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Form **990-PF** Department of the Treasury Internal Revenue Service EXTENDED TO NOVEMBER 15, 2017

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.irs.gov/form990pf.

OMB No 1545-0052

| F | or c | alen | dar year 2016 or tax year | beginning | | , and ending | | | | | | | | |
|------------|------------|--|--|---------------------------------------|----------------------|--|--------------------------------|--------------------|------------------|--|------------------|--|--|--|
| Ī | Nam | e of | foundation | | | | · - | | | A Employer identification number | | | | |
| _ | | H. LESLIE & ELAINE S. HOFFMAN FOUNDATION | | | | | | | 95-6048600 | | | | | |
| , | | mber and street (or P O box number if mail is not delivered to street address) Room/suite | | | | | | B Telephone number | | | | | | |
| _ | _ | | SOUTH LAKE | | | | | | 830 | 626- | 243-51 | .00 | | |
| 1 | | | own, state or province, cou ADENA , CA 9 | intry, and ZII 1101 | P or foreign p | oostal co | ie | | | C If exemption | application is p | ending, check here | | |
| r G | | | all that apply: | Initial return | 1 | | Initial return of a f | ormer public (| charity | D 1. Foreign | organizations | s, check here | | |
| 7 | | | | Final return | | | Amended return | | | 2 Foreign | vaanizatione me | eting the 85% test | | |
| <u>~</u> _ | | | | Address ch | | ل_ا_ | Name change | | | check he | re and attach co | eeting the 85% test, imputation | | |
| ₩ þ | Cr | | | | | | vate foundation | | | | | tus was terminated | | |
| ا≥≤ | | | ction 4947(a)(1) nonexem | _ | | | kable private found | | | under sec | tion 507(b)(1) | (A), check here | | |
| 일 1 | | | rket value of all assets at e | end of year | J Account | - | | Accı | rual | | | 60-month termination | | |
| \cap | | | Part II, col (c), line 16) | | | ther (spe | | , | | under sec | tion 507(b)(1) | (B), check here | | |
| Π̈́r | | _ | | | (Paπ I, coil | ımn (a) i | must be on cash | | | <u> </u> | | T (4) | | |
| SCANNED | Pai | t i | (The total of amounts in columecessarily equal the amoun | mns (b), (c), and ts in column (a) | d (d) may not)) | | Revenue and enses per books | | ivestment ome | | isted net ome | (d) Disbursements for charitable purposes (cash basis only) | | |
| % - | П | 1 | Contributions, gifts, grant | ts, etc., recer | ved | _ | | | - | N/ | A | | | |
| Ğ | 1 | | Check If the foundation | | | | | | _ | | | | | |
| | | 3 | Interest on savings and tempo cash investments | orary | | | 75. | | 75. | | | STATEMENT 1 | | |
| | | 4 | Dividends and interest fro | m securities | | | 646,341. | 64 | 1,052. | | | STATEMENT 2 | | |
| | | 5a | Gross rents | | | | | | - · - | | | | | |
| | - | b | Net rental income or (loss) | | | | - | | - | | | | | |
| | _ | 6a | Net gain or (loss) from sale of | assets not on I | ine 10 | 1, | 230,362. | | | | | | | |
| | ŽΪ | b | Gross sales price for all assets on line 6a | 10,462 | ,457. | | | , | | | | | | |
| | Revenue | 7 | Capital gain net income (from | Part IV, line 2) | | | | 1 / 23 | 0,362 | | | | | |
| | œ | 8 | Net short-term capital gai | n | | | | 1 | neul | EIAED | | | | |
| | | 9 | Income modifications | | | | | 60 | | | 100 | | | |
| | | 10a | Gross sales less returns and allowances | | | | | 2 | NOV 1 | £ 2017 | 181 | | | |
| | | b | Less Cost of goods sold | | | | | | | 017 | 0 | | | |
| | 1 | C | Gross profit or (loss) | | | | | | OCH | | | | | |
| | | 11 | Other income | | | | 18,814. | | .0√,′9"74″. | A filt | | STATEMENT 3 | | |
| _ | 4 | 12 | Total. Add lines 1 throug | h 11 | | 1, | 895,592. | | 2,460. | | | 100 000 | | |
| | | 13 | Compensation of officers, dire | | , etc | | 120,000. | | 2,000. | | | 108,000. | | |
| | Ì | 14 | Other employee salaries a | • | | <u> </u> | 82,540. | | 8,889. | ļ | | 53,651. | | |
| | g l | | Pension plans, employee | benefits | | | 6,650. | ļ <u>.</u> | 2,328. | | | 4,323. | | |
| | penses | | Legal fees | C/m | sem 4 | <u> </u> | 10 700 | | 4 EEO | | | 0 150 | | |
| | 흲 | | Accounting fees | | MT 4 | | 12,700. | 21 | 4,550. | | | 8,150. | | |
| | Ä | | Other professional fees | ST | MT 5 | <u> </u> | 230,008. | 21 | 6,488. | | | 13,520. | | |
| | ١ <u>≩</u> | | Interest | cm | MT 6 | | 20,888. | | 2,411. | <u> </u> | | 4,477. | | |
| | St. | | Taxes | | MI O | <u> </u> | 20,000. | <u> </u> | Z,411. | | | 4,4//• | | |
| | Ξ̈́Ι | | _ ` | F | | | 53,492. | 1 | 8,722. | | | 34,770. | | |
| | 틹 | | Occupancy Travel, conferences, and | na a atun a a | | | 33,432. | | 0,122. | | | 34,770. | | |
| | 힐 | | | | | | | . <u>-</u> | | | | | | |
| | ā | | Printing and publications | | MT 7 | - | 37,363. | 3 | 7,085. | | | 150. | | |
| | .⊑ L | | Other expenses Total operating and adm | | / | - | 37,303. | | 7,000. | | | | | |
| | era | 24 | expenses. Add lines 13 t | | | | 563,641. | 32 | 2,473. | | | 227,041. | | |
| | 이 | 25 | Contributions, gifts, gran | | | 1 | 571,934. | | <u> </u> | | | 1,571,934. | | |
| | - 1 | | Total expenses and disb | 15 | | | | | | | | -,5,1,554. | | |
| | | -0 | Add lines 24 and 25 | | | 2 | 135,575. | 32 | 2,473. | | | 1,798,975. | | |
| - | \dashv | 27 | Subtract line 26 from line | 12. | | " | | | - 1 - 1 - 1 | | | 2,.50,5.50 | | |
| | | | Excess of revenue over expen | | reaments | | 239,983. | | | | | | | |
| | | | Net investment income (| | | | 200,000. | 1.56 | 9,987. | | | | | |
| | | | Adjusted net income (if n | | | | | ,50 | - 100.0 | N/ | A | | | |
| - | | | | work Peduct | | | | | · | <u> </u> | a 11 | Form 990-DF (2016) | | |

Form 990-PF (2016) H. LESLIE & ELAINE S. HOFFMAN FOUNDATION 95-6048600 Page 2 Beginning of year End of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value 136,833 206,302. 206,302. 1 Cash - non-interest-bearing 1,819,262 885,794. 885,794. 2 Savings and temporary cash investments 2,895. 3 Accounts receivable ► 2,895. 2,895. Less: allowance for doubtful accounts 4 Pledges receivable ▶ Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations STMT 9 7,659,670. 7,336,408. 7,315,283. 14,299,989. STMT 10 8,931,487. 11,027,251. **b** Investments - corporate stock 1,940,743. 2,574,088. 2,558,996. STMT 11 c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans STMT 12 5,740,235. 4,914,437. 13 Investments - other 14 Land, buildings, and equipment: basis Less accumulated depreciation 4,759. STATEMENT 13) 723. 723. 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 26,232,989. 26,947,898. 30,383,633. instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 0. 23 Total liabilities (add lines 17 through 22) **▶** X Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Vet Assets or Fund Balances 26,232,989. 26,947,898. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 26,232,989. 26,947,898. 30 Total net assets or fund balances 26,232,989. 26,947,898 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 26,232,989. -239,983. 2 Enter amount from Part I, line 27a SEE STATEMENT 8 3 Other increases not included in line 2 (itemize) 954,892. 3 26.947.898. 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 26,947,898. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 Form 990-PF (2016)

| Part IV Capital Gains a | | | | t Income | | | | | | | |
|---|----------------|--|-----------------|--------------------------------------|----------------|-------------|---------------------------|----------------------|----------------------------|--|--------------|
| | | i) of property sold (e.go ommon stock, 200 sh | | | [(b) | - Purc | quired (hase ition | c) Date a (mo., d | acquired av. vr.) | (d) Date (mo., day | |
| 1a | | | | | י ן | - Dona | ition | | | + ` | |
| b SEE ATTACHED | STATE | MENT | | | | | | | | | |
| c | | | | | | | | | | | |
| d | | | | | | | | | | | |
| <u>e</u> | 40.5 | | | | <u> </u> | | | | | | |
| (e) Gross sales price | | eciation allowed allowable) | | st or other basis expense of sale | | | | | ain or (los s (f) minus | | |
| 8 | | | - | | \dashv | | | | | | |
| b c | | | | | \dashv | | | | | | |
| d | | | | | _ | | | | | - | |
| e 10,462,457. | | | | 9,232,09 | 5. | | | | | 1,230, | 362. |
| Complete only for assets showing | g gain in colu | mn (h) and owned by | the foundation | on 12/31/69 | | | (1) | ains (C | ol. (h) gan | n minus | |
| (i) F.M.V. as of 12/31/69 | | djusted basis of 12/31/69 | | cess of col. (1) | | | | | ot less the (from col. | | |
| a | | | | |] | | | | | | |
| b | | | | | | | | | | | |
| C | | | | | | | | | | | |
| d | | | | | - | | | | | 1,230, | 362 |
| е | | C 14 | n a David Lar | | - \ | | | | | 1,230, | 302. |
| 2 Capital gain net income or (net cap | oital loss) | If gain, also ente | | | <i>}</i> | 2 | · | | | 1,230, | 362. |
| 3 Net short-term capital gain or (loss | | ın sections 1222(5) aı | nd (6): | | ٦ | | | | | | |
| If gain, also enter in Part I, line 8, of If (loss), enter -0- in Part I, line 8 | column (c). | | | | } | 3 | | | N/A | A | |
| Part V Qualification Ur | nder Sec | tion 4940(e) for | Reduced | Tax on Net | Inv | estn | ent Inco | me | | | |
| f section 4940(d)(2) applies, leave thi Was the foundation liable for the section f "Yes," the foundation does not qualify | on 4942 tax of | on 4940(e). Do not co | mplete this pa | nrt. | | | | | | Yes [| X No |
| 1 Enter the appropriate amount in ea | ach column t | | nstructions be | fore making any ei | | | | | - | (d) | |
| Base period years Calendar year (or tax year beginnin | g in) | (b) Adjusted qualifying dis | | Net value of no | | rıtable- | | | Distr (col. (b) d | ibutión ratio ivided by col. (d | |
| 2015 | _ | | 5,300. | | | | 7,634. | ļ | | | 0186 |
| 2014 | | | 7,051. | | | | 9,163. 4,694. | | | | 4444 8765 |
| 2013 | | | 3,113. | | | | $\frac{1,034.}{1,428.}$ | | | | 8827 |
| 2011 | | | 1,703. | | _ | | 2,857. | _ | | | 5191 |
| | | | | | | | | | | | |
| 2 Total of line 1, column (d) | | | | | | | | 2 | | .19 | <u>741</u> 3 |
| 3 Average distribution ratio for the 5 the foundation has been in existen | • | | on line 2 by 5, | or by the number | of ye | ars | | 3 | | .03 | 9483 |
| 4 Enter the net value of noncharitable | e-use assets | for 2016 from Part X, | line 5 | | | | | 4 | | 30,241, | 645. |
| 5 Multiply line 4 by line 3 | | | | | | | | 5 | | 1,194, | |
| 6 Enter 1% of net investment income | e (1% of Part | 1. line 27h) | | | | | | 6 | | | 700. |
| 2 2 | - (01 1 411 | | | | | | • | | | | |
| 7 Add lines 5 and 6 | | , | | | | | | , | | 1 209 | 731. |
| | Davi VII to | , | | | | | | 7 | <u> </u> | 1,209, | |
| 8 Enter qualifying distributions from | • | | dh and | | | n/ + | -40 | 8 | | 1,209, 1,798, | |
| 7 Add lines 5 and 6 8 Enter qualifying distributions from If line 8 is equal to or greater than See the Part VI instructions. 623521 11-23-16 | • | | 1b, and comp | olete that part using | g a 1º | % tax r | ate. | | | | 975. |

| Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions) | Form 990-PF (2016) H. LESLIE & ELAINE S. HOFFMAN FOUNDATION | | | 604860 | | | age 4 |
|---|--|-------------|-------|----------|--|-----------|----------|
| Date for fusing or determination letter: (a Charland Control of Charland Control of Charland Control of Charland Charla | <u></u> |), or 4 | 948 - | see ins | truc | tior | າຣ) |
| b Domestic Goundations that meet the section 4940(e) requirements in Part V, check here ► X | 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | \cap | | | | | |
| of Part I, line 27h • All other domestic foundations enter 2% of line 27h. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter 40-) 3 Add lines 1 and 2 3 Tis 7,700 . 5 Tax based on investment incomes. Subtract line 4 from line 3.1, zero or less, enter 40- 5 Tax based on investment incomes. Subtract line 4 from line 3.1, zero or less, enter 40- 5 Tax based on investment incomes. Subtract line 4 from line 3.1, zero or less, enter 40- 5 Total based on investment incomes. Subtract line 4 from line 3.1, zero or less, enter 40- 5 Total based on investment incomes. Subtract line 4 from line 3.1, zero or less, enter 40- 5 Total based on investment incomes. Subtract line 4 from line 3.1, zero or less, enter 40- 5 Total based on investment incomes. Subtract line 4 from line 3.1, zero or less, enter 40- 5 Total based on investment incomes. Subtract line 4 from line 3.1, zero or less, enter 40- 5 Total based on investment incomes. Subtract line 4 from line 3.1, zero or less, enter 40- 5 Exempt foreign organizations - tax withheld at source 6 Total based on investment or line 10 total creations of time to total creations of the source of 11, 2000. 6 Exempt foreign organizations - tax withheld at source 6 Total based on the source of 11, 2000. 6 Total transparent organization for extension of time to total creations of 8 more than line 7, enter amount owed 7 Total creation and from line 10 total creations of 8 more than line 7, enter amount owed 8 Total creation of 10 more payment of estimated tax. Proceedings of 11, 417. 8 Total transparent of 11, 417. 8 Total creation of 10 more payment of 10 more payment organization of 11, 417. 9 Total creation of 10 more payment organization of 11, 417. 9 Total creation of 10 more payment organization of 11, 417. 9 Total creation of 10 more payment organization of 10 more payment organization organization organization organization organization organization organizatio | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) | | | · | | | |
| e. All other domestic foundations enter 2% of the 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 15,700. 4 Subtlike A (morme) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment faciones. Subtract line 4 from line 3. If zero or less, enter -0- 6 Crodis/Payments; 2 2016 estimated bax payments and 2015 overpayment credided to 2016 6 East and 2 an | b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1% |) [| 1 | _ | <u>15</u> | ,70 | 00. |
| 2 CO. 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits-Payments: a 2016 estimated tax payments and 2015 overpayment credited to 2016 6 Exempt foregon organizations -1-tax withheld at source 6 Tax day of the application for extension of time to like (Form 888) 6 Enter any penalty for underpayment of estimated tax. Check here | of Part I, line 27b |] [| | | | | |
| 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3, if zero rises, enter -0- 6 Credist/Payments; 2 2016 estimated tax payments and 2015 overpayment credited to 2016 6 Eack pay and with application for extension of time to file (Form 8868) 6 Backup withholding erroneously withheld 6 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for undergy-payment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of here 5 and 8 is more than line 7, enter amount owed 10 Overgayment, life nor 5 more than the total of lines 5 and 8, enter the amount of line 10 to be. Credited the 2017 estimated tax ► 11 fine the amount of line 10 to be. Credited the 2017 estimated tax ► 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 15 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 16 During the tax year, did the foundation attempt to the search of the activities of the activities of the condition of the foundation of the search of the activities of the activities of the search of the activities of the activities of the searc | c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). |) [| | | | | |
| 4 Subtile A (nocone) bit (domestic section 4947(p)(1) trusts and taxable foundations only. Others enter-0-) 5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter-0- 6 Cradis-Pyments: 2 2016 stemated tax payments and 2015 overpayment credited to 2016 Exempt foreign organizations — tax withheld at source 6 Tax paid with application for extension of time to file (Form 8868) 6 C 11,000. 8 Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6s through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due, if the total of lines 5 and 8, enter the amount owed 9 Tax due, if the total of lines 5 and 8, enter the amount owed 10 Overpayment, if line 7 is more than the total of lines 5 and 8, enter the amount owerpaid 11 Enter the amount of line 10 to be Credited to 2017 estimated tax. 11 Enter the amount of line 10 to be Credited to 2017 estimated tax. 11 Finder the amount of line 10 to be Credited to 2017 estimated tax. 11 July 17 Refunded ► 10 Overpayment, if line 7 is more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 11 the answer is "yes" of a cort 15, attach a detailed descorption of the activities and copies of any materials published or distributed by the foundation in connection with the activities 10 bid its pend more than \$100 during the year (1) on the foundation like Form 1120-Poll. for this year? 10 the amount (if any) of tax on political expenditure is amposed on foundation managers. ► \$ 0. (2) On foundation managers. ► \$ 0. Enter the remulsired miles of the political expenditure is a miposed on foundation managers. ► \$ 0. Enter the remulsired miles of the political expenditure is a miposed on foundation managers. ► \$ 0. Enter the remulsired miles of the political expenditure is a miposed on foundation managers. ► \$ 0. Enter the remulsired miles | 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 1 | 2 | | | | |
| 5 Tax based on Investment Income. Subtract line 4 from line 3, if zero or less, enter d- 6 CordstPayments; a 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations - tax withheld at source c Tax paid with applicant for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6 attrough 66 8 Their any penalty for undergrapment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter it a mount overpaid 11 Enter the amount of line 10 to be: Credited to 2017 estimated tax ≥ 11 , 417 . Refunded ► 11 J. 417 . Refunded ► 11 On. Part VIII-A] Statements Regarding Activities 11 J. 417 . Refunded ► 11 On. Part VIII-A Statements Regarding Activities 12 In J. 417 . Refunded ► 13 During the laws, did the foundation attempt to mitisence any national, state, or local legislation or did it participate or intervene me any political campagn? 15 During the lamp of the state of the | 3 Add lines 1 and 2 | | 3 | | <u> 15</u> | <u>,7</u> | |
| 6 Credits/Payments: a 2016 estimated tax payments and 2015 overpayment credited to 2018 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6 11,000. 6 8 11,000. 6 8 11,000. 6 8 11,000. 6 8 17,000. 6 9 12,000. 6 18 Enter any penalty for underpayment of estimated tax. Check here if form 2220 is attached 9 12 ax die. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owerpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owerpaid 11 Enter the amount of line 10 to be Credited to 2017 estimated tax. 12 Enter the stream of the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any penalty set. 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any penalty set. 14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any penalty set. 15 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any penalty of the state of the foundation in the form 140-P0. Lior this year? 15 During the tax is very if or 6 is a detailed description of the activities of the definition)? 16 If the snawer is 'Yes' to a detailed description of the activities of the participate or intervene in distributed by the foundation in Fermal Po-Plu. In this year? 16 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 16 Types, 'attach and calculated description of the activities 17 His residual state foundation engaged in any activities that have not previously been reported to the IRS? 18 Yes, 'attach a destalled description of the activities 19 Enter the enumbrasement | 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | 4 | | | | |
| a 2016 astimated tax payments and 2015 overpayment credited to 2015 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to title (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add times 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than the 10 times 7 enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Lefter the amount of line 10 to be: Oredited to 2017 estimated tax > 11, 417 - Refunded 11 0 Peral VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did if participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did if participate or intervene in any political campaign? 1b Usi it spend more shain \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1a X 1b Usi it spend more shain \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b X 1c X 1c Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. 1c) On the foundation hile Form 1120-POL for this year? 1c Enter the rembursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. P \$ 0 . (2) On foundation managers. P \$ 0 . 2 Has the foundation nedge and any activities that have not previously been reported to the IRS? 1b If Yes, 'natach a detailed description of the activities 3 Ax X 4 Did the foundation have at least \$5,000 in assets at any time during the year? 1b Yes, 'attach a detailed business ground in the year? 1b Yes, 'attach a detailed business ground | 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | [| 5 | | 15 | <u>,7</u> | 00. |
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| If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 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 8a Enter the states to which the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses | managers. ► \$ 0 . | | | | _ | | |
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| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X | | for caler | ndar | | _ _ | | |
| | | | | _ | -+- | _ | |
| | 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and address | es | | | | ᆜ | |

Form **990-PF** (2016)

| Form 990-PF (2016) H. LESLIE & ELAINE S. HO | | | 95-604860 | 00 Page 6 | | | | | |
|--|---|-----------------------------|--|------------------------------|--|--|--|--|--|
| Part VII-B Statements Regarding Activities for Which I | -orm 4/20 May be F | required (continu | Jea) | | | | | | |
| 5a During the year did the foundation pay or incur any amount to: | | | □ | | | | | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | | | s X No | | | | | | |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, | | | | | | | | | |
| any voter registration drive? | | | | | | | | | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes? | | | | | | | | | |
| (4) Provide a grant to an organization other than a charitable, etc., organization described in section | | | | | | | | | |
| 4945(d)(4)(A)? (see instructions) | | | | | | | | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for | | | | | | | | | |
| the prevention of cruelty to children or animals? | | | | | | | | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations | | | | | | | | | |
| section 53.4945 or in a current notice regarding disaster assistance (see instructions)? | | | | | | | | | |
| Organizations relying on a current notice regarding disaster assistance check h | ere | | ▶□ | | | | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi | rom the tax because it maintai | ined | | | | | | | |
| expenditure responsibility for the grant? | | I/A 🔲 Ye | es 🔲 No | | | | | | |
| If "Yes," attach the statement required by Regulations section 53 494 | 5-5(d) | | | | | | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | | | i | | | | | | |
| a personal benefit contract? | . ,, | Ye | es X No | 1 1 1 | | | | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | | - | Sb X | | | | | |
| If "Yes" to 6b, file Form 8870 | | | | | | | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | shelter transaction? | ☐ Ye | s X No | | | | | | |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu | | | – | 7b | | | | | |
| Part VIII Information About Officers, Directors, Trust | | nagers, Highly | | | | | | | |
| Paid Employees, and Contractors | 000, 1 00110011011 1110 | | • | | | | | | |
| 1 List all officers, directors, trustees, foundation managers and their | compensation. | | | | | | | | |
| | (b) Title, and average | (c) Compensation | (d) Contributions to employee benefit plans and deferred | (e) Expense account, other | | | | | |
| (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | and deferred compensation | allowances | | | | | |
| J. KRISTOFFER POPOVICH | TRUSTEE | | *************************************** | | | | | | |
| 225 S. LAKE AVE., STE. 1150 | | | | | | | | | |
| PASADENA, CA 91101 | 15.00 | 30,000. | 0. | 0. | | | | | |
| JENNIFER ALLEN | TRUSTEE | | | | | | | | |
| 225 S. LAKE AVE., STE. 1150 | | | | | | | | | |
| PASADENA, CA 91101 | 15.00 | 30,000. | 0. | 0. | | | | | |
| KIMBERELY SHEPHERD | TRUSTEE | , | | | | | | | |
| 225 S. LAKE AVE., STE. 1150 | 1 | | | | | | | | |
| PASADENA, CA 91101 | 15.00 | 30,000. | 0. | 0. | | | | | |
| PATRICIA FINK | TRUSTEE | 33,333 | | | | | | | |
| 225 S. LAKE AVE., STE. 1150 | INODIDE | | | | | | | | |
| PASADENA, CA 91101 | 15.00 | 30,000. | l o.l | 0. | | | | | |
| 2 Compensation of five highest-paid employees (other than those inc | | | | | | | | | |
| | | 1 | (d) Contributions to | (e) Expense | | | | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | account, other allowances | | | | | |
| NONE | devoted to position | | compensation | | | | | | |
| NONE | - | | | | | | | | |
| | | | | | | | | | |
| | 4 | | | | | | | | |
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| | 4 | | | | | | | | |
| | | | | 0 | | | | | |
| Total number of other employees paid over \$50,000 | | | Enr | 990-PF (2016) | | | | | |
| | | | rufm | <i>ᢒᢒ</i> ℧⁼ℾℾ(ՀՍ IŌ) | | | | | |

| Form 990-PF (2016) H. LESLIE & ELAINE S. HOFFMAN | | 5048600 Page 7 |
|---|---------------------------------------|------------------|
| Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued) | dation Managers, Highly | |
| 3 Five highest-paid independent contractors for professional services. If none, el | nter "NONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | |
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| | | |
| | | |
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| | | |
| - 1.000.000 | | <u>▶</u> 0 |
| Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant st | atistical information such as the | |
| number of organizations and other beneficiaries served, conferences convened, research papers | produced, etc. | Expenses |
| 1 N/A | | |
| | | |
| | | |
| 2 | | |
| | | |
| 3 | | |
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| 4 | | |
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| | | |
| Part IX-B Summary of Program-Related Investments | an based and 0 | |
| Describe the two largest program-related investments made by the foundation during the tax year 1 N/A | off filles 1 and 2. | Amount |
| 1 11/11 | · | |
| | | |
| 2 | | |
| | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| | | |
| | | |
| | | |
| | · · · · · · · · · · · · · · · · · · · | |
| Total Add lines 1 through 3 | | 0. |

| For | rm 990-PF (2016) H. LESLIE & ELAINE S. HOFFMAN FOUNDATION | 95- | -6048600 Page 8 |
|-----|---|------------|---------------------------|
| | Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations | ndations, | 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 | 29,574,964. |
| | Average of monthly cash balances | 1b | 29,574,964. 1,127,214. |
| C | Fair market value of all other assets | 1c | 0. |
| d | Total (add lines 1a, b, and c) | 1d | 30,702,178. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0 • | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 30,702,178. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 460,533. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 30,241,645. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 1,512,082. |
| P | Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.) | id certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 1,512,082. |
| 2a | Tax on investment income for 2016 from Part VI, line 5 | | |
| þ | Income tax for 2016. (This does not include the tax from Part VI.) | | 44 |
| C | | 2c | 15,700. 1,496,382. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 1,496,382. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 1,496,382. |
| 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 | 1,496,382. |
| P | Part XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 1,798,975. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| a | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 1,798,975. |
| 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 | 15,700. |

1,783,275. Adjusted qualifying distributions. Subtract line 5 from line 4 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form **990-PF** (2016)

Page 9

| Part XIII Undistributed Income (se | ee instructions) | | | |
|--|------------------|---------------------|----------|--------------|
| | (a) | (b) | (c) | (d) |
| | Corpus | Years prior to 2015 | 2015 | 2016 |
| 1 Distributable amount for 2016 from Part XI, line 7 | | | | 1,496,382. |
| 2 Undistributed income, if any, as of the end of 2016 | | | | |
| a Enter amount for 2015 only | | | 766,552. | |
| b Total for prior years: | | . | | |
| , , | | 0. | l i | |
| 3 Excess distributions carryover, if any, to 2016: | | | | |
| a From 2011 | | | | |
| b From 2012 | | | | |
| c From 2013 | | | | |
| d From 2014 | | | | |
| e From 2015 | | | | |
| f Total of lines 3a through e | 0. | | | |
| 4 Qualifying distributions for 2016 from | | | | |
| Part XII, line 4: ▶\$ 1,798,975. | | | | |
| a Applied to 2015, but not more than line 2a | | | 766,552. | |
| 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 | | | | 1,032,423 |
| e Remaining amount distributed out of corpus | 0. | | | |
| 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: | | | | |
| & Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 0. | | | |
| 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 | | 0 | | |
| assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | 0 | | |
| 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 | | | | 463,959 |
| be distributed in 2017 | | | | 403,333 |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | ^ | | | |
| may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2011 | | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2017. | _ | | | |
| Subtract lines 7 and 8 from line 6a | 0. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2012 | | | | |
| b Excess from 2013 | | | | |
| c Excess from 2014 | | | | |
| d Excess from 2015 | | | | |
| e Excess from 2016 | | | 1 | |

623581 11-23-16

Form **990-PF** (2016)

| | LIE & ELAINE | | | | 48600 Page 10 |
|---|------------------------------|------------------------------|--------------------------|--|--|
| Part XIV Private Operating I | oundations (see in | structions and Part VII | A, question 9) | N/A | |
| 1 a If the foundation has received a ruling | or determination letter that | it is a private operating | | | |
| foundation, and the ruling is effective for | or 2016, enter the date of t | he ruling | ▶ | | |
| b Check box to indicate whether the four | dation is a private operatii | ng foundation described i | n section | 4942(j)(3) or 49 | 942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | _ |
| income from Part I or the minimum | (a) 2016 | (b) 2015 | (c) 2014 | (d) 2013 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | | , |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| · | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | | |
| Subtract line 2d from line 2c 3 Complete 3a, b, or c for the | | | | <u>_</u> | |
| alternative test relied upon; | | | | | |
| a "Assets" alternative test - enter: | ĺ | | | | |
| (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 | | | <u> </u> | | |
| 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 | | | | 1 105 000 | |
| Part XV Supplementary Info | | | it the foundatio | n nad \$5,000 or m | ore in assets |
| at any time during | tne year-see insti | ructions.) | | ··· | |
| 1 Information Regarding Foundati | on Managers: | | | | |
| a List any managers of the foundation w | | | ributions received by th | ne foundation before the clo | se of any tax |
| year (but only if they have contributed | more than \$5,000). (See s | ection 50/(d)(2).) | | | |
| NONE | | | | | |
| b List any managers of the foundation w | | | or an equally large por | tion of the ownership of a p | artnership or |
| other entity) of which the foundation h | as a 10% or greater intere | st. | | | |
| NONE | | | | | |
| 2 Information Regarding Contribu | tion, Grant, Gift, Loan | . Scholarship, etc., Pr | ograms: | | <u> </u> |
| Check here ► X if the foundation | | | | not accept unsolicited regi | uests for funds. If |
| the foundation makes gifts, grants, etc | | | | | |
| a The name, address, and telephone nur | ober or e-mail address of | the person to whom appli | cations should be addr | essed: | |
| a The hame, address, and telephone has | ibui oi o mailadaroob oi | ino porcon to whom appi | | ••••• | |
| SEE STATEMENT 14 | | | | | |
| b The form in which applications should | he submitted and informa | tion and materials they sh | ionly include. | | |
| | | | | | <u>. </u> |
| c Any submission deadlines; | | | | | |
| d Any restrictions or limitations on aware | ds, such as by geographic | al areas, charitable fields. | kinds of institutions. o | r other factors: | |
| | , | , | | | |
| | | | | | |

4,498,381.

8,393,965.

Total

LOS ANGELES, CA 90089

SEE CONTINUATION SHEET(S)

Page 12

H. LESLIE & ELAINE S. HOFFMAN FOUNDATION

| Enter gross amounts unless otherwise indicated. | Unrelated t | ousiness income | | d by section 512, 513, or 514 | (e) |
|---|-------------------------|---|--|-------------------------------|---------------------------------------|
| 1 Program service revenue: | (a) Business code | (b) Amount | Exclu- sion code | (d) Amount | Related or exempt function income |
| a | | | 1 | | |
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| 4 | | | f - f | | |
| Δ | | | + | | |
| · | | | ++ | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | <u> </u> | _ | | | · · · · · · · · · · · · · · · · · · · |
| 3 Interest on savings and temporary cash | | | | | |
| investments | 1 1 | | 14 | 75. | |
| 4 Dividends and interest from securities | - | | 14 | 646,341. | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | | 01 | 18,814. | |
| 8 Gain or (loss) from sales of assets other | | | ~ - | | |
| than inventory | | | 18 | 1,230,362. | |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | - | | |
| 11 Other revenue. | | | ! | | |
| 8 | 1 1 | | 1 1 | | |
| b | | | | | |
| | _ | | t – t | | |
| c | 1 1 | | | | |
| c | - | | | | |
| · | | | | | |
| d e | | 0. | | 1.895.592. | 0 |
| d e 12 Subtotal. Add columns (b), (d), and (e) | | 0. | | 1,895,592. | |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) |) | 0. | | 1,895,592. | |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations | · | | · | 13 | |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) | · | | · | 13 | |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities | s to the Accon | nplishment of Ex | cempt | Purposes | 1,895,592 |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Accor | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 1,895,592 |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities | s to the Accor | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 1,895,592 |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Accor | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 1,895,592 |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Accor | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 1,895,592 |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Accor | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 1,895,592 |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Accor | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 1,895,592 |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Accor | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 1,895,592 |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Accor | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 1,895,592 |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Accor | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 1,895,592 |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Accor | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 1,895,592 |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Accor | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 1,895,592 |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Accor | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 1,895,592 |
| d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Accor | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 1,895,592 |
| d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Accon | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 1,895,592 |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Accon | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 1,895,592 |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Accon | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 1,895,592 |
| d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Accon | nplishment of Exolumn (e) of Part XVI-A | cempt | Purposes | 0 1,895,592 |

Form 990-PF (2016) H. LESLIE & ELAINE S. HOFFMAN FOUNDATION 95-6048600 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

| 1 Did the | organization directly or indir | ectly engage in any | of the followin | g with any other organization | n described in sec | ion 501(c) of | T Y | 'es l | No | |
|---|--|---------------------------|--------------------|--------------------------------------|--|--------------------------------------|------------------------------------|-----------------------|------------|--|
| the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | | | | | | | | | |
| a Transfe | ers from the reporting founda | ation to a noncharital | ble exempt or | ganization of: | | | 1 . 1 | | | |
| (1) Ca | ish | | | | | | 1a(1) | | <u>X</u> _ | |
| (2) Ot | her assets | | | | | | 1a(2) | | X | |
| b Other to | ransactions: | | | | | | 1 1 | | | |
| (1) Sa | iles of assets to a noncharital | ble exempt organizat | tion | | | | 1b(1) | | <u>x</u> _ | |
| (2) Pu | irchases of assets from a noi | ncharitable exempt o | rganization | | | | 1b(2) | | X | |
| (3) Re | ental of facilities, equipment, | or other assets | | | | | 1b(3) | | <u>x</u> _ | |
| | eimbursement arrangements | | | | | | 1b(4) | | X | |
| | ans or loan guarantees | | | | | | 1b(5) | | X | |
| | erformance of services or me | • | • | | | | 1b(6) | | X | |
| - | g of facilities, equipment, mai | • • | • | • • | | | 10 | | X | |
| | nswer to any of the above is | | | | | | | s, | | |
| | rices given by the reporting for | | | ed less than fair market valu | ie in any transactioi | n or snaring arrangement, sn | ow in | | | |
| (a)Line no | (b) Amount involved | | | e exempt organization | [(d) p | | | | | |
| (a)Line no | (b) Alliount involved | (C) Name of | N/A | exempt organization | (u) Descriptio | n of transfers, transactions, and si | naring arrar | ngement | .s | |
| | | <u></u> _ | N/A | | | | | | | |
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| 2a Is the fe | oundation directly or indirect | ly affiliated with, or r | elated to, one | or more tax-exempt organiz | zations described | | | _ | | |
| | ion 501(c) of the Code (other | | | · - | | | Yes | \mathbf{X} | No | |
| | " complete the following sche | | , | | | | | | | |
| | (a) Name of org | | | (b) Type of organization | | (c) Description of relationsh | ıp | | | |
| | N/A | | | | | | | | | |
| | | | | | - | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| l and | der penalties of perjury, I declare to d belief, it is true, correct, and con | | | | | May | the IHS dis | cuss thi | s | |
| Sign L | belief, it is add, correct, and con | ipiete Declaration of pre | oparer (other than | in taxpayer) is based on all fillion | | show | n with the p <u>/n</u> below (s | oreparer ee_instr] |)? | |
| Here | 1 K (pprice | <u></u> | | X"/15/17 | TRUST | EE | Yes | | No | |
| <u>_</u> | Signature of offuer or trustee | | | Date / | Title | | | | _ | |
| | Print/Type preparer's na | me | Preparer's si | ignature | Date | Check if PTIN | | | | |
| D.::: | 1 | | | | 1 | self- employed | 404- | | | |
| Paid | SARAH CULL | | Mars | h well | 11/09/2017 | | 1316 | | | |
| Prepare | | THOUSE CA | RLIN & | VAN TRIGT L | LP | Firm's EIN ▶ 95-43 | 4552 | 6 | | |
| Use Onl | | 0 11 - 201 - | - 2-10 | | | ļ | | | | |
| | | | | LVD., 5TH FL | OOR | 1,505 | 242 | E 1 A | . ^ | |
| | PA PA | SADENA, C | A ATIO | <u> </u> | | Phone no. (626) | | | | |
| | | | | | | For | m 990- | 2 (2 | :016) | |

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| ONITHORITON | FUR JJU- | FF, | FF |
|-------------|----------|-----|----|
| 5-6048600 | PAGE | 1 | OF |

| Part IV Capital Gains and | Losses for Tax on Investment Income | | | | |
|--|---|---|--|---|----------------------------------|
| (a) List 2-stor | and describe the kind(s) of property soly brick warehouse; or common stock, 2 | d, e.g., real estate, 00 shs. MLC Co. | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
| 1a CAPITAL GUARI | DIAN (SEE ATTACHME | NT) | P | VARIOUS | 12/31/16 |
| b CAPITAL GUARI | DIAN (SEE ATTACHME | NT) | P | VARIOUS | 12/31/16 |
| c MORGAN STANLI | EY (SEE ATTACHMENT | ') | P | | 12/31/16 |
| d CAPITAL GAIN | FROM INVESTMENTS | | P | | 12/31/16 |
| e LIQUIDATION (| | | P | VARIOUS | 12/31/16 |
| f CAPITAL GAINS | S DIVIDENDS | | | | |
| g | | | | | |
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| m n | | | | | |
| 0 | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | |) Gain or (loss) lus (f) minus (g) | <u> </u> |
| a 3,629,028 | <u>'</u> | 3,730,644. | (0) P | | 101,616. |
| a 3,629,028 b 4,235,073 | | 3,513,261. | | | 721,812. |
| 1,257,393 | | 1,253,823. | | | $\frac{721,012.}{3,570.}$ |
| d 26,339 | | 1,233,023. | | | 26,339. |
| e 1,249,886 | | 734,367. | | | 515,519. |
| f 64,738 | | | | | 64,738. |
| g | | | | | <u> </u> |
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| Complete only for coasts sha | Use I column (h) and owned by | the foundation on 19/21/60 | 481 | | |
| Complete only for assets site | | | | ses (from col. (h)) of col. (h) gain ove | |
| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (1) over col. (1), if any | | ot less than "-0-") | |
| <u>a</u> | | | | | 101,616. |
| <u>b</u> | | | | ·-· · · · · · · · · · · · · · · · · | 721,812. |
| C | | | · · · - | | 3,570. |
| <u>d</u> | | | | | 515,519. |
| f f | | | | | 64,738. |
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| 0 | | | | | |
| 2 Capital gain net income or (ne | et capital loss) { If gain, also ente | r in Part I, line 7 0-" in Part I, line 7 | 2 | 1, | 230,362. |
| 3 Net short-term capital gain or | (loss) as defined in sections 1222(5) ar | , I | | | |
| If gain, also enter in Part I, lin If (loss), enter "-0-" in Part I, li | e 8, column (c). | <u> </u> | 3 | N/A | |

H. LESLIE & ELAINE S. HOFFMAN FOUNDATION 95-6048600

| art XV Supplementary Information | | | | |
|---|--|----------------------|----------------------------------|--------------|
| Grants and Contributions Approved for Fu | If recovery to an industrial | | | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | ļ |
| | | | | |
| SC NORRIS CANCER CENTER | NONE | PUBLIC CHARITY | GENERAL SUPPORT | |
| 441 EASTLAKE AVE., SUITE 8302 OS ANGELES, CA 90089 | | | | 3,499,2 |
| 3 12102223, 617 70002 | - | <u> </u> | | |
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| Total from continuation sheets | | 1 | <u> </u> | 3,499,2 |

| FORM 990-PF INTERES | ST ON SAVING | S AND T | EMPORA | RY CASH | INVESTMENTS | STATEMENT 1 |
|---|-----------------|-------------------------|--------------------------|----------------------------|---------------------------------|-------------------------------|
| SOURCE | | | (A) EVENUE R BOOKS | | (B) INVESTMENT INCOME | (C) ADJUSTED NET INCOME |
| INTEREST INCOME ON S | SAVINGS & | | 7 | 75. | 75. | |
| TOTAL TO PART I, LII | NE 3 | | 7 | 75. | 75. | |
| FORM 990-PF | DIVIDENDS | AND INT | EREST | FROM SEC | CURITIES | STATEMENT 2 |
| SOURCE | GROSS AMOUNT | CAPIT GAIN DIVIDE | IS | (A) REVENUE PER BOOK | | |
| CAPITAL GAIN DISTRIBUTION DIVIDENDS/INTEREST FROM | 64,738. | 64, | 738. | | 0. | 0. |
| SECURITIES/INVESTM | 646,341. | | 0. | 646,34 | 1. 641,0 | 52. |
| TO PART I, LINE 4 | 711,079. | 64, | 738. | 646,34 | 641,0 | 52. |
| FORM 990-PF | | OTHER | RINCOM | Œ | | STATEMENT 3 |
| DESCRIPTION | | | REV | A) ENUE BOOKS | (B) NET INVEST MENT INCOM | |
| OTHER INVESTMENT INC | COME | | | 18,814. | 20,97 | 1. |
| TOTAL TO FORM 990-PI | F, PART I, I | LINE 11 | | 18,814. | 20,97 | 1. |

| FORM 990-PF | ACCOUNTI | NG FEES | STATEMENT 4 | | |
|---|---|---|-------------------------------|-------------------------------|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| ACCOUNTING FEES | 12,700. | 4,550. | | 8,150. | |
| TO FORM 990-PF, PG 1, LN 16B | 12,700. | 4,550. | | 8,150. | |
| FORM 990-PF C | THER PROFES | SIONAL FEES | S | TATEMENT 5 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| INVESTMENT COUNSELING INDEPENDENT CONTRACTOR | 209,208. 20,800. | 209,208. | | 0. 13,520. | |
| TO FORM 990-PF, PG 1, LN 16C | 230,008. | 216,488. | | 13,520. | |
| FORM 990-PF | TAX | ES | S | ratement 6 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| FEDERAL EXCISE PAYROLL TAXES | 14,000. 6,888. | 0. 2,411. | | 0. 4,477. | |
| TO FORM 990-PF, PG 1, LN 18 | 20,888. | 2,411. | | 4,477. | |
| FORM 990-PF | OTHER E | XPENSES | S' | PATEMENT 7 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| BANK CHARGES MISCELLANEOUS FILING FEES BOND PREMIUM AMORTIZATION PORTFOLIO EXPENSES | 508. 1,398. 150. 28,163. 7,074. | 508. 1,398. 0. 28,035. 7,074. | | 0. 0. 150. 0. | |

| H. LESLIE & ELAINE S. HOFFMAN | EQUATO VIII CA | XT. | | 95-6048 | 600 |
|---|----------------|----------------|------------------------|---------------------|--------------|
| OTHER EXPENSES | 70. | | 70. | | 0. |
| TO FORM 990-PF, PG 1, LN 23 | 37,363. | 37, | | 1 | 50. |
| <u> </u> | = | | | | - |
| FORM 990-PF OTHER INCREASES I | N NET ASSET | rs or fu | ND BALANCES | STATEMENT | 8 |
| DESCRIPTION | | | | TUUOMA | |
| CAPITAL GUARDIAN DONATED APPREC | IATED STOCE | К | | 954,8 | 92. |
| TOTAL TO FORM 990-PF, PART III, | LINE 3 | | | 954,8 | 92. |
| FORM 990-PF U.S. AND STA | TE/CITY GOV | VERNMENT | OBLIGATIONS | STATEMENT | <u></u> |
| DESCRIPTION | U.S. GOV'T | OTHER GOV'T | BOOK VALUE | FAIR MARKE | —- Т |
| US & STATE GOVERNMENT OBLIGATIONS-CAPITAL GUARDIAN STATE MUNICIPAL BONDS-CAPITAL GUARDIAN | <u>x</u> | x | 7,159,939. 176,469. | 7,139,6 | |
| TOTAL U.S. GOVERNMENT OBLIGATIO | NS | - | 7,159,939. | 7,139,6 | |
| TOTAL STATE AND MUNICIPAL GOVER | 176,469. | 175,6 | 64. | | |
| TOTAL TO FORM 990-PF, PART II, | LINE 10A | - - | 7,336,408. | 7,315,2 | 83. |
| FORM 990-PF | CORPORATE | STOCK | | STATEMENT | 10 |
| DESCRIPTION | | | BOOK VALUE | FAIR MARKE VALUE | T |
| CORPORATE STOCKS-CAPITAL GUARDI | AN | - | 11,027,251. | 14,299,9 | 89. |
| TOTAL TO FORM 990-PF, PART II, | LINE 10B | - | 11,027,251. | 14,299,9 | 89. |
| | | = | | | |

| FORM 990-PF | CORPORATE BONDS | | STATEMENT 11 |
|--|-------------------------------|---------------------------|----------------------|
| DESCRIPTION | | BOOK VALUE | FAIR MARKET VALUE |
| CORPORATE BONDS-CAPITAL GUARDIAN | 2,574,088. | 2,558,996. | |
| TOTAL TO FORM 990-PF, PART II, L | INE 10C | 2,574,088. | 2,558,996. |
| FORM 990-PF 0 | THER INVESTMENTS | | STATEMENT 12 |
| DESCRIPTION | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE |
| INVESTMENT IN MUTUAL FUND-CAPITAL | L COST | | |
| GUARDIAN | | 2,840,486. | 2,968,339. |
| INVESTMENT IN MUTUAL FUND-UBS INVESTMENT IN ALTERNATIVE | COST | 65,633. | 65,633. |
| INVESTMENT IN ALTERNATIVE INVESTMENT-CAMDEN PRIVATE EQUITY | COST | 153,218. | 234,509. |
| INVESTMENT IN ALTERNATIVE | COST | 133,210. | 234,509. |
| INVESTMENT-DB GLOBAL SELECT | 0051 | 233,712. | 152,391. |
| DRINKTECK LLC | COST | 49,958. | 49,958. |
| MORTGAGE BACKED SECURITIES | COST | 1,103,310. | 1,087,583. |
| EXCELSIOR | COST | 468,120. | 555,238. |
| TOTAL TO FORM 990-PF, PART II, L | INE 13 | 4,914,437. | 5,113,651. |
| FORM 990-PF | OTHER ASSETS | | STATEMENT 13 |
| DESCRIPTION | BEGINNING OF YR BOOK VALUE | END OF YEAR BOOK VALUE | FAIR MARKET VALUE |
| PURCHASED INTEREST ON BONDS | 4,759. | 723. | 723. |
| TO FORM 990-PF, PART II, LINE 15 | 4,759. | 723. | 723. |
| | | | |

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

14

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

J. KRISTOFFER POPOVICH 225 S. LAKE AVE., STE 830 PASADENA, CA 91101

TELEPHONE NUMBER

626-243-5100

FORM AND CONTENT OF APPLICATIONS

THE FOUNDATION HAS NO FORMAL APPLICATION PROCEDURE, REQUESTS FOR GRANTS ARE RECEIVED IN ANY FORM.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE

H. LESLIE AND ELAINE S. HOFFMAN FOUNDATION

Supplementary Information 2016

| RECIPIENT NAME AND ADDRESS | IF RECIPIENT IS AN INDIVIDUAL SHOW ANY RELATIONSHIP TO ANY FOUNDATION MANAGER OR SUBSTANTIAL CONTRIBUTOR | FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
|--|--|--------------------------------------|--|--------------|
| | tributions Paid During the | Year or Approved for Fu | ture Payment | |
| a Paid during the year | <u> </u> | | , | |
| ANIMAL SHELTER OF WOOD RIVER VALLEY | None | Public Charity | General Needs | 2,500 00 |
| P O Box 1496 | 1 | | } | |
| Los Angeles, CA 90027-1462 CHILDREN'S HOSPITAL OF LOS ANGELES | None | Public Charity | 0 | 112,717 75 |
| 14650 Sunset Blvd | None | Public Criarity | General Needs | 112,717 73 |
| Los Angeles, CA 90027 | | | ì | |
| HILLSIDES HOME FOR CHILDREN | None | Public Charity | General Needs | 10,000 00 |
| 940 Avenue 64 | | r abile Criarky | Concrai Neccos | 10,000 00 |
| Pasadena, CA 1005-2711 | | | | |
| HOLY FAMILY CHURCH | None | Public Charity | General Needs | 10,000 00 |
| 1527 Fremont | | • | 1 | |
| South Pasadena, CA 91030 | L | | | _ |
| HUNTINGTON LIBRARY & ART GALLERY | None | Public Charity | General Needs | 2,500 00 |
| 1151 Oxford Road | } | | 1 | |
| San Marino, CA 91108 | | | | |
| HUNTINGTON PTA | None | Public Charity | General Needs | 500 00 |
| 1700 Huntington Drive | | | | |
| San Marino, CA 91108 | | | | |
| INSTITUTE FOR ADVANCED CATHOLIC STUDIES | None | Public Charity | General Needs | 5,000 00 |
| 921 W 39th Street | | | | |
| Los Angeles, CA 90007 KIDSPACE A PARTICIPATORY MUSEUM | None | Duble Charts | Conomi Nicoda | 121 047 00 |
| 480 North Arroyo Blvd | None | Public Charity | General Needs | 131,847 90 |
| Pasadena, CA 91103 | | | ĺ į | |
| LAS MADRINAS | None | Public Charity | General Needs | 5,800 00 |
| Department 6778 | 1 TOTAL | 1 ablic Charity | Ocheral Necus | 0,000 00 |
| Los Angeles, CA 90084-6778 | 1 | | | |
| MAYFIELD JUNIOR SCHOOL | None | Public Charity | General Needs | 2,505 00 |
| 405 South Euclid Avenue | | ,,, | | , |
| Pasadena, CA 91101 | | | | |
| PASADENA HUMANE SOCIETY | None | Public Charity | General Needs | 2,500 00 |
| 361 South Raymond Avenue | | • | | |
| Pasadena, CA 91105 | | | | |
| POLYTECHNIC SCHOOL | None | Public Chanty | Annual Fund | 18,500 00 |
| 1030 East California Boulevard | 1 | | | |
| Pasadena, CA 91106-9972 | | | | |
| RONALD McDONALD HOUSE CHARITIES OF | None | Public Charity | General Needs | 10,000 00 |
| SOUTHERN CALIFORNIA | 1 | | } | |
| 765 South Pasadena Avenue | į į | | ļ | |
| Pasadena, CA 91105 | l | | Ĺ I | |
| SAN MARINO NATIONAL LITTLE LEAGUE | None | Public Charity | Donation | 5,000 00 |
| P O Box 80184 | 1 | | } | |
| San Marino, CA 91108 | | | | |
| SAN MARINO COMMUNITY CHURCH NURSERY SCHOOL | | Public Charity | Annual Fund | 500 00 |
| 1750 Virginia Road | None | | } | |
| San Marino, CA 91108 | <u> </u> | | | |
| SCGA FOUNDATION | None | Public Charity | General Needs | 9,300 00 |
| 3740 Cahuenga Blvd |] | | | |
| Studio City, CA 91604 | <u> </u> | | | |
| STRATEGIC AIR & SPACE MUSEUM | None | Public Charity | Restoration | 2,000 00 |
| 28210 West Park Highway | | | | |
| Ashland, NE 68003 | <u> </u> | | <u> </u> | |

PART XV

H. LESLIE AND ELAINE S. HOFFMAN FOUNDATION Supplementary Information 2016

95-6048600

| RECIPIENT NAME AND ADDRESS | IF RECIPIENT IS AN INDIVIDUAL SHOW ANY RELATIONSHIP TO ANY FOUNDATION MANAGER OR SUBSTANTIAL CONTRIBUTOR | FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
|-----------------------------------|--|--------------------------------------|--|------------|
| UNION STATION HOMELESS SERVICES | None | Public Charity | General Needs | 5,000 00 |
| 825 E Orange Grove Blvd | 1 | | } | |
| Pasadena, CA 91104 | | | <u> </u> | |
| UNIVERSITY OF SOUTHERN CALIFORNIA | None | Public Charity | General Needs | 980,017 35 |
| Los Angeles, CA 90033-4697 | { | | | |
| | | | | |
| USC NORRIS CANCER CENTER | None | Public Charity | General Needs | 250,746 29 |
| 1441 Eastlake Ave , Suite 8302 | 1 | | | |
| Los Angeles, CA 90089 | | | | |
| WESTRIDGE SCHOOL | None | Public Charity | General Needs | 5,000 00 |
| 324 Madeline Drive | 1 | | | |
| Pasadena, CA 91105-3399 | 1 | | , | |

TOTAL За 1,571,934 29