|------|-------------------|-------------------|-------|
| KINGDREW MAGNET HIGH SCHOOL 1601 EAST 120TH STREET LOS ANGELES, CA 90059 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 2,500 |
| MINORITY HUMANITARIAN FOUNDATION 750 B STREET SAN DIEGO, CA 92101 | NONE | PUBLIC CHARITY | CHARITY/EDUCATION | 1,000 |
| | | | | |

Total .

487,382

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation If recipient is an individual, Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

| , | or substantial contributor | | | |
|------------------------|----------------------------|--------|-------------------|--------|
| a Paid during the year | | | | |
| HARVARD COLLEGE FUND | NONE | PUBLIC | CHARITY/EDUCATION | 10,000 |

Name and address (home or business)

| HARVARD COLLEGE FUND NONE PO BOX 419209 | PUBLIC CHARITY | CHARITY/EDUCATION | 10,0 |
|---|-------------------|-------------------|------|
|---|-------------------|-------------------|------|

| PO BOX 419209 BOSTON, MA 02241 | CHARITY | | |
|-----------------------------------|---------|------|---------|
| Total | | ▶ 3a | 487,382 |

| efile GRAPHIC print - DO NOT P | ROCESS As Filed | Data - | DI | N: 93491120001419 | | |
|----------------------------------|--------------------|--------------------------|------------------------|---|--|--|
| TY 2018 Accounting Fees Schedule | | | | | | |
| | | | | | | |
| | Name: HYMAN | LEVINE FAMILY FOU | INDATION | | | |
| | L'DOR V'DOR | | | | | |
| | EIN: 20-191 | 7833 | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | |

1,263

2,525

PROFESSIONAL FEE

| effie GRAPHIC Print - DO NOT PROCESS | As Filed Data - | | DLN: 93491120001419 |
|--------------------------------------|-----------------|------------------|---------------------|
| TY 2018 Investments Corpor | ate Bonds Sche | dule | |
| | | | |
| Name: | HYMAN LEVINE FA | AMILY FOUNDATION | |
| | L'DOR V'DOR | | |
| EIN: | 20-1917833 | | |
| Investments Corporate Bonds Schedul | 2 | | |

DI N. 02401120001410

DO NOT BROCECC

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 9349112000 | 1419 |
|--------------------------------------|------------------|------------------|------|
| TY 2018 Investments Corpora | te Stock Schedı | ule | |
| Namai | HYMAN LEVINE FAN | MILV EQUINDATION | |
| | L'DOR V'DOR | VILT FOUNDATION | |

| Investments Corporation Stock Schedule | | |
|--|---------------------------|----------------------------------|
| Name of Stock | End of Year Book Value | End of Year Fair Market Value |

4,570,536

4,998,949

EIN: 20-1917833

STOCK & EQUITIES

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: 93491120001419 |
|--|-----------------|---------------------|---------------------|
| TY 2018 Investments Govern | nent Obligat | ions Schedule | |
| | | | |
| Name: | HYMAN LEVIN | E FAMILY FOUNDATION | |
| | L'DOR V'DOR | | |
| EIN: | 20-1917833 | | |
| US Government Securities - End of Year Book Value: | | 0 | |
| US Government Securities - End of Year Fair Market Value: | | 0 | |
| State & Local Government Securities - End of Year Book Value: | | 4,004,350 | |
| State & Local Government Securities - End of Year Fair Market Value: | | 4,051,639 | |

| file GRAPHIC print - DO NOT PROCESS | As Filed Data - | DL | N: 93491120001419 |
|-------------------------------------|-------------------------|--------------|-------------------|
| TY 2018 Investments - Other | Schedule | | |
| Name: | HYMAN LEVINE FAMILY FOU | NDATION | |
| | L'DOR V'DOR | | |
| EIN: | 20-1917833 | | |
| vestments Other Schedule 2 | | | |
| Category / Item | Listed at Cost o | r Book Value | End of Vear Fair |

DI N. 02404420004440

| Investments Other Schedule 2 | | | | |
|------------------------------|------|-----------------------|------------|----------------------------------|
| Category/ Ite | em I | Listed at Cost or FMV | Book Value | End of Year Fair Market Value |
| ISRAEL BOND | | AT COST | 25,000 | 25,000 |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: 93491120001419 | | | | |
|--------------------------------------|-----------------|---------------------|---------------------|--|--|--|--|
| TY 2018 Other Decreases Schedule | | | | | | | |
| | | | | | | | |
| Name: | HYMAN LEVIN | E FAMILY FOUNDATION | | | | | |
| | L'DOR V'DOR | | | | | | |
| EIN: | 20-1917833 | | | | | | |
| Do | escription | | Amount | | | | |
| BOOK TO TAX BASIS ADJUST | | | 27,465 | | | | |

| efile GRAPHIC print - DO NOT PROC | ESS As Filed Data | - | DL | N: 93491120001419 | |
|--|---|--------------------------|------------------------|---|--|
| TY 2018 Other Professional Fees Schedule | | | | | |
| | lme: HYMAN LEV L'DOR V'DO EIN: 20-1917833 | | DATION | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | |
| INVESTMENT FEES | 41,720 | 41,720 | | 0 | |

| efile GRAPHIC print - DO NOT PROCE | ESS As Filed Data | - | DL | .N: 93491120001419 | | |
|--|------------------------|--------------------------|------------------------|---|--|--|
| TY 2018 Taxes Schedule | | | | | | |
| Name: HYMAN LEVINE FAMILY FOUNDATION L'DOR V'DOR | | | | | | |
| ı | EIN: 20-1917833 | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | |
| FEDERAL EXCISE TAX | 9,656 | 0 | | 0 | | |
| FOREIGN TAX | 703 | 703 | | 0 | | |
| REGISTRATION FEE | 75 | 0 | | 75 | | |
| FILING FEE | 30 | 0 | | 30 | | |

| efile GRAPHIC print - D | O NOT PROCESS As | Filed Data - | | | | DLN: 93491120001419 |
|--|---|---|--|---|--|--|
| Schedule B | | Schedul | e of Contributo | rs | | OMB No 1545-0047 |
| (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service | ▶ Go | | orm 990, 990-EZ, or 990- <u>/Form990</u> for the latest ir | | | 2018 |
| Name of the organization | | | | | Employer ide | entification number |
| L'DOR V'DOR Organization type (che | ck one) | | | | 20-1917833 | |
| Organization type (one) | or one) | | | | | |
| Filers of: | Section: | | | | | |
| Form 990 or 990-EZ | ☐ 501(c)() (ent | er number) org | anization | | | |
| | ☐ 4947(a)(1) non | exempt charita | able trust not treated as | a private foundat | ion | |
| | ☐ 527 political or | ganızatıon | | | | |
| Form 990-PF | ✓ 501(c)(3) exem | npt private foun | dation | | | |
| | ☐ 4947(a)(1) non | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | |
| | ☐ 501(c)(3) taxab | 501(c)(3) taxable private foundation | | | | |
| | tion filing Form 990, 990- property) from any one c | | | | | |
| Special Rules | | | | | | |
| under sections 50 received from an | on described in section 5 09(a)(1) and 170(b)(1)(A) y one contributor, during e 1h, or (ii) Form 990-EZ, | (vı), that check the year, total (| ed Schedule A (Form 9 contributions of the great | 990 or 990-EZ), Pa | art II, line 13, 1 | l6a, or 16b, and that |
| during the year, t | on described in section 5 otal contributions of more he prevention of cruelty t | than \$1,000 e | exclusively for religious, | charitable, scient | | |
| during the year, of If this box is check purpose Don't co | on described in section 5 contributions exclusively fixed, enter here the total omplete any of the parts totle, etc., contributions total | or religious, ch contributions th unless the Gen | aritable, etc., purposes nat were received durin eral Rule applies to thi | , but no such cont g the year for an ε s organization bed | ributions total exclusively reli cause it receiv | ed more than \$1,000 gious, charitable, etc , ed <i>nonexclusively</i> |
| 990-EZ, or 990-PF), but | n that isn't covered by the it must answer "No" on F orm 990PF, Part I, line 2, | Part IV, line 2, c | of its Form 990, or chec | k the box on line h | d of its | |
| For Paperwork Reduction A for Form 990, 990-EZ, or 990 | ct Notice, see the Instruction I-PF | ıs | Cat No 30613X | Schedu | le B (Form 990, | 990-EZ, or 990-PF) (2018) |

Name of organization
HYMAN LEVINE FAMILY FOUNDATION

Employer identification number

| DOR V'DO | OR | | 20-19178 | 33 |
|------------|--|--------------|----------------------------|---|
| Part I | Contributors (See Instructions) Use duplicate copies of Part I if additional space | ıs needed | | |
| (a) No. | (b) Name, address, and ZIP + 4 | | (c) Total contributions | (d) Type of contribution |
| | See Additional Data Table | \$ | | Person Payroll Noncash (Complete Part II for noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | | (c) Total contributions | (d) Type of contribution |
| | | \$ - | | Person Payroll Noncash (Complete Part II for noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | | (c) Total contributions | (d) Type of contribution |
| | | \$ - - | | Person Payroll Noncash (Complete Part II for noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | | (c) Total contributions | (d) Type of contribution |
| | | \$- | | Person Payroll Noncash (Complete Part II |
| (a) No. | (b) Name, address, and ZIP + 4 | | (c) Total contributions | for noncash contribution) (d) Type of contribution |
| | | \$ — | | Person Payroll Noncash (Complete Part II for noncash |
| (a) No. | (b) Name, address, and ZIP + 4 | | (c) Total contributions | contribution) (d) Type of contribution |
| | | \$ | | Person Payroll Noncash (Complete Part II for noncash contribution) |

| Schedule B (Forr | n 990, 990-EZ, or 990-PF) (2018) | | Page 3 |
|------------------------|---|--|--------------------------------|
| HYMAN LEVINE FA | me of organization MAN LEVINE FAMILY FOUNDATION Employer identification no | | |
| L'DOR V'DOR Part II | Noncash Property | 20-19 | 17833 |
| (a) No. from Part I | (See instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 1 | 342 SHS ROYAL BK CDA MONTREAL QUE COM | \$ 25 219 | 2018-12-03 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 6 | 145 SHS ROYAL BK CDA MONTREAL QUE COM | \$ 10 178 | 2018-12-10 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 8 | 130 SHS CERNER CORP \$7,059200 SHS YUM BRANDS INC \$17,942 | \$ 25 001 | 2018-12-14 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | | |
| | | Schedule B (Form S | 990, 990-EZ, or 990-PF) (2018) |

| Schedule B (Form | 990, 990-EZ, or 990-PF) (2018) | | Page 4 |
|---|--|--|--|
| Name of organizat HYMAN LEVINE FAM: L'DOR V'DOR | | | Employer identification number 20-1917833 |
| than \$1, organiz the year | ,000 for the year from any one contributor | r. Complete columns (a) thro of exclusively religious, chari ctions.) ▶ \$ | d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | Transferee's name, address, and | (e) Transfer of gift ZIP 4 F | Relationship of transferor to transferee |
| (a) | /h) Dumaga of sift | (c) He a of suff | (d) Decembring of how wife in hold |
| No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | Transferee's name, address, and | (e) Transfer of gift | 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 |
| | Transferee's name, address, and | (e) Transfer of gift | 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 |
| | Transferee's name, address, and | (e) Transfer of gift | Relationship of transferor to transferee |
| | | | Schedule B (Form 990, 990-EZ, or 990-PF) (2018) |

Additional Data

Software ID:

Software Version:

EIN: 20-1917833

Name: HYMAN LEVINE FAMILY FOUNDATION

L'DOR V'DOR

Form 990 Schedule B, 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 |
|------------|---|----------------------------|---|
| | DENA AND IDVICOUED | | Person |
| 1 | DENA AND IRV SCHECHTER 9460 WILSHIRE BLVD SUITE 300 | | Payroll |
| | DEVEDIN HILLS CA 20242 | \$ 25,219 | Noncash 🗸 |
| | BEVERLY HILLS, CA 90212 | | Complete Part II for noncash contributions) |
| | 200151415 | | Person |
| 2 | BOB LEVINE 9460 WILSHIRE BLVD SUITE 300 | | Payroll |
| | | \$ 16,000 | — |
| | BEVERLY HILLS, CA 90212 | | |
| | | | (Complete Part II for noncash contributions) |
| | NANCY CLAVIN | | Person |
| <u>3</u> | 9460 WILSHIRE BLVD SUITE 300 | | Payroll |
| | | \$ 14,000 | Noncash |
| | BEVERLY HILLS, CA 90212 | | _ |
| | | | (Complete Part II for noncash contributions) |
| <u>4</u> | SID B LEVINE TRUST | | Person |
| | 9460 WILSHIRE BLVD SUITE 300 | | Payroll |
| | | \$ 93,875 | Noncash |
| | BEVERLY HILLS, CA 90212 | | (Complete Part II for noncash |
| | | | contributions) |
| F | MAX A LEVINE TRUST | | Person |
| <u>5</u> | 9460 WILSHIRE BLVD SUITE 300 | | Payroll |
| | | \$ 52,195 | Noncash |
| | BEVERLY HILLS, CA 90212 | | (Complete Part II for noncash |
| | | | contributions) Person |
| <u>6</u> | MELDON LEVINE 9460 WILSHIRE BLVD SUITE 300 | | Payroll |
| | | \$ 10,178 | |
| | BEVERLY HILLS, CA 90212 | + 10,110 | Noncash |
| | | | (Complete Part II for noncash contributions) |

| Form 990 Schedule B, 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 | | |
| 7 | JOSH AND SARI SCHECHTER 9460 WILSHIRE BLVD SUITE 300 BEVERLY HILLS, CA 90212 | \$ 1,800 | Person Payroll Noncash | | |
| | | | (Complete Part II for noncas contributions) | sh_ | |
| <u>8</u> | MIEKE AND SPENCER NEUMANN 9460 WILSHIRE BLVD SUITE 300 | \$ 25,001 | Person Payroll Noncash | | |
| | BEVERLY HILLS, CA 90212 | Ψ 23,001 | (Complete Part II for noncas | | |
| 9 | ASHER SCHECHTER 9460 WILSHIRE BLVD SUITE 300 | | Person 🗸 | | |
| | BEVERLY HILLS, CA 90212 | \$ 500 \$ | (Complete Part II for noncas | sh | |
| <u>10</u> | NOAH AND AMANDA SCHECHTER 9460 WILSHIRE BLVD SUITE 300 | \$ 1,000 | contributions) Person Payroll Noncash | | |
| | BEVERLY HILLS, CA 90212 | | (Complete Part II for noncas contributions) | | |
| <u>11</u> | ADAM LEVINE 9460 WILSHIRE BLVD SUITE 300 | \$ 2,176 | Person Payroll Noncash | | |
| | BEVERLY HILLS, CA 90212 | <i>**2,110</i> | (Complete Part II for noncas | sh | |
| <u>12</u> | JACOB LEVINE 9460 WILSHIRE BLVD SUITE 300 | | Person Payroll | | |
| | BEVERLY HILLS, CA 90212 | \$ 1,000 | Noncash (Complete Part II for noncas contributions) | | |