DLN: 93491134040199

2010

OMB No 1545-0052

Form 990-PF **Return of Private Foundation**

		f the Treasury nue Service or Section 4947(a)(1) Tr					2010
		► Do not enter social security nui ► Go to <u>www.irs.qov/Form990PF</u>					Open to Public Inspection
or	cale	ndar year 2018, or tax year beginning 01-01-20)18 , ar	ıd er	nding 12-31-	2018	
		Indation CAROL TAGER FAMILY FOUNDATION			A Employer Id 27-4268264	entification numb	er
		street (or P O box number if mail is not delivered to street address)	Room/suite		B Telephone nu	mber (see instruction	nns)
46	503 DA	NVERS LANE			(916) 791-5815	·	5113)
		, state or province, country, and ZIP or foreign postal code					
GRA	NITE BA	NY, CA 957466630			C If exemption	application is pendi	ng, check here
i Ch	neck al	l that apply 🔲 Initial return 🔲 Initial return of a	former public charity		D 1. Foreign or	ganızatıons, check h	nere . \square
		☐ Final return ☐ Amended return				ganizations meeting	
		\square Address change \square Name change				k here and attach co	· —
I Ch	neck ty	pe of organization \checkmark Section 501(c)(3) exempt private				ındatıon status was n 507(b)(1)(A), che	
	Section		e private foundation		-		
of '	year (f	xet value of all assets at end rom Part II, col (c), ▶\$ 3,246,639 J Accounting method □ Other (specify) _ (Part I, column (d) must	De on cash basis)	al		ation is in a 60-mon n 507(b)(1)(B), che	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	201,820				
	2	Check ▶ ☐ If the foundation is not required to attach					
	-	Sch B					
	3	Interest on savings and temporary cash investments					
	4 _	Dividends and interest from securities	49,825		49,825		_
	5a	Gross rents					
e	b 6a	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10	95,372				
3							
Reverne	р 7	Gross sales price for all assets on line 6a 95,372 Capital gain net income (from Part IV, line 2)			95,372		+
~	8	Net short-term capital gain			33,372		
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	347,017		145,197		
	13	Compensation of officers, directors, trustees, etc	0		0		0
	14	Other employee salaries and wages					
ses	15	Pension plans, employee benefits					
Expenses	16a	•	26-1 1.000		0		0
X	b	Accounting fees (attach schedule)	1,800				-
	_ c	Other professional fees (attach schedule)					
2	17 18	Interest	1,697		0		0
₹	19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	1,057				
Ē	20	Occupancy					
and Administrative	21	Travel, conferences, and meetings					
	22	Printing and publications					
	23	Other expenses (attach schedule)	% 85		0		0
Operating	24	Total operating and administrative expenses.					
<u>=</u>		Add lines 13 through 23	3,582		0		0
)	25	Contributions, gifts, grants paid	192,400				192,400
	26	Total expenses and disbursements. Add lines 24 and 25	195,982		0		192,400
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements	151,035				
	<u>.</u>	Net investment income (if negative enter -0-)	131,033				

Adjusted net income (If negative, enter -0-) . . .

2,464,081

2,473,043

2,473,043

2,473,043

2.473.043

2.609,278

2,624,078

2,624,078

2,624,078 2,624,078

2

3

4

5

6

2,473,043

2,624,078

2.624.078 Form **990-PF** (2018)

0

151,035

3.231,839

3,246,639

Other notes and loans receivable (attach schedule)

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

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

Total liabilities(add lines 17 through 22)

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶ _

Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule)

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

Foundations that follow SFAS 117, check here ▶

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

Foundations that do not follow SFAS 117, check here ▶

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

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

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

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

Analysis of Changes in Net Assets or Fund Balances

Less allowance for doubtful accounts ▶

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -_

Unrestricted . . .

Permanently restricted

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) .

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

Temporarily restricted

Grants payable

	5
	6
	7
y,	8
Assets	9
As	10a
	Ь
	С

11

12

13

14

15

16

17

18

19

20

21 22

23

24

25

28 29

31

Part III

2

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

Page **3**

• •	pe the kınd(s) of property sold (e g , arehouse, or common stock, 200 shs	•	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a CAPITAL GAINS DIVIDEN	NDS		Р		
b					
c					
d					
e					
(-)	(f)		(g)	(h)
(e) Gross sales price	Depreciation allowed		other basis		r (loss)
<u> </u>	(or allowable)	plus exp	ense of sale	(e) plus (f) minus (g)
	95,372				95,372
b					
<u>c</u>					
d					
e					
Complete only for assets	s showing gain in column (h) and ow				I)
(i) F M V as of 12/31/69	(j) Adjusted basis	Excess	(k) of col (i)	col (k), but not	h) gain minus less than -0-) or om col (h))
	as of 12/31/69	over coi	(j), if any	Losses (III	
a					95,372
b					
d					
e		Tf Plan authorium D			
2 Capital gain net income	e or (net capital loss)	If gain, also enter in P If (loss), enter -0- in F		2	95,372
· ·	gain or (loss) as defined in sections ant I, line 8, column (c) (see instructi	ons) If (loss), enter -0)- }	3	
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment In	come	
•	private foundations subject to the sec				
ror optional use by domestic p	onvate roundations subject to the sec	ction 4340(a) tax on he	et investment incon	ie)	
f section 4940(d)(2) applies, le	eave this part blank				
	ne section 4942 tax on the distributa ot qualify under section 4940(e) Do		·	? \ \ \ \ \ \ \ \	es 🗹 No
	nount in each column for each year,			s	
(a)	(b)	(c)	<u> </u>	(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitab	le-use assets	Distribution rati (col (b) divided by c	
2017	170,914		3,232,599	(cor (b) divided by c	0 052872
2016	169,096		2,771,745		0 061007
2015	109,000		2,526,924		0 043135
2014	66,450		2,016,906		0 032947
2013	65,281		1,414,187		0 046162
2 Total of line 1, column (d)		2		0 236123
,	o for the 5-year base period—divide	the total on line 2 by 5	0, or by the		
number of years the four	ndation has been in existence if less	than 5 years	3		0 047225
	oncharitable-use assets for 2018 fron	•	4		3,506,379
5 Multiply line 4 by line 3			5		165,589
	ent income (1% of Part I, line 27b)		6		1,452
					167,041
	ions from Part XII, line 4 ,				192,400
If line 8 is equal to or gre instructions	eater than line 7, check the box in Pa	art VI, line 1b, and com	nplete that part usir	ng a 1% tax rate Se	e the Part VI

orm	990-PF (2018)						F	Page 6
Pai	rt VIII-B Statements Regard	ling	Activities for Which	Form 4720 May Be	Required (continued)			
ā	During the year did the foundation p	ay o	r incur any amount to				Yes	No
	(1) Carry on propaganda, or otherw	ııse a	ttempt to influence legisla	ation (section 4945(e))?	☐ Yes ✓	No		
	(2) Influence the outcome of any sp	ecıfı	public election (see sect	ion 4955), or to carry	∟ res 🖭	NO		
	on, directly or indirectly, any vo	on, directly or indirectly, any voter registration drive?						
	(3) Provide a grant to an individual	for t	ravel, study, or other simi	ılar purposes?	☐ Yes ☑	No No		
	(4) Provide a grant to an organization	on ot	her than a charitable, etc	, organization described		10		
	ın section 4945(d)(4)(A)? See ir	nstru	tions		· · □ Yes 🗸	No		
	(5) Provide for any purpose other th	nan r	eligious, charitable, scien	tific, literary, or	1c3	"		
	educational purposes, or for the	prev	ention of cruelty to childr	en or animals?	· · □ Yes 🗸	No		
b	If any answer is "Yes" to $5a(1)-(5)$,		=		ceptions described in			
	Regulations section 53 4945 or in a	curre	ent notice regarding disas	ter assistance? See instr	uctions	5b		No
	Organizations relying on a current n				▶ □			
С	If the answer is "Yes" to question 5a			•				
	tax because it maintained expenditu				· · Yes	No		
	If "Yes," attach the statement requi		-					
Ба	Did the foundation, during the year,		•	indirectly, to pay premiu	ıms on			
	a personal benefit contract?				¹ Yes ✓	No		
b	Did the foundation, during the year,	pay	premiums, directly or ind	irectly, on a personal be	nefit contract?	6b	-	No
_	If "Yes" to 6b, file Form 8870							
7a	At any time during the tax year, was				∟ Yes 🛂			
, D	If yes, did the foundation receive an		•			7b	-	-
•	Is the foundation subject to the sect		. , , ,					
	excess parachute payment during th				Yes ▼			<u> </u>
Pai	t VIII Information About C	Offic	ers, Directors, Trust	ees, Foundation Ma	inagers, Highly Paid Em	ployees	,	
1	List all officers, directors, trustee							
	(a) Name and address	١ '	b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and	(e) Expe		
			devoted to position	-0-)	deferred compensation	other a	illowan	
ee /	Additional Data Table							
	Commence of the bight of the						NIONE	,,
	Compensation of five highest-pai	ıa en	nployees (other than tr	tose included on line 1		ie, enter	NONE	-
a)	Name and address of each employee	paid	(b) Title, and average	(-) ((d) Contributions to employee benefit	(e) Exper	se acco	ount,
	more than \$50,000		hours per week devoted to position	(c) Compensation	plans and deferred	other al	lowanc	es
					compensation			
ONI	<u> </u>							
					+			
ot?	l number of other employees paid over	or ¢E	L		.			
υtd	i number of other employees paid ove	⊏ı ⊅⊃	0,000	<u> </u>				(2010)

Form 990-PF (2018)		Page 7
Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	<u> </u>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Include relevorganizations and other beneficiaries served, conferences convened, research papers produc		of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see in	nstructions)	_
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2	Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3	· · · · · · · · · · · · · · · · · · ·	• 0
		Form 990-PF (2018)

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

Amounts set aside for specific charitable projects that satisfy the

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

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

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

3

4

5

2

3a 3h

4

5

192,400

190.948

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1.452

173,867

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0

Page 9

Form 990-PF (2018) Part XIII Undistributed Income (see instructions)

Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only.

(a)

Corpus

14.391

14,391

14,391

14.391

(b)

Years prior to 2017

(c)

2017

4.142

4,142

b Total for prior years Excess distributions carryover, if any, to 2018

a From 2013. **b** From 2014. c From 2015. . . d From 2016. e From 2017.

f Total of lines 3a through e.

4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions).

c Treated as distributions out of corpus (Election

5 Excess distributions carryover applied to 2018

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

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

6 Enter the net total of each column as

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

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . . **b** Excess from 2015. . c Excess from 2016. . . . d Excess from 2017. . . e Excess from 2018. . .

Subtract lines 7 and 8 from line 6a

indicated below:

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

same amount must be shown in column (a))



inter gross	s amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Progran	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
2 Member 3 Interes	and contracts from government agencies ership dues and assessments st on savings and temporary cash					
4 Divider	nents nds and interest from securities. ntal income or (loss) from real estate			14	49,825	
	-financed property					
b Not d	lebt-financed property					
	ntal income or (loss) from personal property					
	nvestment income					
invento	` '			14	95,372	
9 Net inc	come or (loss) from special events			14	33,372	
.0 Gross	profit or (loss) from sales of inventory					
	revenue a					
	al Add columns (b), (d), and (e).		0		145,197	(
	Add line 12, columns (b), (d), and (e)			13	l	
(See w Part XV	orksheet in line 13 instructions to verify calcu					
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's expression of the second s	income is reporte	ed in column (e) of	Part XVI-A contribu		
	instructions)					

orm 9	90-PF	(20	18)											Pa	ge 13
Part	XVI	•	Information Re Exempt Organiz		ransi	fers To a	and Transact	ion	s and	Relation	nships With No	nchari	table		
			nization directly or inc an section 501(c)(3)									tion 501		Yes	No
a Tra	nsfers	s fro	m the reporting found	dation to a n	ioncha	ırıtable exe	empt organızatı	on c	of						
(1)	Cas	sh.											1a(1)		No
(2)	Oth	er a	ssets										1a(2)		No
b Oth	er tra	ansa	ctions												
(1)	Sale	es of	assets to a noncharr	table exemp	t orga	nization.							1b(1)		No
			es of assets from a n										1b(2)		No
			of facilities, equipmen	•				•					1b(3)		No
			rsement arrangement									•	1b(4)		No
٠,			r loan guarantees.										1b(5)		No
٠, ,			ance of services or me	·		_						•	1b(6)		No
	_		cilities, equipment, m r to any of the above			-							1c		No
in a (a) Line			action or sharing arrai b) Amount involved			_	 the value of tempt organization 	:he q			s, or services rece transfers, transaction		rına arra	naemen	its
(-,	- 1		2,7	(c) Hame of	110110110	arreadic che.	pc organization		(2) 500	opc.o	transfers) transaction	o, and one	ing arra	-igee.	
des	cribed	d ın	ation directly or indire section 501(c) (other aplete the following so	than section		•	•					Yes 🖸	Z No		
			(a) Name of organizatio			(E) Type of organiz	atıor	1		(c) Description	on of relation	onship		
			<u> </u>												
	of	my l	penalties of perjury, I knowledge and belief, preparer has any kno	, it is true, co											
Sign	1.	**:	****				2019-05-02		. *	****			he IRS di	scuss th	115
Here							2017 03 02		<u> </u>			return with t	ı he prepai	rer shov	vn
	🗸	Sin	nature of officer or tr	rustee			Date		7 7	ītle		below		-	_
												(see II	nstr)? 🖢	✓ Yes	⊐ No
			Print/Type preparer's	name	Prepa	arer's Sign	nature		Date			PTIN			

Paid

Firm's address ▶ 83 SCRIPPS DRIVE STE 210

SACRAMENTO, CA 95825

Check if self-P00543258 employed ▶ □ KENNETH L ASTLE **Preparer** Firm's name ▶ BFBA LLP Firm's EIN ▶68-0000424 **Use Only**

Phone no (916) 924-0800

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, (e) other allowances hours per week not paid, enter Contributions to (b) devoted to position -0-) employee benefit plans and deferred compensation MELINDA NAYE PRESIDENT 2 50 170 RIO CAMINO AUBURN, CA 95603 JENNIFER I WEST VICE PRESIDENT 0.50 4270 VAL VERDE ROAD LOOMIS, CA 95650 LEON H TAGER CFO 2 50 4603 DANVERS LANE GRANITE BAY, CA 95746 ANDREA L DAVIS SECRETARY ٥ 0.50 1404 OAK GROVE DRIVE ROSEVILLE, CA 95747 CAROL R TAGER DIRECTOR

0 50

4603 DANVERS LANE GRANITE BAY, CA 95746 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).

CAROL R TAGER

LEON H TAGER

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 ALS ASSOCIATION PC SUPPORT OF PUBLIC CHARITY 100 1275 K STREET NW SUITE 250 PROGRAM WASHINGTON, DC 20005

ALZHEIMER'S ASSOCIATION NORTHERN CALIFORNIA 1455 RESPONSE RD 190 SACRAMENTO, CA 95815	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	700
ALZHEIMER'S FOUNDATION OF AMERICA	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	500

SACRAMENTO, CA 95815			
ALZHEIMER'S FOUNDATION OF AMERICA 322 EIGHTH AVENUE 7TH FLOOR NEW YORK, NY 10001	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	50

Total .

▶ 3a

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

AMERICAN FOUNDATION FOR SUICIDE PREVENTION 120 WALL STREET 29TH FLOOR NEW YORK, NY 10005	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	200
AMERICAN HEART ASSOCIATION	PC	SUPPORT OF PUBLIC CHARITY	1 000

NEW YORK, NY 10005			
AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVE DALLAS, TX 75231	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,000
AMERICAN JEWISH WORLD SERVICE 45 WEST 36TH STREET	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,500

DALLAS, TX 75231		PROGRAM	
AMERICAN JEWISH WORLD SERVICE 45 WEST 36TH STREET NEW YORK, NY 10018	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,500

Total .

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

a raid daring the year			
AMERICAN KIDNEY FUND 11921 ROCKVILLE PIKE SUITE 300 ROCKVILLE, MD 20852	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,000
AMERICAN RED CROSS-SACRAMENTO	PC	SUPPORT OF PUBLIC CHARITY	3,000

AMERICAN RED CROSS-SACRAMENTO 1565 EXPOSITION BLVD SACRAMENTO, CA 95815	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	3,000
AMERICARES88 HAMILTON AVENUE	PC	SUPPORT OF PUBLIC CHARITY	2,000

SACRAMENTO, CA 95815			
AMERICARES88 HAMILTON AVENUE STAMFORD, CT 06902	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2,000

192,400

AMERICARES88 HAMILTON AVENUE	PC	SUPPORT OF PUBLIC CHARITY	2,00
STAMFORD, CT 06902		PROGRAM	·

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			
ARTHRITIS NATIONAL RESEARCH FOUNDATION 5354 E 2ND ST 201 LONG BEACH, CA 90803	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2,500

LONG BEACH, CA 90803			
BIRTHRIGHT LSRAELPO BOX 5892 HICKSVILLE, NY 11802	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,000
BOYS & GIRLS CLUB OF PLACER COUNTY 679 LINCOLN WAY	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	500

192,400

BIRTHRIGHT LSRAELPO BOX 5892 HICKSVILLE, NY 11802	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,00
BOYS & GIRLS CLUB OF PLACER COUNTY 679 LINCOLN WAY AUBURN, CA 95603	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	50

Recipient If recipient is an individual, Purpose of grant or Foundation 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

CALTECORITA EMERCENCY FOOD LINK

5800 FOODLINK ST SACRAMENTO, CA 95828		PROGRAM	3,000
CALMATTERS1007 7TH ST SUITE 200	PC	SUPPORT OF PUBLIC CHARITY	200

 D

SLIDDODT OF DUBLIC CHADITY

3 000

CALMATTERS1007 7TH ST SUITE 200 SACRAMENTO, CA 95814	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	200
CHARITY NAVIGATOR 139 HARRISTOWN RD SUITE 101 GLEN ROCK, NJ 07452	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,000

CHARITY NAVIGATOR 139 HARRISTOWN RD SUITE 101 GLEN ROCK, NJ 07452	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,000
Total		▶ 3a	192 400

Recipient If recipient is an individual, show any relationship to status of recontribution Paid During the Year or Approved for Future Payment

| Purpose of grant or show any relationship to status of contribution | Purpose of grant or contribution | Purpose of

recipient

PROGRAM

192,400

any foundation manager

or substantial contributor

Name and address (home or business)

PO BOX 160022

Total .

SACRAMENTO, CA 95816

a Paid during the year			
CHICKS IN CRISIS 9455 E STOCKTON BLVD ELK GROVE, CA 95624	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	500
CHILD ADVOCATES OF PLACER COUNTY 3715 ATHERTON RD 1 ROCKLIN, CA 95765	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	3,000
COMMUNITY AGAINST SEXUAL HARM	PC	SUPPORT OF PUBLIC CHARITY	1,000

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year COMPASSION & CHOICES PC SUPPORT OF PUBLIC CHARITY 500 4155 E JEWELL AVE - SUITE 200 PROGRAM DENVER, CO 80222

CONCERNS OF POLICE SURVIVORS - NORTHERN CALIFORNIA PO BOX 2342 VACAVILLE, CA 95696	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	500
CURE ALZHEIMER'S FUND	PC	SUPPORT OF PUBLIC CHARITY	2,500

	VACAVILLE, CA 95696			
П	CURE ALZHEIMER'S FUND 34 WASHINGTON ST SUITE 310 WELLESLEY HILLS, MA 02481	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2,500

Total . .

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Purpose of grant or contribution

a Paid during the year

8741 AUBURN FOLSOM ROAD GRANITE BAY, CA 95746	PC	PROGRAM	300
DIRECT RELIEF27 S LA PATERA LANE	PC	SUPPORT OF PUBLIC CHARITY	4,000

00

200

192,400

▶ 3a

DIRECT RELIEF27 S LA PATERA LANE SANTA BARBARA, CA 93117	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	4,000
DONUT DASH 7880 ALTA VALLEY DRIVE SUITE 101 SACRAMENTO, CA 95823	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	400

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

	or substantial continuator			
a Paid during the year				
ELK GROVE FOOD BANK 9820 DINO DR 140 ELK GROVE, CA 95624		PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,000

CING HISTORY AND OURSELVES HURD ROAD ROOKLINE, MA 02445	PC	SUPPORT OF PUBLIC CHARITY PROGRAM
ED THE HUNGRY	PC	SUPPORT OF PUBLIC CHARITY

or substantial contributor

Name and address (home or business)

Total .

16 HURD ROAD BROOKLINE, MA 02445	PC	PROGRAM	1,000
FEED THE HUNGRY 530 E IRELAND ROAD	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	6,000

16 HURD ROAD BROOKLINE, MA 02445		PROGRAM	_,,,,,
FEED THE HUNGRY 530 E IRELAND ROAD SOUTH BEND, IN 46614	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	6,000

Recipient If recipient is an individual, show any relationship to status of status of

recipient

192,400

any foundation manager

or substantial contributor

Name and address (home or business)

ROCKVILLE, MD 20852

a Paid during the year			
FEEDING AMERICA 35 EAST WACKER DRIVE SUITE 2000 CHICAGO, IL 60601	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2,000
FIRST CANDLE 49 LOCUST AVENUE SUITE 104 NEW CANAAN, CT 06840	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	300
FISHER HOUSE FOUNDATION 12300 TWINBROOK PKWY SUITE 410	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	3,000

Recipient

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Status of recipient or status of recipient or substantial contributor

a Paid during the year

Total . .

FURNITURE FOR FAMILIESPO BOX 34 FOLSOM, CA 95763	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,000
GARY SINISE FOUNDATIONPO BOX 368	PC	SUPPORT OF PUBLIC CHARITY	2,000

WOODLAND HILLS, CA 91365		PROGRAM	
GATHERING INN201 BERKELEY AV ROSEVILLE, CA 95678	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2,000

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

Total .

,			
GIVE KIDS THE WORLD210 S BASS RD KISSIMMEE, FL 34746	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	200
HEALTH NETWORK FOUNDATION	PC	SUPPORT OF PUBLIC CHARITY	500

HEALTH NETWORK FOUNDATION 33 RIVER STREET CHAGRIN FALLS, OH 44022	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	500
HILLEL AT DAVIS AND SACRAMENTO 328 A ST	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,000

CHAGRIN FALLS, OH 44022			
HILLEL AT DAVIS AND SACRAMENTO 328 A ST DAVIS, CA 95616	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,000

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

recipient

192,400

a Paid during the year			
HOMES FOR OUR TROOPS 6 MAIN STREET TAUNTON. MA 02780	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	500

NTERNATIONAL EYE FOUNDATION L0801 CONNECTICUT AVE (ENSINGTON, MD 20895	PC	SUPPORT OF PUBLIC CHARITY PROGRAM

or substantial contributor

Name and address (home or business)

INTERNATIONAL EYE FOUNDATION 10801 CONNECTICUT AVE KENSINGTON, MD 20895	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	
INTERNATIONAL RELIEF TEAMS	PC	SUPPORT OF PUBLIC CHARITY	2,

INTERNATIONAL EYE FOUNDATION 10801 CONNECTICUT AVE KENSINGTON, MD 20895	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	500
INTERNATIONAL RELIEF TEAMS 4560 ALVARADO CANYON RD SUITE 1H SAN DIEGO CA 92120	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2,000

KENSINGTON, MD 20895		TROGRAM	
INTERNATIONAL RELIEF TEAMS 4560 ALVARADO CANYON RD SUITE 1H SAN DIEGO, CA 92120	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2,000

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			
JONSSON CANCER CENTER 8-684 FACTOR BUILDING BOX 951781 LOS ANGELES, CA 90095	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2,000
MOTHONIA FAMILY CERVICES	DC.	CURRORT OF BURLIC CHARTEY	100

KOINONIA FAMILY SERVICES 3054 FITE CIRCLE SUITE 101 SACRAMENTO, CA 95827	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	400
KVIEZOZO EL CAMINO AVENUE	DC.	CURRORT OF BURLIC CHARITY	200

SACRAMENTO, CA 95827		PROGRAM	
KVIE2030 EL CAMINO AVENUE SACRAMENTO, CA 95833	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	200

192,400

ortora in iziti o j ort o o o z i			
KVIE2030 EL CAMINO AVENUE SACRAMENTO, CA 95833	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2

KVIE2030 EL CAMINO AVENUE SACRAMENTO, CA 95833	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	

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

or substantial contributor

Name and address (home or business)

Total .

recipient

a Paid during the year			
MAZON-JEW RESPONSE -HUNGER 10495 SANTA MONICA BLVD STE 100 LOS ANGELES, CA 90025		SUPPORT OF PUBLIC CHARITY PROGRAM	2,000
NATIONAL IMMIGRATION LAW CENTER 3450 WILSHIRE BLVD 108-62	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	800

NATIONAL IMMIGRATION LAW CENTER 3450 WILSHIRE BLVD 108-62 LOS ANGELES, CA 90010	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	800
NEADS WORLD CLASS SERVICE DOGS PO BOX 1100	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,000

3450 WILSHIRE BLVD 108-62 LOS ANGELES, CA 90010		PROGRAM	
NEADS WORLD CLASS SERVICE DOGS PO BOX 1100 PRINCETON, MA 01541	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,000

NEADS WORLD CLASS SERVICE DOGS PO BOX 1100 PRINCETON, MA 01541	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,000

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

PLACER SPCA

150 CORPORATION YARD RD

	ROSEVILLE, CA 95678			
П	PLANNED PARENTHOOD NORTHERN CALIFORNIA AND NEVADA 2185 PACHECO STREET	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2,000

PC

SUPPORT OF PUBLIC CHARITY

PROGRAM

500

2185 PACHECO STREET CONCORD, CA 94520		PROGRAM	
PRADER-WILLI CALIFORNIA FOUNDATION 1855 FIRST AVENUE SUITE 201 SAN DIEGO. CA 92101	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	200

•			
PRADER-WILLI CALIFORNIA FOUNDATION 1855 FIRST AVENUE SUITE 201 SAN DIEGO, CA 92101	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	200
Total	 	▶ 3a	192,400

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

recipient

500

192,400

any foundation manager

Name and address (home or business)

SACRAMENTO, CA 95817

Hame and address (nome or business)	or substantial contributor			
a Paid during the year				
PROSTATE CANCER FOUNDATION 1250 FOURTH STREET SANTA MONICA, CA 90401		PC	SUPPORT OF PUBLIC CHARITY PROGRAM	500
PUPPIES BEHIND BARS 263 WEST 38TH STREET 4TH FLOOR NEW YORK, NY 10018		PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,000
		1	1	

· ·			
PUPPIES BEHIND BARS 263 WEST 38TH STREET 4TH FLOOR NEW YORK, NY 10018	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,
RONALD MCDONALD HOUSE 2555 49TH ST	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	

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 SACRAMENTO CASA PC SUPPORT OF PUBLIC CHARITY 1.000 301 BICENTENNIAL CIR PROGRAM

SACRAMENTO, CA 95826			
SACRAMENTO FOOD BANK & FAMILY SERVICES 3333 3RD AVE SACRAMENTO, CA 95817	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2,000
SACRAMENTO JEWISH FEDERATION - CAMPAIGN DRIVE	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	25,000

Total	 	▶ 3a	192,400
SACRAMENTO JEWISH FEDERATION - CAMPAIGN DRIVE 2014 CAPITOL AVE - 109 SACRAMENTO. CA 95834	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	25,000
SACRAMENTO, CA 95817			

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 SACRAMENTO JEWISH FEDERATION -PC SUPPORT OF PUBLIC CHARITY 60,000 FAM SERVE PROGRAM 2014 CAPITOL AVE - 109

SACRAMENTO, CA 95834			
SACRAMENTO LOAVES & FISHES 1351 NORTH C ST SACRAMENTO, CA 95811	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	4,300
SALK INSTITUTE FOR BIOLOGICAL STUDIES 10010 N TORREY PINES RD	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,000

SACKAMENTO, CA 93811			
SALK INSTITUTE FOR BIOLOGICAL STUDIES 10010 N TORREY PINES RD LA JOLLA, CA 92037	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,000
Total		▶ 3a	192,400

Recipient If recipient is an individual, show any relationship to status of recontribution Paid During the Year or Approved for Future Payment

Recipient If recipient is an individual, show any relationship to status of contribution

Purpose of grant or contribution

recipient

192,400

any foundation manager

or substantial contributor

Name and address (home or business)

SACRAMENTO, CA 95817

	or substantial contributor			
a Paid during the year				
SCHOLARSHIP AMERICA ONE SCHOLARSHIP WAY SAINT PETER, MN 56082		PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2,000
SHARED HOPEPO BOX 65337 VANCOUVER, WA 98665		PC	SUPPORT OF PUBLIC CHARITY PROGRAM	400
SHRINERS HOSPITALS FOR CHILDREN - NORTHERN CALIFORNIA 2425 STOCKTON BLVD		PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2,200

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

or substantial contributor

Name and address (home or business)

a Paid during the year			
SIERRA FOREVER FAMILIES 8928 VOLUNTEER LN SACRAMENTO, CA 95826	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,000
ST JUDE CHILDREN'S RESEARCH	PC	SUPPORT OF PUBLIC CHARITY	1,000

recipient

SACRAMENTO, CA 95826			
ST JUDE CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,

ST JUDE CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	1,0

HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105		PROGRAM	
TEMPLE OR RISHON7755 HAZEL AVE	PC	SUPPORT OF PUBLIC CHARITY	10.000

262 DANNY THOMAS PLACE MEMPHIS, TN 38105			
TEMPLE OR RISHON7755 HAZEL AVE	PC	SUPPORT OF PUBLIC CHARITY	10,000

MEMPH15, IN 30105			
TEMPLE OR RISHON7755 HAZEL AVE ORANGEVALE, CA 95662	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	10,0

TEMPLE OR RISHON7755 HAZEL AVE ORANGEVALE, CA 95662	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	10,00

ORANGEVALE, CA 95662		PROGRAM	
Total	 	▶ 3a	192,400

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			
TEXAS CIVIL RIGHTS PROJECT 1405 MONTOPOLIS DRIVE AUSTIN, TX 78741	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	3,500
LINITED WAY - CAPITOL REGION	PC	SUPPORT OF PUBLIC CHARITY	5 000

AUSTIN, TX 78741		PROGRAM	
UNITED WAY - CAPITOL REGION 10389 OLD PLACERVILLE RD SACRAMENTO, CA 95827	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	5,000
V FOUNDATION FOR CANCER RESEARCH 14600 WESTON PARKWAY	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2,000

SACRAMENTO, CA 95827			
V FOUNDATION FOR CANCER RESEARCH 14600 WESTON PARKWAY CARY, NC 27513	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2,000

V FOUNDATION FOR CANCER RESEARCH 14600 WESTON PARKWAY CARY, NC 27513	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2,000
Total	 	▶ 3a	192,400

Recipient If recipient is an individual, show any relationship to any foundation manager Name and address (home or business)

Recipient If recipient is an individual, show any relationship to any foundation manager recipient If recipient is an individual, show any relationship to any foundation manager recipient If recipient If

or substantial contributor

Total .

a Paid during the year			
VOLUNTEERS OF AMERICA - SENIOR SAFE HOUSE 3434 MARCONI AVENUE	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	5,000

SACRAMENTO, CA 93621			
WEAVE1900 K ST 200 SACRAMENTO, CA 95811	PC	SUPPORT OF PUBLIC CHARITY PROGRAM	2,000

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491134040199							
TY 2018 Accounting Fe	es Sche	edule					
Name: LEE AND CAROL TAGER FAMILY FOUNDATION EIN: 27-4268264							
Category Amount Net Investment Income Income For Charitable Purposes							
ВГВА		1,800		0		0	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491134040199
TY 2018 Investments - Other S	Schedule	
Name: l	EE AND CAROL T	AGER FAMILY FOUNDATION

AT COST

3,231,839

2,609,278

	EIN: 27-42682	264		
1	Investments Other Schedule 2			
	Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value

VANGUARD MUTUAL FUNDS

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data -		DLN	N: 93491134040199		
TY 2018 Other Expenses Schedule						
E	ne: LEE AND CAROL IN: 27-4268264	L TAGER FAMILY	FOUNDATION			
Other Expenses Schedule Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
CHARITABLE REGISTRATION FEE	50	0		0		
CA SOS FILING FEE	20	0		0		
PENALTIES AND INTEREST	15	0	1	0		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491134040199	
TY 2018 Taxes Schedule					
Name:	LEE AND CA	ROL TAGER FAMIL	Y FOUNDATION		
EIN: 27-4268264					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
FEDERAL TAX - 2018 990-PF ESTIMATES	1,600	0	· · · · · · · · · · · · · · · · · · ·	0	
FEDERAL TAX - 2017 990-PF	87	0		0	
STATE TAX - 2017 199	10	0		0	

efile GRAPHIC print - DC	NOT PROCESS A	As Filed Data -				DLN: 93491134040199
Schedule B		Schedu	le of Contributor	s	-	OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	> 0		Form 990, 990-EZ, or 990-P <u>//Form990</u> for the latest inf			2018
Name of the organization LEE AND CAROL TAGER FAI					Employer id	entification number
Organization type (chec	k one)				27-4268264	
	•					
Filers of:	Section:					
Form 990 or 990-EZ	☐ 501(c)() (e	enter number) org	ganization			
	☐ 4947(a)(1) n	nonexempt charit	able trust not treated as	a private foundat	tion	
	☐ 527 political	organization				
Form 990-PF	✓ 501(c)(3) ex	empt private fou	ndation			
4947(a)(1) nonexempt charitable trust treated as a private foundation						
501(c)(3) taxable private foundation						
			F that received, during the mplete Parts I and II See			
Special Rules						
under sections 50 received from any	9(a)(1) and 170(b)(1)	(A)(vı), that chec ng the year, total	Form 990 or 990-EZ that ked Schedule A (Form 99 contributions of the grea lete Parts I and II	90 or 990-EZ), Pa	art II, line 13,	16a, or 16b, and that
during the year, to	tal contributions of m	ore than \$1,000	or (10) filing Form 990 or exclusively for religious, of animals Complete Parts	charitable, scient		
during the year, co If this box is check purpose Don't coi	ontributions exclusive ked, enter here the tot mplete any of the part	ly for religious, cl tal contributions t ts unless the Gei	or (10) filing Form 990 or haritable, etc., purposes, that were received during neral Rule applies to this or more during the year.	but no such con the year for an e organization be	tributions total exclusively rel cause it receiv	led more than \$1,000 igious, charitable, etc , ved <i>nonexclusively</i>
Caution. An organization 990-EZ, or 990-PF), but it Form 990-EZ or on its Foi 990-EZ, or 990-PF)	must answer "No" or	n Part IV, line 2,	of its Form 990, or check	the box on line I	H of its	
For Paperwork Reduction Ac for Form 990, 990-EZ, or 990-		tions	Cat No 30613X	Schedu	le B (Form 990,	990-EZ, or 990-PF) (2018)

Name of organization

Employer identification number

EE AND CAROL TA	GER FAMILY FOUNDATION	27-4268264	
Part I	Contributors (See instructions) Use duplicate copies of Part I if add	ditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LEON AND CAROL TAGER 4603 DANVERS LANE GRANITE BAY, CA 95746	\$ 201,820	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ S. A.	Person Payroll Noncash (Complete Part II for noncash contributions) orm 990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 9	990, 990-EZ, or 990-PF) (2018)		Page 3	
Name of organizati	ion ER FAMILY FOUNDATION	Employer identification number		
		27-42	.68264	
Part II	Noncash Property			
(a) No. from Part I	(See instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
<u> </u>		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
-				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See Instructions)	(d) Date received	
-				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
-				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See Instructions)	(d) Date received	
		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2018)	

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)