

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# 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.
 ▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

OMB No 1545-0052 2016

Form **990-PF** (2016)

For calendar year 2016 or tax year beginning and ending Name of foundation A Employer identification number THE JEFFREY W. GLAZER FOUNDATION 42-1258464 Room/suite Number and street (or P O box number if mail is not delivered to street address) 858-232-3216 B Telephone number 3737 RIVER OAKS DRIVE City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 50312 DES MOINES, IA G Check all that apply: Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust \_\_\_\_\_ Other taxable private foundation under section 507(b)(1)(A), check here Fair market value of all assets at end of year J Accounting method: LX Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 10,055,483. (Part I, column (d) must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) charitable purposes (cash basis only) expenses per books income income 25,000 N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. 8 Interest on savings and temporary cash investments 847 847 STATEMENT Dividends and interest from securities 34,465. 34,465 STATEMENT 4 5a Gross rents b Net rental income or (loss) 1,453,838 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 14 4.5. 1,453,838. 1,453,838 7 Capital gain net income (from Part IV, line 2) 7017 13 က် Net short-term capital gain Income modifications 10a Gross sales less returns and allowances OGUE b Less Cost of goods sold c Gross profit or (loss) 11 Other income 81 81 STATEMENT 231 489. 231 12 Total Add lines 1 through 11 0. 0 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 4 1,800 1,800 0. **b** Accounting fees c Other professional fees 17 Interest 668 0. STMT 5 668. 18 Taxes 19 Depreciation and depletion 20 Occupancy **©** 21 Travel, conferences, and meetings 22 Printing and publications 2,769 2,769. 0. STMT 6 23 Other expenses 24 Total operating and administrative expenses Add lines 13 through 23 5,237 5,237 426,310 426,310. Contributions, gifts, grants paid 26 Total expenses and disbursements. 426,310. <u>431,547</u> 5,237 Add lines 24 and 25 27 Subtract line 26 from line 12: 1,082,684 2 Excess of revenue over expenses and disbursements 483,994 b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

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

Form 990-PF (2016) THE JEFFREY W. GLAZER FOUNDATION 42-125					1258464 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	<del></del>
<u> </u>		Colonia should be for the off year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	ľ	Savings and temporary cash investments	374,198.	482,989.	482,989.
	3	Accounts receivable >			
	١.	Less; allowance for doubtful accounts	<del></del>		
	4	Pledges receivable >		,	
	_	Less: allowance for doubtful accounts			
	5	Grants receivable		· — - · · · - — ·	
	٥	Receivables due from officers, directors, trustees, and other			
	7	disqualified persons Other notes and loans receivable	<del></del>		<del></del>
	<b>'</b>	Less: allowance for doubtful accounts		,	
र	8	Inventories for sale or use			
Assets	٩	Prepaid expenses and deferred charges			
As	102	Investments - U.S. and state government obligations			
		Investments - corporate stock STMT 8	6,173,932.	9,295,511.	9,572,494.
	Į.	Investments - corporate bonds		<u> </u>	270727
	11	Investments - land, buildings, and equipment basis			
	'	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►)			·
	16	Total assets (to be completed by all filers - see the			
_	L	instructions. Also, see page 1, item I)	6,548,130.	<u>9,778,500.</u>	10,055,483.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		<del></del>	
Liaj	21	Mortgages and other notes payable			
	22	Other liabilities (describe	<del></del>	<del></del>	
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted			
au	25	Temporarily restricted			
Ba	26	Permanently restricted			
or Fund Balances		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
ts c	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	455,755.	455,755.	
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	6,092,375.	9,322,745.	
ž	30	Total net assets or fund balances	6,548,130.	9,778,500.	
		Total Makiffel and a second Market Land	6 540 130	0 770 500	
=		Total liabilities and net assets/fund balances	6,548,130.	9,778,500.	
LP	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
-		st agree with end-of-year figure reported on prior year's return)		1	6,548,130.
2	•	r amount from Part I, line 27a		2	1,082,684.
3	Othe	er increases not included in line 2 (itemize)	SEE STA	TEMENT 7 3	2,163,933.
4		lines 1, 2, and 3		4	9,794,747.
5		reases not included in line 2 (itemize) FEDERAL TAX	<del></del>	5	16,247.
<u>6</u>	Tota	l net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	9,778,500.
					Form <b>990-PF</b> (2016)

623521 11-23-16

See the Part VI instructions.

Form 990-PF (2016)

	990-PF (2616) THE JEFFREY W. GLAZER FOUNDATION 42-1 tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	258464 see instru	Page 4
	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1.		
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	14	1,840.
	of Part I, line 27b		
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		^
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0.
	Add lines 1 and 2	14	1,840.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	14	1,840.
	Credits/Payments:		
	2016 estimated tax payments and 2015 overpayment credited to 2016  6a 11,000.		
	Exempt foreign organizations - tax withheld at source  6b		
	Tax paid with application for extension of time to file (Form 8868)  6c 4,000.		
	Backup withholding erroneously withheld  Total and described Add lease Continues Cott	4.6	- 000
	Total credits and payments. Add lines 6a through 6d		<u>5,000.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<del></del>	1.0
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		160.
	Enter the amount of line 10 to be: Credited to 2017 estimated tax		0.
	rt VII-A   Statements Regarding Activities	<del> ,</del>	Yes No
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	<del></del>	
	any political campaign?	1a	<u> </u>
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b	
	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.		
	Did the foundation file Form 1120-POL for this year?	_1c	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.		
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		
	managers. ► \$0.		٠,,
	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	X
	If "Yes," attach a detailed description of the activities.		
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	/ 3 4a	X
	If "Yes," has it filed a tax return on Form 990-T for this year?		X
-	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<del></del> _
	If "Yes," attach the statement required by General Instruction T.		
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		
	By language in the governing instrument, or		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		v
	remain in the governing instrument?	6	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X
•			
Вa	Enter the states to which the foundation reports or with which it is registered (see instructions)	<del></del>	
L	IA  If the angular in Meetite line 7, has the foundation furnished a convent form 000 DE to the Attended Constallation for designate).		
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		v
	of each state as required by General Instruction G? If "No," attach explanation	8b	X
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar		v
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	$\frac{\mathbf{x}}{\mathbf{x}}$
<u>10</u> _	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10   Form <b>99</b> 0	
		LOUIN 230	· •- (20 10)

Form **990-PF** (2016)

X

3b

Yes X No

N/A

during the year?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 990-PF (2016) THE JEFFREY W. GLAZER I	FOUNDATION		42-12584	64	Page 6	
Part VII-B. Statements Regarding Activities for Which	h Form 4720 May Be I	Required (contin	ued)			
5a During the year did the foundation pay or incur any amount to:		_				
(1) Carry on propaganda, or otherwise attempt to influence legislation (sec	* **		es X No	-		
(2) Influence the outcome of any specific public election (see section 4955	i); or to carry on, directly or indir					
any voter registration drive?	_		es X No			
(3) Provide a grant to an individual for travel, study, or other similar purpo		Yo	es X No			
(4) Provide a grant to an organization other than a charitable, etc., organization	ation described in section					
4945(d)(4)(A)? (see instructions)			es X No			
(5) Provide for any purpose other than religious, charitable, scientific, literation	ary, or educational purposes, or		_			
the prevention of cruelty to children or animals?			es 🗶 No 📗			
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify		ın Regulations				
section 53.4945 or in a current notice regarding disaster assistance (see in	•		N/A	5b		
Organizations relying on a current notice regarding disaster assistance chec			▶□□			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption						
expenditure responsibility for the grant?						
If "Yes," attach the statement required by Regulations section 53.4	• •					
6a Did the foundation, during the year, receive any funds, directly or indirectly,	to pay premiums on					
a personal benefit contract?		Y	es X No			
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on	a personal benefit contract?		<u></u>	6b	X	
If "Yes" to 6b, file Form 8870.						
7a At any time during the tax year, was the foundation a party to a prohibited to		Y	es 🗶 No 📙			
b If Yes, did the foundation receive any proceeds or have any net income att				7b		
Part VIII Information About Officers, Directors, True Paid Employees, and Contractors	istees, Foundation Ma	anagers, Highl	y			
List all officers, directors, trustees, foundation managers and the	oir componenties					
List all officers, directors, dustees, foundation managers and the	——————————————————————————————————————	(c) Compensation	(d) Contributions to	(-)	Evnanca	
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred compensation	acco	Expense unt, other	
JEFFREY W. GLAZER	to position PRESIDENT	enter -0-)	compensation	and	wances	
7539 HIGH AVENUE						
LA JOLLA, CA 92037	0.00	0.	0.		0.	
LISA BRAUN-GLAZER	SECRETARY	.	•		<del></del>	
7539 HIGH AVENUE						
LA JOLLA, CA 92037	0.00	0.	0.		0.	
JULIA GLAZER	DIRECTOR				<u> </u>	
138 N. EDINBURGH AVE.	DIRECTOR					
LOS ANGELES, CA 90048	0.00	0.	0.		0.	
ANNA GLAZER	DIRECTOR	0.		-		
57 E. DELAWARE PLACE #3605	DINECTOR					
CHICAGO, IL 60611	0.00	0.	0.		0.	
2 Compensation of five highest-paid employees (other than those						
(a) Name and address of each ampleuse and make than \$50,000	(b) Title, and average	4.30	(d) Contributions to employee benefit plans and deferred	(e)	Expense	
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation		unt, other owances	
NONE						
		<u> </u>	<u> </u>			
		1		<u> </u>		
Total number of other employees paid over \$50,000			<u> </u>		0	
			Form	aan_i	PF (2016)	

Form 990-PF (2016) THE JEFFREY W. GLAZER FOUNDATION		258464 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation I Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NON	E."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	· · · · · · · · · · · · · · · · · · ·	
	<del>_</del>	
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
	armatica quali ao tha	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info number of organizations and other beneficiaries served, conferences convened, research papers produced, e	tc.	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		
All other program-related investments. See instructions.		
3		
Total, Add lines 1 through 3	<b>_</b>	0.
<del>-</del>		Form <b>990-PF</b> (2016)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, 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	7,848,075.
Ь	Average of monthly cash balances	1b	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
C	Fair market value of all other assets	1c	
d		1d	7,848,075.
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	7,848,075.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	117,721.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,730,354.
6	Minimum investment return. Enter 5% of line 5	6	386,518.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	
	foreign organizations check here   and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	386,518.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c_	14,840.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	371,678.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5_	371,678.
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	371,678.
P	art 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	426,310.
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:		
	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	426,310.
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	14,840.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6_	411,470.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies t	for the section

Form **990-PF** (2016)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,		, , , , , , , , , , , , , , , , , , ,		
line 7				371,678.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
<b>b</b> Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011				
b From 2012 1, 133.				
c From 2013 83,905. d From 2014 45,133.				
	183,076.			
f Total of lines 3a through e  4 Qualifying distributions for 2016 from	103,070.			
Part XII, line 4: ►\$ 426, 310.				
a Applied to 2015, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount			<del></del>	371,678.
e Remaining amount distributed out of corpus	54,632.			
5 Excess distributions carryover applied to 2016	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	237,708.			
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 2015. Subtract line			0	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
7 Amounts treated as distributions out of				0.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	237,708.			
10 Analysis of line 9:				
a Excess from 2012 1,133.				
b Excess from 2013 83,905.				
c Excess from 2014 45,133.				
d Excess from 2015 52,905.				
e Excess from 2016 54,632.		<u></u>	<u> </u>	- 000 PE (00.48)

Form **990-PF** (2016)

Port VIV Private Operation F	FREY W. GLA	ZER FOUNDAT	ION		258464 Page 10
Part XIV Private Operating F			A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo		•	▶ ∟		· · · · · · · · · · · · · · · · · · ·
b Check box to indicate whether the found		ng foundation described i		•	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(h) 2016	Prior 3 years		4.5.7
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed					<del>-</del>
<b>b</b> 85% of line 2a					<u> </u>
c Qualifying distributions from Part XII,	İ				
line 4 for each year listed		-			<u> </u>
d Amounts included in line 2c not	į				
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					-
Part XV Supplementary Info	rmation (Comple	te this part only	f the founda	ation had \$5,000 or n	nore in assets
at any time during t					
Information Regarding Foundation     List any managers of the foundation why ear (but only if they have contributed in	o have contributed more	than 2% of the total contr	ributions received	by the foundation before the c	lose of any tax
NONE	, , ,				
b List any managers of the foundation who other entity) of which the foundation has			or an equally large	e portion of the ownership of a	partnership or
NONE	-				
2 Information Regarding Contribution Check here ► X if the foundation of the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and	does not accept unsolicited re	quests for funds. If nd d.
a The name, address, and telephone num	ber or e-mail address of t	he person to whom appli	cations should be	addressed:	
b The form in which applications should b	e submitted and informa	tion and materials they sh	nould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields,	kınds of institution	ns, or other factors:	
623601 11-23-16	-	·····			Form <b>990-PF</b> (2016)

	on (continued)	Doumant	<del></del>	
3 Grants and Contributions Paid During the Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
MERICAN JEWISH COMMITTEE	NONE	PUBLIC	GENERAL FUND	
65 EAST 56TH STREET				
IEW YORK, NY 10022				1,800
CAMP MT. CHAI	NONE	PUBLIC	GENERAL FUND	
126 EXECUTIVE DRIVE	NONE	FUBLIC	GENERAL FUND	
A JOLLA, CA 92037				4,100
CONREGATION BETH EL	NONE	PUBLIC	GENERAL FUND	16
GILMAN DRIVE LA JOLLA, CA 92037				3,400
HILLEL JEWISH CAMPUS CENTER	NONE	PUBLIC	GENERAL FUND	
5742 MONTEZUMA RD				
SAN DIEGO, CA 92115		_		2,800
INSTITUTE FOR SHIPBOARD EDUCATION	NONE	PUBLIC	GENERAL FUND	
P.O. BOX 400885				
CHARLOTTESVILLE VA 229044885	ONTENTA DE CONTRA CONTR			50,000
Total SEE Co b Approved for future payment	ONTINUATION SHE	ET(S)	▶ 3a	426,31
NONE				
NONE				
Total	<u>.                                    </u>		<u>▶ 3b</u>	Form <b>990-PF</b> (20

Pai	t.XVI-A	Analysis of	Income-Producing	Activities
-----	---------	-------------	------------------	------------

	<del>- , - , , - , - , - , - , - , - , - , -</del>	<del>,</del>			
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	Exclu- sion	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	- Amount	code	Amount	—————
a	_		<del>  -</del>		
b	1 1				
c					
d	_				
e	_				
f	_				
g Fees and contracts from government agencies	<u> </u>	<del></del>			
2 Membership dues and assessments .		<u> </u>			
3 Interest on savings and temporary cash					
investments .			14	847.	
Dividends and interest from securities			14	34,465.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					<del></del>
b Not debt-financed property					·
6 Net rental income or (loss) from personal					_
property					
7 Other investment income			14	81.	
8 Gain or (loss) from sales of assets other					
than inventory			18	1,453,838.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a	_		1 1		
b					
С					
d					
e					
2 Subtotal. Add columns (b), (d), and (e)		0		1,489,231.	
3 Total. Add line 12, columns (b), (d), and (e)				13	1,489,231
See worksheet in line 13 instructions to verify calculations	s.)				
Part XVI-B Relationship of Activitie		mplichment of E	vomnt	Dumococ	
Line No  Explain below how each activity for which the foundation's exempt purposes (other t	income is reported in	column (e) of Part XVI-			olishment of
	<del></del>				

May the IRS discuss this return with the preparer shown below (see instr )? Sign Here PRESIDENT X Yes of officer or trustee Title Print Type preparer's name Preparer's signature Date Check [ self-employed Paid SHELLY M. OUARISA P00730188 Preparer Firm's EIN ▶ 33-0578542 Firm's name ► OLIVA, GODDARD **Use Only** Firm's address ▶ 9333 GENESEE AVE, Phone no. (858) 554-0800 SAN DIEGO, CA 92121 Form 990-PF (2016)

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

623622 11-23-16

THE JEFFREY W. GLAZER FOUNDATION

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor JEWISH FAMILY SERVICES NONE PUBLIC GENERAL FUND 8804 BALBOA AVENUE 1,800. SAN DIEGO CA 92123 KPBS NONE PUBLIC GENERAL FUND 5200 CAMPANILE DRIVE 1,200. SAN DIEGO CA 92182 LA JOLLA MUSIC SOCIETY NONE PUBLIC GENERAL FUND 7946 IVANHOE AVENUE #309 LA JOLLA CA 92037 55,100. LA JOLLA PLAYHOUSE NONE PUBLIC GENERAL FUND 2910 LA JOLLA VILLAGE DRIVE LA JOLLA CA 92037 5,000, LAWRENCE FAMILY JEWISH COMMUNITY NONE PUBLIC GENERAL FUND CENTER 4126 EXECUTIVE DRIVE LA JOLLA CA 92037 37,000. LEVELING THE PLAYING FIELD NONE PUBLIC GENERAL FUND 6001 MONTROSE ROAD #711 ROCKVILLE\_MD 20852 2,000. NONE PUBLIC PLANNED PARENTHOOD GENERAL FUND 2100 5TH 5,000. SAN DIEGO, CA 92101 SAN DIEGO JEWISH COMMUNITY FOUNDATION NONE PUBLIC GENERAL FUND 4797 MERCURY STREET 100,000. SAN DIEGO, CA 92111 SAN DIEGO STATE AZTEC FOUNDATION NONE PUBLIC GENERAL FUND ALUMNI CENTERS 23,000. SAN DIEGO CA 92182 SDSU CAMPANILE FOUNDATION NONE PUBLIC LEADERSHIP CENTER SDSU UNIVERSITY 106,000, SAN DIEGO, CA 92182 Total from continuation sheets 364 210. Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager or substantial contributor Name and address (home or business) recipient UNITED JEWISH FEDERATION NONE PUBLIC GENERAL FUND 4797 MERCURY STREET 10,000. SAN DIEGO, CA 92111 COLORADO STATE UNIVERSITY NONE PUBLIC GENERAL FUND 410 UNIVERSITY SERVICES CTR 5,000. FORT COLLINS, CO 80523 ATHENAEUM NONE PUBLIC GENERAL FUND 1008 WALL STREET 5,000, LA JOLLA, CA 92037 NATIONAL RESOURCE DEFENSE COUNCIL NONE PUBLIC GENERAL FUND 40 WEST 20TH STREET 11TH FLOOR 7,500. NEW YORK, NY 10011 EARTHJUSTICE NONE PUBLIC GENERAL FUND 50 CALIFORNIA STREET #500 5,000. SAN FRANCISCO CA 94111 SALK INSTITUTE NONE PUBLIC GENERAL FUND 10010 N TORREY PINES ROAD 5,000. LA JOLLA, CA 92037 DOCTORS WITHOUT BORDERS NONE PUBLIC GENERAL FUND PO BOX 5030 1,000. HAGERSTOWN MD 21741-5030 ASPEN INSTITUTE NONE PUBLIC GENERAL FUND ONE DUPONT CIRCLE NW #700 WASHINGTON, DC 20036 3,500. NONE ONE TO ONE MOVEMENT PUBLIC GENERAL FUND 2159 INDIA STREET #200 15,000. SAN DIEGO, CA 92101 SAN DIEGO WOMEN'S FOUNDATION NONE PUBLIC GENERAL FUND 2508 HISTORIC DECATUR ROAD #200 6,000. SAN DIEGO, CA 92106 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to **Amount** status of any foundation manager or substantial contributor Name and address (home or business) recipient WESTERN KENTUCKY UNIVERSITY NONE PUBLIC GENERAL FUND FOUNDATION 292 ALUMNI AVE SUITE 305 BOWLING GREEN, KY 42101 4,500. WATERS OF EDEN NONE PUBLIC REFUND OF DONATION 441 SAXONY ROAD ENCINITAS CA 92024 <39,390,> 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. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.lrs.gov/form990 .

OMB No 1545-0047

Name of the organization

**Employer identification number** 

	<b>T</b> H	E JEFFREY W. GLAZER FOUNDATION	42-1258464			
Organiz	ation type (check o	ne):				
Filers of	<b>f:</b>	Section:				
Form 99	0 or 990-EZ	501(c)( ) (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	0-PF	X 501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
	-	s covered by the <b>General Rule</b> or a <b>Special Rule</b> . (7), (8), or (10) organization can check boxes for both the General Rule and a Special R	ule See instructions			
General	Rule					
$\overline{\mathbf{x}}$		n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor.				
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 <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
but it m	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)					

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

Name of organization

Employer identification number

#### THE JEFFREY W. GLAZER FOUNDATION

42-1258464

Part I	Contributors (See instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JEFFREY GLAZER & LISA BRAUN GLAZER  7539 HIGH AVENUE  LA JOLLA, CA 92037	\$\$.	Person X Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		-   -   \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - \$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Employer identification number

#### THE JEFFREY W. GLAZER FOUNDATION

42-1258464

Part II	Noncash Property (See instructions). Use duplicate copies of P.	art 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
-		\$	<del></del>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-			
-		*	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-			
		s	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		<del></del>	
3453 10-18-1	8		990, 990-EZ, or 990-PF)

Name of org	ganization		Employer identification number			
וד. קעיי	EFFREY W. GLAZER FOUNDA	PT ON	42-1258464			
Part III	Exclusively religious, charitable, etc., contributor. Complete completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if additional	ibutions to organizations described olumns (a) through (e) and the follow , charitable, etc., contributions of \$1,000 or	in section 501(c)(7), (8), or (10) that total more than \$1,000 for			
(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, an	ad 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	t			
	Transferee's name, address, ar	nd 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 gif	t			
	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, at	nd ZIP + 4	Relationship of transferor to transferee			

THE JEFFREY W. GLAZER FOUNDATION 42-1258464
STATEMENT TO FORM 990-PF

THE MADELYN M. LEVITT FOUNDATION (EIN #42-6052426) IS IN THE PROCESS OF LIQUIDATING AND A PORTION OF THE FOUNDATION'S ASSSETS WERE TRANSFERRED TO THE JEFFREY W. GLAZER FOUNDATION AS PART OF THE LIQUIDATION AS FOLLOWS:

	~~
COLUMBIA ACORN FUND Z 968,539 984,3	o3
LONGLEAF PARTNERS FUND 624,209 633,4	76
OAKMARK FUND 125,000 176,7	28
OAKMARK INTERNATIONAL FUND 146,411 126,2	25
SEQUOIA FUND, INC. 299,774 349,6	04
TOTAL 2,163,933 2,270,3	96

THE FOLLOWING TAX ATTRIBUTES WERE CARRIED OVER FROM THE MADELYN M. LEVITT FOUNDATION:

#### FORM 990-PF PART V

YEAR	COLUMN B	COLUMN C
2015	116,284	2,434,889
2014	131,037	2,514,497
2013	78,253	2,176,260
2012	79,101	1,909,860
2011	85,793	1,901,891

#### FORM 990-PF PART XIII

YEAR	AMOUNT LINE 3
2015	9,559
2014	2,456
YEAR	AMOUNT LINE 10
2015	9,559
2014	2,456

FORM 990-PF INTER	EST ON SAVING	S AND TEMPOR	ARY CASH	INVESTMENTS	STATEMENT	1
SOURCE	(A) REVENUE PER BOOK		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOM		
WELLS FARGO #9716 WELLS FARGO #9809	8	1. 46.	1.			
TOTAL TO PART I, L	847.		847.			
FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SEC	JRITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVES MENT INCO		
ACORN ACORN	844,533.	844,533.	- (	o.	0.	
INTERNATIONAL	1,688.	1,688.	(	O.	0.	
FAIRHOLME	7,079.	5,269.	1,81			
LONGLEAF OAKMARK	21,714.	21,612.	10:		2.	
INTERNATIONAL OAKMARK INVESTOR	3,934.	0.	3,93	4. 3,93	34.	
CLASS	9,833.	5,786.	4,04	7. 4,04	17.	
SEQUOIA FUND	569,036.	569,036.	(	0.	0.	
TWEEDY BROWN	915.	393.	52:	2. 52	22.	
WELLS FARGO #9716	2,394.	197.	2,19	7. 2,19	97.	
WELLS FARGO #9809	21,930.	77.	21,85	3. 21,85	53.	
TO PART I, LINE 4	1,483,056.	1,448,591.	34,46	5. 34,46 ===================================	55. === ======	
FORM 990-PF		OTHER INCO	ME		STATEMENT	3
DESCRIPTION		RE	(A) VENUE BOOKS	(B) NET INVEST- MENT INCOME		
	NCOME		81.	81		
OTHER INVESTMENT I					<del></del>	
TOTAL TO FORM 990-	PF, PART I, I	INE 11	81.	81	L •	

FORM 990-PF	ACCOUNTING FEES		STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES
ACCOUNTING	1,800.	1,800.		0
TO FORM 990-PF, PG 1, LN 16B	1,800.	1,800.		0
FORM 990-PF	TAX	ES	S'	TATEMENT
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABL PURPOSES
FOREIGN TAX PAID	668.	668.		0
TO FORM 990-PF, PG 1, LN 18	668.	668.		0
FORM 990-PF	OTHER E	XPENSES	STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABL PURPOSES
PATHFINDER K-1 LOSS	2,769.	2,769.		0
TO FORM 990-PF, PG 1, LN 23	2,769.	2,769.		0
FORM 990-PF OTHER INCREASES	S IN NET ASS	ETS OR FUND BA	ALANCES S	TATEMENT
DESCRIPTION				AMOUNT
TRANSFER - MADELYN M . LEVIT	r foundation	#42-6052426		2,163,933
TOTAL TO FORM 990-PF, PART I	II, LINE 3			2,163,933

FORM 990-PF CORPORATE STOCK	ζ	STATEMENT 8
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK & MUTUAL FUNDS	9,295,511.	9,572,494.
TOTAL TO FORM 990-PF, PART II, LINE 10B	9,295,511.	9,572,494.