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OMB No 1545-0052

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 instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>. 2017

Open to Public Inspection

For	cale	ndar year 2017, or tax yea	r beginning 01-01-20	)17 , a	nd e	nding 12-31-	2017		
		undation				A Employer identification number			
11-	IE MAZI	URSKY FAMILY FOUNDATION				95-4509550			
		d street (or P O box number if mail is n EVERLY DRIVE NO FL 3	not delivered to street address)	Room/suite		<b>B</b> Telephone nu	ımber (see ınstruction	าร)	
						(310) 277-7351			
		n, state or province, country, and ZIP of ILLS, CA 902124514	r foreign postal code			C If exemption application is pending, check here ▶ [			
<b>G</b> Cl	neck al	ll that apply 🔲 Initial return	☐ Initial return of a	former public charity		<b>D 1.</b> Foreign or	ganızatıons, check he	ere . $\square$	
		Final return	Amended return				rganizations meeting k here and attach co		
		Address char	<u>-</u>				undation status was t	· -	
_		ype of organization 🗹 Section n 4947(a)(1) nonexempt charitabl	501(c)(3) exempt private				n 507(b)(1)(A), chec		
		ket value of all assets at end		Cash Accru	151	E If the found	ation is in a 60-montl	a termination —	
of	year <i>(f</i>	from Part II, col (c),  \$ 15,097	Other (specify)  (Part I, column (d) must		ıaı		n 507(b)(1)(B), chec		
Pa	rt I	Analysis of Revenue and	Expenses (The total	(-) D		-		(d) Disbursements	
		of amounts in columns (b), (c), and equal the amounts in column (a) (se	(d) may not necessarily	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc	, received (attach	5,000					
	2	schedule)  Check $\blacktriangleright \Box$ if the foundation is	<b>not</b> required to attach						
Revernie	-	Sch B							
	3	Interest on savings and tempora	•						
	4	Dividends and interest from sect	urities	29	1	29			
	5a   b	Gross rents							
	6a	Net gain or (loss) from sale of a	ssets not on line 10	-					
	b								
SeV.	7	Gross sales price for all assets o Capital gain net income (from Pa			0				
ш	8	Net short-term capital gain .							
	9	Income modifications							
	10a	Gross sales less returns and allo							
	ь	Less Cost of goods sold							
	c	Gross profit or (loss) (attach sch	•						
	11	Other income (attach schedule)							
	12	<b>Total.</b> Add lines 1 through 11		5,029		29			
	13	Compensation of officers, director		C		0		0	
	14	Other employee salaries and wa	<u>-</u>						
ses	15	Pension plans, employee benefit							
ē	16a	Legal fees (attach schedule) .							
Exp	b	Accounting fees (attach schedule Other professional fees (attach s	•						
Ve	17	Interest	schedule)						
ratı	17 18		tructions)	<b>9</b> 30	1	0		0	
and Administrative Expenses	19	Taxes (attach schedule) (see ins Depreciation (attach schedule) a	,					<u> </u>	
<u>=</u>	20	Occupancy							
Ad	21	Travel, conferences, and meetin	gs						
puc	22	Printing and publications	=						
	23	Other expenses (attach schedule		150		0		0	
Operating	24	Total operating and administ	rative expenses.						
per		Add lines 13 through 23		180		0		0	
0	25	Contributions, gifts, grants paid		97,477	'			97,477	
	26	<b>Total expenses and disburse</b> 25	ments. Add lines 24 and	97,657	,	0		97,477	
	27	Subtract line 26 from line 12		11,00,				=:,,	
	a	Excess of revenue over expe	nses and	-92,628	3				
	Ь	disbursements Net investment income (if neg	gative, enter -0-1			29			
	c	Adjusted net income(if negative	-						
For		work Reduction Act Notice, se	<u> </u>	1	<u> </u>	Cat No 11289	I K For	<u>l</u> m <b>990-PF</b> (2017)	

	-	cash from merese bearing	10,505	10,030	
	2	Savings and temporary cash investments	89,360	4,239	
	3	Accounts receivable ▶			
		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 (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
2	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
&	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis >			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	107,725	15,097	
	17	Accounts payable and accrued expenses			
	18	Grants payable			
les	19	Deferred revenue			
bilities	20	Loans from officers, directors, trustees, and other disqualified persons			
است					

# Mortgages and other notes payable (attach schedule). . . . . 21

22

30

31

Part III

2

3

Other liabilities (describe >\_

Total net assets or fund balances (see instructions) .

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 . . . . . .

Decreases not included in line 2 (itemize) ▶

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

Analysis of Changes in Net Assets or Fund Balances

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

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

15,097

```
Total liabilities(add lines 17 through 22) . . . . . . . . .
   23
          Foundations that follow SFAS 117, check here ▶
Net Assets or Fund Balances
          and complete lines 24 through 26 and lines 30 and 31.
    24
          Unrestricted
   25
          Temporarily restricted
    26
          Permanently restricted .
          Foundations that do not follow SFAS 117, check here
          and complete lines 27 through 31.
```

107,725

107,725

15,097

15,097

2

3

4

5

6

107,725

-92,628

15,097

15,097 Form **990-PF** (2017)

0

0

```
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
                                                                                             107,725
                                                                                                                   15,097
```

instructions

Page **3** 

	picai camo am						
2-s		(a) kınd(s) of property sold (e g , re use, or common stock, 200 shs	(b) How acquire P—Purchas D—Donation	se	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )	
1a							
Gross	(e) sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale		Gain o	h <b>)</b> r (loss) ) mınus (g)
a							
b							
С							
d							
e							
Complete	only for assets sh	lowing gain in column (h) and ow	ned by the foundation	on 12/31/69		(	I)
FMV a	(i) as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	<b>(k)</b> s of col (ı) l (ʒ), ıf any		col (k), but not	h) gain minus less than -0-) <b>or</b> om col (h))
a							
b							
С							
d							
e							
3 Net short		(net capital loss)  n or (loss) as defined in sections: , line 8, column (c) (see instructi			}	2	
ın Part I,					} <u></u>	3	
Part V Qu	alification Und	der Section 4940(e) for Re	duced Tax on Net	Investmen	t Inco	me	
For optional use	by domestic priva	ate foundations subject to the sec	ction 4940(a) tax on ne	et investment i	ncome )	1	
Was the foundati		ection 4942 tax on the distributa			eriod?	☐ Ye	es 🔽 No
		ualify under section 4940(e) Do					
	····	nt in each column for each year,	see instructions before	making any e	ntries	, n	
(a) Base period yea year (or tax year	ars Calendar beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab		(	( <b>d)</b> Distribution rati col (b) divided by c	ol (c))
2010		50,076		6,543			7 653370
201		67,934		191,035			0 355610
2014		33,445		10,737			3 114930
201		181,652		162,482			1 117982
201:		54,495		171,246	- T		0 318226
	ne 1, column (d)			· : : ·	2		12 560118
		r the 5-year base period—divide tion has been in existence if less		, or by the	3		2 512024
		naritable-use assets for 2017 fron		[	4		58,112
<b>5</b> Multiply lin	e 4 by line 3 .			[	5		145,979
<b>6</b> Enter 1% o	of net investment	income (1% of Part I, line 27b)		[	6		0
<b>7</b> Add lines 5	5 and 6			[	7		145,979
C F-+	.c	- form Doub VII long 4			$\overline{}$		07.477

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

97,477

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

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

1 List all officers, directors, trustee	es, foundation managers ar	nd their compensation	(see instructions).	
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table			Componibution.	
2 Compensation of five highest-pai	d employees (other than t	hose included on line :	L—see instructions). If nor  Contributions to	ie, enter "NONE."
(a) Name and address of each employee pa more than \$50,000	Title, and average hours per week  (b) devoted to position	(c) Compensation	employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE			(a) compensation	
	<del></del>			
<b>Total</b> number of other employees paid ove				
3 Five highest-paid independent co				0 E".
(a) Name and address of each person		1	e of service	(c) Compensation
NONE				
		-		
		_		
		-		
Total number of others receiving over \$50	,000 for professional services			0
Part IX-A Summary of Direct C				
List the foundation's four largest direct charitable organizations and other beneficiaries served, con			nation such as the number of	Expenses
1				
2				
3				
4				
<b>-</b>				
Part IX-B Summary of Program	m-Related Investments	(see instructions)		
Describe the two largest program-related inve	stments made by the foundation d	uring the tax year on lines 1	and 2	Amount
1				
<del></del>				
2				
All II	<u> </u>			
All other program-related investments  3	See instructions			
Total. Add lines 1 through 3 .		· · · · · <del>· · ·</del>		000 <b>PE</b> (2017)

1a

1b

2

3a 3h

4

5

97,477

97,477

97.477

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Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . .

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

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

2,905

2,905

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0

(d)

2017

			٠,			
X	П	7	7	Π	ī	

**b** From 2013. . . . c From 2014. . .

From 2015. . . .

e From 2016. . . . .

m	990-PF	(20	17	)	
7	rt VIII			Ind	4

For

Undistributed Income (see instructions)

Distributable amount for 2017 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only. . . . . .

**b** Total for prior years

Excess distributions carryover, if any, to 2017 From 2012. . . . .

same amount must be shown in column (a) )

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2012 not

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

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

Subtract lines 7 and 8 from line 6a . . . .

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . .

c Excess from 2015. . . .

d Excess from 2016. . .

e Excess from 2017. . .

**b** Excess from 2014. .

indicated below:

45.934

173,528 32.908

58.382 49,749

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

**b** Applied to undistributed income of prior years (Election required—see instructions). . . . .

c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . . **d** Applied to 2017 distributable amount. . . .

e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2017 (If an amount appears in column (d), the

> 173.528 32,908

> > 58.382

49.749

94.572

94.572 0

455,073

45.934

409,139

360.501

(a)

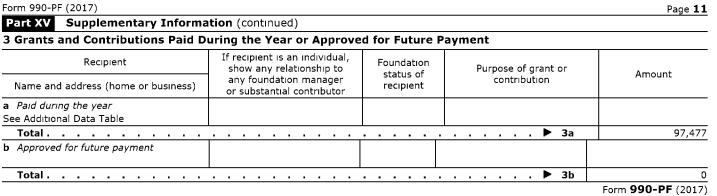
Corpus

(b)

Years prior to 2016

(c)

2016



iter gross	amounts unless otherwise indicated	Unrelated bus	siness income	Excluded by section	512, 513, or 514	(e) Related or exemp
. Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
-						
	and contracts from government agencies ship dues and assessments.					
Interes	st on savings and temporary cash					
Dividen	ds and interest from securities			14	29	
	tal income or (loss) from real estate					
	financed property					
	ntal income or (loss) from personal property					
Other ir	nvestment income					
	r (loss) from sales of assets other than					
	ory					
Gross p	rofit or (loss) from sales of inventory					
	evenue a					
С						
		I				
d						
d			0		29	
d e 2 Subtota 3 <b>Total</b> . /	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0	13	29 <b>3</b>	29
de Subtota Total. A	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Adshructions to verify calcul	ations )				
d e Subtota Total. A (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	29
de Subtota Total. / (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  arksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which	ations ) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	21
de Subtota Total. / (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	21
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de Subtota Total. / (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	21
de 2 Subtota 3 Total. A (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	29
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orm	990-PF	(2017)							Pag	ge <b>13</b>
Pa	rt XVI	Information Re Exempt Organi		sfers To a	ınd Transactio	ns and Rela	ntionships With None	charitable		
		organization directly or in e Code (other than sectio					zation described in sectior rical organizations?	n 501	Yes	No
аΤ	ransfers	s from the reporting foun	dation to a nonch	arıtable exe	empt organization	of				
(	<b>1)</b> Cas	h						1a(1)		No
	-	er assets						. 1a(2)		No
		insactions								
-	-	es of assets to a nonchar						1b(1)		No
		chases of assets from a r						. 1b(2)		No
-	-	ital of facilities, equipmer	•					. 1b(3)		No
•	•	mbursement arrangemen ns or loan guarantees.						1b(4) 1b(5)		No No
•	-	ormance of services or m						1b(5)		No
•	-	of facilities, equipment, n	·	-				. 1c		No
d If o ir	the and	swer to any of the above ods, other assets, or ser	ıs "Yes," complet vices given by the	te the follow reporting for column (d	ing schedule Colu foundation If the f I) the value of the	imn <b>(b)</b> shoul foundation rec goods, other a	d always show the fair make served less than fair marke assets, or services receive on of transfers, transactions, a	et value ed	ngemen	ts
		• •					·			
d	escribed	undation directly or indire d in section 501(c) of the complete the following si	Code (other than	•	*		-	. 🗆 Yes	<b>~</b>	No
		(a) Name of organization	on	(b	) Type of organizatio	n	(c) Description o	f relationship		
<u> </u>	of wh		, it is true, correc				anyıng schedules and stat ther than taxpayer) ıs bas			
Sig Her		*****			2018-10-30	****	**	May the IRS di return with the prepa		
		Signature of officer or t	rustee		Date	Title		below (see instr )?	✓ Yes [	□No
		Print/Type preparer's	s name Pre	parer's Sıgn	ature	Date	Check if self	ΓΙΝ	.4.50	
Pai		RUSSELL D FRANC	is				employed ▶ □	P00620	1152	
	pare Onl	у	NCIS & ASSOCIAT				Fı	rm's EIN ▶95	-48267	00
			O1 S BEVERLY DR		А		Pt	none no (310	) 277-7	7351

BEVERLY HILLS, CA 902124514

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, Contributions to (e) other allowances hours per week not paid, enter (b) devoted to position -0-) employee benefit plans and deferred compensation BETSY MAZURSKY CEO/CFO & DIR 0 00 501 S BEVERLY DRIVE 3RD FLOOR BEVERLY HILLS, CA 90212 JILL MAZURSKY-CODY SEC & DIR 0.00 EO1 C BEVERLY DRIVE 3DD ELOOR

BEVERLY HILLS, CA 90212				
CARLY DE CASTRO	DIRECTOR	0	0	0
501 S BEVERLY DRIVE 3RD FLOOR BEVERLY HILLS, CA 90212	0 00			

MATE DOTEN	21250702			
501 S BEVERLY DRIVE 3RD FLOOR BEVERLY HILLS, CA 90212	0 00			
CARLY DE CASTRO	DIRECTOR	0	0	0
DEVERET TILES, CA 30212				

501 S BEVERLY DRIVE 3RD FLOOR BEVERLY HILLS, CA 90212	0 00			
KATE BRIEN	DIRECTOR	0	0	0
FOA C DEVENIV DRIVE ARD ELOOR	0 00			

BEVERLY HILLS, CA 90212				
KATE BRIEN	DIRECTOR	0	0	0
501 S BEVERLY DRIVE 3RD FLOOR	0 00			

KATE BRIEN	DIRECTOR	0	0	0
501 S BEVERLY DRIVE 3RD FLOOR BEVERLY HILLS, CA 90212	0 00			

	BIRLOTOR	·		ľ
501 S BEVERLY DRIVE 3RD FLOOR BEVERLY HILLS, CA 90212	0 00			
				1

BEVERLY HILLS, CA 90212		_	_	
JOHN WROBEL	DIRECTOR	0	0	

0 00

501 S BEVERLY DRIVE 3RD FLOOR BEVERLY HILLS, CA 90212

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

than \$5,000).

BETSY MAZURSKY

I JILL MAZURSKY-CODY

### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PLANNED PARENTHOOD NONE CHARITABLE AID WOMEN'S RIGHTS FOR 4,570 810 SEVENTH AVENUE REPRODUCTION NEW YORK, NY 10019 CEEEEN DI AVUOLICE THEATER THEATED 8 000 NONE

10886 LE CONTE AVE LOS ANGELES, CA 90024	NONE	THEATER	THEATER	8,000
HARVARD-WESTLAKE SCHOOL 3700 COLDWATER CANYON STUDIO CITY, CA 91604	NONE	SCHOOL	IS A SCHOOL WHOSE CURRICULUM AND PROGRAMS CREATE AND EDUCATIONAL ENVIRONMENT DESIGNED FOR STUDENTS WHO POSSESS BOTH THE MOTIVATION AND THE ABILITY TO PURSUE A RIGOROUS COLLEGE PREPARATORY COURSE OF STUDY	3,500

97,477

Total.

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
PHASE ONE FOUNDATION 5256 26TH STREET SUITE 201 SANTA BARBARA, CA 90402	NONE	501(C)(3) NON-PROFIT	DEDICATED TO SUPPORTING PHASE I CLINICAL RESEARCH AND TREATMENT PROGRAMS FOR PATIENTS WITH CANCER	5,000
PLASTIC POLLUTION COALITION 2150 ALLSTON WAY SUITE 460 BERKELEY, CA 94704	NONE	CHARITABLE	PRODUCE A COMPREHENSIVE CURICULUM FOR CHILDREN TO LEARN ABOUT THE IMPORTANCE OF COASTLINES, AND EMPOWER THEM TO ACT TO PROTECT THIS CRUCIAL ENVIRONMENT, RAISE AWARENESS OF THE MANY UNSUSTAINABLE PRACTICES THAT ARE HARMING THE WORLD'S BEACHES AND COASTS, EDUCATE CHILDREN ABOUT THE SCIENCE OF NATURAL BEACHES AND EMPOWER THEM TO ACT TO PROTECT THEIR COASTAL ENVIORNMENT, ADVOCATE FOR SENSIBLE, SCIENCE-BASED POLICIES AND REGULATIONS THAT WILL PROTECT AND PRESERVE COASTLINES AND BEACHES AROUND THE WORLD, AND MOBILIZE INDIVIDUALS TO RECOGNIZE AND ADDRESS GLOBAL ISSUES OF COASTAL MANAGEMENT	17,750
TEEN LINEPO BOX 48750 LOS ANGELES, CA 90048	NONE	CHARITABLE	A CONFIDENTIAL TELEPHONE HELPLINE FOR TEENAGED CALLERS	5,283
Total				97,477

3a

# Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE PAINTED TURTLE NONE NON-PROFIT SEEKS TO REACH BEYOND 6,000 1300 4TH STREET SUITE 300 ORGANIZAT ILLNESS, TO INSPIRE CHILDREN SANTA MONICA, CA 90401 WITH LIFE-THREATENING DISEASES TO RECOME THEIR

			GREATER SELVES	
SAN ANTONIO AREA FOUNDATION 303 PEARL PARKWAY SUITE 114 SAN ANTONIO, TX 78215	NONE	NON-PROFIT 501(C)(3)	HELPING DONORS ACHIEVE THEIR CHARITABLE GOALS FOR THE GREATER BENEFIT OF THE COMMUNITY	500
GLOBAL WATER CHALLENGE 2900 S QUINCY STREET SUITE 375 ARLINGTON, VA 22206	NONE	NON-PROFIT 501(C)(3)	GLOBAL WATER CHALLENGE (GWC) CONNECTS ORGANIZATIONS ACROSS SECTORS TO SOLVE OUR WORLD'S MOST PRESSING WATER CHALLENGES THROUGH ACCESS TO SUSTAINABLE	50

AND HYGIENE (WASH)

97,477

CLEAN WATER, SANITATION

Total . 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount					
recipient.	show any relationship to	status of	contribution	7.1110-01112	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
EB RESEARCH PARTNERSHIP 132 EAST 43RD ST SUITE 432 NEW YORK, NY 10017	NONE	NON-PROFIT 501(C)(3)	FUNDING RESEARCH AIMED AT TREATING AND ULTIMATELY CURING EPIDERMOLYSIS BULLOSA (EB), A GROUP OF DEVASTATING AND LIFE- THREATENING GENETIC SKIN DISORDERS THAT AFFECT CHILDREN FROM BIRTH	4,150	
A WINDOW BETWEEN WORLDS 710 4TH AVENUE UNIT 5 VENICE, CA 90291	NONE	NON-PROFIT 501(C)(3)	COLLABORATES WITH HUMAN SERVICE AGENCIES ACROSS THE COUNTRY, TRAINING AND SUPPORTING THE STAFF AT THESE PARTNER ORGANIZATIONS IN FACILITATING OUR HEALING ARTS CURRICULUM	500	
ARTISTS FOR PEACE AND JUSTICE 87 WALKER ST 6B NEW YORK, NY 10013	NONE	NON-PROFIT 501(C)(3)	ENCOURAGES PEACE AND SOCIAL JUSTICE, WORKING TO ALLEVIATE POVERTY AROUND THE WORLD OUR IMMEDIATE EFFORTS SERVE THE POOREST COMMUNITIES IN HAITI WITH PROGRAMS IN EDUCATION AND TRAINING IN CREATIVE INDUSTRIES, WHILE EXPANDING OUR REACH GLOBALLY, PARTNERING WITH EFFECTIVE LOCAL ORGANIZATIONS TO GIVE YOUNG WOMEN ACCESS TO QUALITY EDUCATION	1,250	

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MOSAIC YOUTH THEATRE OF DETROIT NONE NON-PROFIT EMPOWERING YOUNG PEOPLE 2251 ANTIETAM AVE 501(C)(3) TO MAXIMIZE THEIR POTENTIAL

500

DETROIT, MI 48207			THROUGH PROFESSIONAL PERFORMING ARTS TRAINING AND THECREATION OF THEATRICAL AND MUSICAL ART THAT ENGAGES, TRANSFORMS AND INSPIRES	
COLORADO COLLEGE  14 EAST CACHE LA PUDRE ST COLORADO SPRING CO. 80903	NONE	SCHOOL	EDUCATION	1,874

Total				97,477
VARIETY THE CHILDREN'S CHARITY 4601 WILSHIRE BLVD STE 260 LOS ANGELES, CA 90010	NONE	NON-PROFIT 501(C)(3)	TO SERVE CHILDREN WHO ARE LESS FORTUNATE CHILDREN WHO LIVE AND GROW UP WITH A SERIOUS ILLNESS, DISABILITY OR DISADVANTAGE	1,000
14 EAST CACHE LA PUDRE ST COLORADO SPRING, CO 80903				

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

a Paid during the year

Total .

3a

a raid during the year				
CULVER CITY POLICE FOUNDATION 4040 DUQESNE AVE CULVER CITY, CA 90232	NONE	CHARITABLE ORGANIZAT	PROVIDES CRITICAL RESOURCES AND VITAL SUPPORT TO THE CULVER CITY POLICE DEPARTMENT	500
MUSIC CARES3030 OLYMPIC BLVD SANTA MONICA, CA 90404	NONE	CHARITABLE ORGANIZAT	THE RECORDING ACADEMY'S CHARITY MUSICARES PROVIDES A SAFETY NET OF CRITICAL ASSISTANCE FOR MUSIC PEOPLE IN TIMES OF NEED	3,500

SANTA MONICA, CA 90404		ONGANIZAT	A SAFETY NET OF CRITICAL ASSISTANCE FOR MUSIC PEOPLE IN TIMES OF NEED	
GOOD & FOUNDATION 306 W 37TH STREET 8TH FLOOR NEW YORK, CA 10018	NONE	CHARITABLE ORGANIZAT	GOOD+ FOUNDATION PARTNERS WITH A NATIONAL NETWORK OF LEADING PROGRAMS TO BREAK THE CYCLE OF FAMILY POVERTY THROUGH THE POWER OF DONATED GOODS AND SERVICES	500
			,	

97,477

GOOD & FOUNDATION 306 W 37TH STREET 8TH FLOOR NEW YORK, CA 10018	NONE	CHARITABLE ORGANIZAT	GOOD+ FOUNDATION PARTNERS WITH A NATIONAL NETWORK OF LEADING PROGRAMS TO BREAK THE CYCLE OF FAMILY POVERTY THROUGH THE POWER OF	
			THROUGH THE POWER OF	
			DONATED GOODS AND	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	any foundation manager or substantial contributor	recipient		1		
a Paid during the year		· ·				
HARPER FOR KIDS 2920 BUCHANAN ST STE 9 SAN FRANCISCO, CA 94123	NONE	CHARITABLE ORGANIZAT	TO TEACH CHILDREN IMPORTANT LIFE SKILLS THAT WILL EMPOWER THEM TO ACHIEVE THEIR PERSONAL BEST IN LIFE	300		
THE WILD FOUNDATION 717 POPLAR AVENUE BOULDER, CO 80304	NONE	NON-PROFIT 501(C)(3)	PROTECTS WILDERNESS WHILE MEETING THE NEEDS OF HUMAN COMMUNITIES, WORKING ACROSS CULTURES AND BOUNDARIES BY COLLABORATING WITH LOCAL PEOPLES, ORGANIZATIONS, THE PRIVATE SECTOR, AND GOVERNMENTS TO CREATE DYNAMIC PRACTICAL PROJECTS, INSPIRING SOLUTIONS AND COMMUNICATIONS INITIATIVES	25,000		
NYC DEPARTMENT OF PARKS & RECREATION 830 FIFTH AVENUE NEW YORK, NY 10065	NONE	PARK	NEW YORK CITY'S PRINCIPAL PROVIDERS OF RECREATIONAL AND ATHLETIC FACILITIES AND PROGRAMS HOME TO FREE CONCERTS, WORLD-CLASS SPORTS EVENTS, AND CULTURAL FESTIVALS	2,500		
Total	97,477					

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

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

CITY OF BEVERLY HILLS FOUNDATION 455 N REXFORD DR BEVERLY HILLS, CA 90210	NONE	NON-PROFIT 501(C)(3)	DEDICATED TO EXPANDING PHILANTHROPIC OPPORTUNITIES IN THE BEVERLY HILLS COMMUNITY	250	
AMERICAN CAMP ASSOCIATION 5000 STATE ROAD 67 NORTH MARTINSVILLW, IN 461517902	NONE	NON-PROFIT 501(C)(3)	A COMMUNITY OF CAMP PROFESSIONALS WHO JOINED TOGETHER TO SHARE THEIR KNOWLEDGE AND EXPERIENCE	250	

5000 STATE ROAD 67 NORTH MARTINSVILLW, IN 461517902	50	PROFESSIONALS WHO JOINED TOGETHER TO SHARE THEIR KNOWLEDGE AND EXPERIENCE AND TO ENSURE THE QUALITY OF CAMP PROGRAMS	

MARTINSVILLW, IN 401517902		KNOWLEDGE AND EXPERIENCE AND TO ENSURE THE QUALITY	
		OF CAMP PROGRAMS	

A	KNOWLEDGE AND EXPERIENCE AND TO ENSURE THE QUALITY OF CAMP PROGRAMS	
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97,477

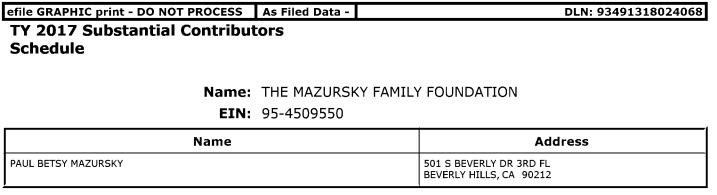
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efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491318024068		
TY 2017 Other Expenses Schedule						
Name: THE MAZURSKY FAMILY FOUNDATION EIN: 95-4509550						
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

150

Other Expenses Schedule					
Description	Rev				

OFFICE EXPENSE



efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DL	N: 93491318024068			
TY 2017 Taxes Schedule							
Nam	Name: THE MAZURSKY FAMILY FOUNDATION						
<b>EIN:</b> 95-4509550							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
FRANCHISE TAX BOARD	10	0		0			
LICENSE, PERMIT	20	0		0			

efile GRAPHIC print - [	OO NOT PROCESS	As Filed Data -				DLN: 93491318024068			
Schedule B		Schedu	le of Contributo	rs		OMB No 1545-0047			
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information a	about Schedule B (F	► Attach to Form 990, 990-EZ, or 990-PF bout Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>			2017			
Name of the organizat THE MAZURSKY FAMILY I					Employer id	dentification number			
Organization type (che	ack one)				95-4509550				
Organization type (one	our one)								
Filers of:	Section:								
Form 990 or 990-EZ	☐ 501(c)(	☐ 501(c)( ) (enter number) organization							
	☐ 4947(a)(	1) nonexempt char	rtable trust <b>not</b> treated a	s a private founda	tion				
	☐ 527 politi	cal organization							
Form 990-PF	<b>✓</b> 501(c)(3)	exempt private fo	undation						
	☐ 4947(a)(	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	☐ 501(c)(3)	☐ 501(c)(3) taxable private foundation							
			PF that received, during to omplete Parts I and II S						
Special Rules									
under sections 5 received from ai	509(a)(1) and 170(b)	(1)(A)(vi), that che luring the year, tota	g Form 990 or 990-EZ th cked Schedule A (Form al contributions of the gre plete Parts I and II	990 or 990-EZ), P	art II, line 13,	, 16a, or 16b, and that			
during the year,	total contributions o	f more than \$1,000	or (10) filing Form 990 o exclusively for religious animals Complete Parts	, charitable, scien					
during the year, If this box is che purpose Don't o	contributions exclusecked, enter here the complete any of the p	eively for religious, total contributions parts unless the <b>G</b> o	or (10) filing Form 990 of charitable, etc., purposes that were received during eneral Rule applies to the or more during the year	s, but no such con ng the year for an ns organization be	ntributions tota exclusively re ecause it recei	aled more than \$1,000 eligious, charitable, etc , ived <i>nonexclusively</i>			
990-EZ, or 990-PF), but	t it <b>must</b> answer "No	on Part IV, line 2	le and/or the Special Ru , of its Form 990, or chec t it doesn't meet the filing	ck the box on line	H of its				
For Paperwork Reduction a for Form 990, 990-EZ, or 99		ructions	Cat No 30613X	Schedu	ıle B (Form 990	0, 990-EZ, or 990-PF) (2017)			

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)