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2018

OMB No 1545-0052

Return of Private Foundation

Form 990-PF

Department of the Treasury

Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.
 Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2018, or tax year beginning 08-01-20)18 , ar	nd ending 07-31-	2019				
		undation OVITZ FUND		A Employer id	A Employer identification number				
	IL LLBO	WILZ LOND		23-6270079	23-6270079				
		d street (or P O $$ box number if mail is not delivered to street address) MER STREET 309 $$	Room/suite	B Telephone nu	mber (see instructio	ns)			
City	or town	n, state or province, country, and ZIP or foreign postal code		(203) 219-3667	7				
		TH, NH 03801		C If exemption	application is pendin	g, check here			
G Cł	neck al	Il that apply $igsqcup$ Initial return $igsqcup$ Initial return of a	former public charity	D 1. Foreign or	ganizations, check he	ere 👢 🔲			
		☐ Final return ☐ Amended return			ganizations meeting k here and attach co				
		Address change Name change				· -			
	,	/pe of organization ☑ Section 501(c)(3) exempt private t			undation status was f n 507(b)(1)(A), chec				
			e private foundation	 					
of	year (f	from Part II, col (c),	☑ Cash ☐ Accru		ation is in a 60-mont n 507(b)(1)(B), chec				
line	e 16)	►\$ 6,556,665	be on cash basis)						
Pa	rt I	Analysis of Revenue and Expenses (The total				(d) Disbursements			
		of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b) Net investment income	(c) Adjusted net	for charitable purposes			
		equal the amounts in column (a) (see instructions))	books	income	liicome	(cash basis only)			
	1	Contributions, gifts, grants, etc , received (attach schedule)							
	2	Check ► ✓ If the foundation is not required to attach							
	_	Sch B							
	3 4	Dividends and interest from securities	118,766	118,766					
	5a	Gross rents	===,,,,,	220,100					
	ь	Net rental income or (loss)							
<u>e</u>	6a	Net gain or (loss) from sale of assets not on line 10	432,300						
Revenue	ь	Gross sales price for all assets on line 6a							
Re.	7	Capital gain net income (from Part IV, line 2)		432,300					
	8	Net short-term capital gain		,		 			
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	ь	Less Cost of goods sold							
	C	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11	551,066	·		0			
	13 14	Other employee salaries and wages	0	0		0			
S	15	Pension plans, employee benefits							
15e	16a	Legal fees (attach schedule)							
çbei	ь	Accounting fees (attach schedule)	3,125	1,563		0			
Operating and Administrative Expenses	С	Other professional fees (attach schedule)							
tive	17	Interest							
stra	18	Taxes (attach schedule) (see instructions)	19,410	0		0			
Ē	19	Depreciation (attach schedule) and depletion							
\dn	20	Occupancy							
⊅ pι	21	Travel, conferences, and meetings							
<u>a</u>	22	Printing and publications							
	23	Other expenses (attach schedule)				_			
era	24	Total operating and administrative expenses. Add lines 13 through 23	22,535	1,563		0			
o	25	Contributions, gifts, grants paid	323,124			323,124			
	26	Total expenses and disbursements. Add lines 24 and	,			, = 1			
		25	345,659	1,563		323,124			
	27	Subtract line 26 from line 12							
	a	Excess of revenue over expenses and disbursements	205,407						
	ь	Net investment income (if negative, enter -0-)		549,503					
Ea:	C	Adjusted net income (If negative, enter -0-)		C-1 N 4405-		000 PE (2015)			
. 01	. aper	WOLK REDUCTION ACT MOTICE, SEE INSURCIONS.		Cat No 11289	\ FOI	m 990-PF (2018)			

1,021,418

42,976

2,168,067

3,441,721

3,441,721

3,441,721

3,441,721

966,752

42,976

2,513,462

3,647,128

3,647,128

3,647,128 3,647,128

2

3

4

5

6

3,441,721

3,647,128

3,647,128 Form 990-PF (2018)

205,407

3,055,651

42,976

3,334,100

6,556,665

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)

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

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.

Land, buildings, and equipment basis ▶ _

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe ▶_

Unrestricted . . .

Temporarily restricted

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) ▶ ____

Grants payable

	5
	6
	7
S	8
Assets	9
As	10a
	b
	۔ ا

11

12

13

14

15 16

17

18

19

20 21

22 23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ō

Assets 27

Net 30

2

		e the kınd(s) of property sold (e g , rehouse, 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	DAVIS NEW YORK			Р		2019-01-09
b	DIREXION			Р		2019-01-10
С	CAPITAL GAINS DIVIDEN	DS		Р		
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	h) r (loss)) minus (g)
а	7:	5,000		5,245		69,755
b	3!	5,045		1,509		33,536
С	329	9,009				329,009
d						
е						
	Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(I)
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) s of col (ı) l (յ), ıf any	Gains (Col (col (k), but not	.) h) gain minus less than -0-) or om col (h))
а						69,755
b						33,536
С						329,009
d						
e						
3	• •	ain or (loss) as defined in sections : t I, line 8, column (c) (see instructi	` ' ` ' ')- }	3	432,300
Part	V Qualification U	nder Section 4940(e) for Re	duced Tax on Net	Investment Inc	come	
For op	otional use by domestic pr	vate foundations subject to the sec	tion 4940(a) tax on ne	et investment incom	e)	
	on 4940(d)(2) applies, le	·	` '		<i>.</i>	
f "Yes	," the foundation does no	e section 4942 tax on the distributal t qualify under section 4940(e) Do	not complete this part	·		es 🗹 No
1	<u>''''</u>	ount in each column for each year,	see instructions before	e making any entries		
	(a) se period years Calendar (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	ole-use assets	(d) Distribution rati (col (b) divided by c	
	2017	220,278		6,335,981		0 034766
	2016	298,115		5,794,897		0 051444
	2015	132,241		5,075,055		0 026057
	2014	276,126		5,062,719		0 054541
	2013	282,400		4,853,975	T	0 058179
	Total of line 1, column (d	•		2		0 224987
		for the 5-year base period—divide ideas dation has been in existence if less	,	0, or by the 3		0 044997
		ncharitable-use assets for 2018 fron		4		6,223,482
	Multiply line 4 by line 3		,	5		280,038
		nt income (1% of Part I, line 27b)		6		5,495
				7		285,533
		ons from Part XII, line 4 ,				323,124
]		ater than line 7, check the box in Pa			g a 1% tax rate Se	

01111	330 11 (20.											age v
Pai	rt VII-B			Activities for Which	Form 4720 May Be	Required (co	ontinue	d)				
5a									Yes	No		
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?											
	(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	e a grant to an organizat	on ot	her than a charitable, etc	, organization described							
	ın secti	on 4945(d)(4)(A)? See II	nstrud	tions		• • [Yes	✓	No			
	(5) Provide	e for any purpose other t	han r	eligious, charitable, scienti	fic, literary, or							
				ention of cruelty to childre		. [Yes	✓	No			
b	If any answ	ver is "Yes" to 5a(1)-(5),	dıd a	iny of the transactions fail	to qualify under the exc	eptions describ	ed in					
	Regulations	s section 53 4945 or in a	curre	nt notice regarding disaste	er assistance? See instru	ctions				5b		
	-	· -		regarding disaster assista			. ▶					
C		·		does the foundation claim	•							
		•		sponsibility for the grant?.		• • [Yes		No			
	If "Yes," at	tach the statement requi	red b	y Regulations section 53 4	945-5(d)							
6 a	Did the fou	ndation, during the year	, rece	ive any funds, directly or i	ndırectly, to pay premiui	ms on						
	!	benefit contract?				. [Yes	✓	No			
b			, pay	premiums, directly or indir	ectly, on a personal ben	efit contract? .		•		6b		No
		6b, file Form 8870										
7a				foundation a party to a pr			Yes	✓	No			
b				ceeds or have any net inc						7b		
8	Is the foun	dation subject to the sec	tion 4	960 tax on payment(s) of	more than \$1,000,000 i	n remuneratior	or					
	excess para	achute payment during t	ne ye	ar ⁹		[Yes	✓	No [
Da	4 V/TTT	Information About (Offic	ers, Directors, Truste	es, Foundation Mai	nagers, Higl	ıly Pai	d En	ploy	yees,		
Pal	t VIII	and Contractors										
1	List all offi	icers, directors, truste	es, fo	undation managers and	l their compensation.	See instruction	ons					
				(b) Title, and average	(c) Compensation (If	(d) Contri			(e)	Exper	se acc	ount.
	(a) Nar	ne and address		hours per week devoted to position	not paid, enter -0-)	employee ben deferred cor					lowand	
PETER	M LEBOVITZ		PRES	IDENT/TREAS /DIRECT	0		препзас	011				
	NOVER STREE	T 309	5 00	iberry meno y bineer				·				,
	SMOUTH, NH											
	ANN SEGAL			SEC'Y/DIRECTOR	0			0	ı			C
	LDWOOD DRI		1 00									
	/TOWN, NY 10 FHAN JAVITCH		DIRE	CTOR	0			0				
	RLAWN AVE		1 00	CTOR	٠ ا			U				
	S FERRY, NY	10522										
JAMES	S LEBOVITZ			CTOR	0			0				C
	BEAUMONT DE		1 00									
2	WYNE, PA 190		id on	nployees (other than the	see included on line 1.	_see instruct	ione) T	fnor	10 0	tor "	NONE	71
	Compensa	tion of five ingliest pa	iu cii		ose meiadea on inie 1	(d) Contrib			10, 01	icci i	TOITE	
(a)	Name and a	ddress of each employee	paid	(b) Title, and average hours per week	(c) Compensation	employee			(e) E	Expens	se acco	unt,
	mo	re than \$50,000		devoted to position	(C) Compensation	plans and			ot	her all	owance	es
				'		compen	sation					
NON												
								+				
								+				
								_				
								_				
Tota	l number of	other employees paid ov	er \$5	0,000			<u> </u>					C
									For	m 990)-PF (2018

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

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

Amounts set aside for specific charitable projects that satisfy the

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

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

323.124

5,495

317.629

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Page 9

58,528

247,151

0

t XIII	•	
	t XIII	

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

c From 2015. . .

e From 2017.

Distributable amount for 2018 from Part XI, line 7 **b** Total for prior years

2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only. Excess distributions carryover, if any, to 2018

e Remaining amount distributed out of corpus

5 Excess distributions carryover applied to 2018

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

same amount must be shown in column (a))

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

6 Enter the net total of each column as

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

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. . .

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

Subtract lines 7 and 8 from line 6a

indicated below:

a From 2013.

b From 2014.

d From 2016.

f Total of lines 3a through e.

(a)

Corpus

0

0

(b)

Years prior to 2017

(c)

2017

264,596

264,596

4 Qualifying distributions for 2018 from Part XII, line 4 🕨 \$ a Applied to 2017, but not more than line 2a

d Applied to 2018 distributable amount. . . .

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



Enter gross amounts unless otherwise indicated		Unrelated bu	ısıness ıncome	Excluded by section	(e) Related or exempt	
_	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
		+				
	and contracts from government agencies					
_	rship dues and assessments					
3 Interes	t on savings and temporary cash nents					
4 Divider	ds and interest from securities			14	118,766	
5 Net ren	tal income or (loss) from real estate				·	
	financed property					
	ebt-financed property.					
6 Net ren	tal income or (loss) from personal property					
	nvestment income					
	(loss) from sales of assets other than					
ınvento	•			18	432,300	
	ome or (loss) from special events					
	profit or (loss) from sales of inventory					
	revenue a					
с						
_						
d						
е			0		FE1 066	,
e 2 Subtota	al Add columns (b), (d), and (e).		0		551,066	
e 2 Subtota 3 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)				551,066 3	
e 2 Subtota 3 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations)		13		
e 2 Subtota 3 Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculus Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions.	lations) le Accomplish income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subtoto 3 Total. (See wo Part XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which	lations) le Accomplish income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
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e 2 Subtoto 3 Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculus Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions.	lations) le Accomplish income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
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e 2 Subtoto 3 Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculus Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions.	lations) le Accomplish income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subtoto 3 Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculus Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions.	lations) le Accomplish income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subtoto 3 Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculus Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions.	lations) le Accomplish income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subtoto 3 Total. (See wo Part XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculus Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions.	lations) le Accomplish income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subtoto 3 Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculus Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions.	lations) le Accomplish income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subtoto 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculus Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions.	lations) le Accomplish income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	551,066

11 (20	10)		
VII	Information Regarding Transfers To and Transactions and Relationships With Noncharit Exempt Organizations	able	
			$\overline{}$

Part 2	XVII	Exempt Organi		ransı	rers 10 a	and Transacti	ons and	Relatio	nsnips with Nor	ncnarita	ibie		
		anization directly or in han section 501(c)(3)	directly enga							on 501		Yes	No
a Tran	sfers fr	om the reporting foun	dation to a n	oncha	rıtable exe	empt organizatio	n of	_					
(1)	Cash.									. 1	La(1)		No
(2)	Other	assets								. [La(2)		No
b Othe	r trans	actions											
		of assets to a nonchar	•	_						🛚	lb(1)		No
		ises of assets from a r			-					⊢	lb(2)		No
` '		of facilities, equipmer	•								lb(3)		No
		ursement arrangemen									lb(4)		No
		or loan guarantees.									lb(5)		No
٠,		nance of services or m	'		-					. 13	lb(6)		No
	-	acilities, equipment, n	-		-					• L	1c		No
of th	e answ e good	er to any of the above s, other assets, or ser	vices given b	npiete v the	reporting	foundation If the	e foundat	on receive	ways snow the fair n d less than fair mar	narket va ket value	iue		
		saction or sharing arra											
(a) Line	No I	(b) Amount involved	(c) Namo of	noncha	aritable ever	mpt organization	(d) D	ecription of	transfers, transactions,	and charu	og arrai	agomon	tc
(a) Line	110	(b) Amount involved	(C) Name of	HOHEHE	aritable exe	inprorganization	(0) 0	escription of	cialisiers, cialisaccions,	, and snam	ig airai	igennen	LS
2a Is th	e found	dation directly or indire	ectly affiliated	d with	, or relate	d to, one or mor	e tax-exe	mpt organ	zations				
desc	ribed ir	n section 501(c) (othei	r than section	501(c)(3)) or ı	n section 527? .			🗆 Ye	es 🗹	No		
b If "Y	es," co	mplete the following s	chedule										
		(a) Name of organization	on		(E) Type of organiza	tion		(c) Description	of relation	ship		
								_					
	Unde	r penalties of perjury,	I declare that	t I hay	/e examin	ed this return in	icluding a	ccompanyi	ng schedules and st	atements	and t	to the l	hest
		knowledge and belief											
c:	which	preparer has any kno	wledge			1							
Sign	*	****				2019-11-07		*****		May the return	IRS di	scuss th	115
Here	_						b			with the	prepar	er show	vn
	s	ignature of officer or t	rustee			Date	,	Title		below		⊅ r	_
										(see ins	tr)? 🗅	✓ Yes [⊔ No
		Print/Type preparer's	name	Prepa	arer's Sıgr	nature	Date			PTIN			
					•				Check if self-		00171	651	
		BEN MAINI CPA							employed ▶ 🗹	Г	001/1	.031	
Paid													
Prepa		Firm's name ► REY	NOLDS & ROV	VELLA	LLP		1		·	Eirm's ETM		11/125	55
Use C	nly									Fırm's EIN	v ►06-	11435	22
		Firm's address ► 90	GROVE STR	EET									
		RI	DGEFIELD, C	T 068	377					Phone no	(203)	438-0	0161

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 CORNELL LAB OF ORNITHOLOGY 501(C)[3] TO INTERPRET AND CONSERVE 5 000

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

159 SAPSUCKER WOODS RD ITHICA, NY 14850	301(0)[3]	THE EARTH'S BIODIVERSITY THROUGH RESEARCH AND EDUCATION FOCUSED ON BIRDS	3,000
DOCTORS WITHOUT BORDERS 40 RECTOR ST 16TH FLOOR NEW YORK, NY 10006	501(C)[3]	PROVIDE CRITICAL CARE TO PEOPLE AFFECTED BY CONFLICT, EPIDEMIC & DISASTER	750
HADASSAH40 WALL STREET NEW YORK, NY 10005	501(C)[3]	TO MOTIVATE AND INSPIRE WOMEN TO STRENGTHEN THEIR PARTNERSHIP WITH ISRAEL	11,924

		EDUCATION FOCUSED ON BINDS	
DOCTORS WITHOUT BORDERS 40 RECTOR ST 16TH FLOOR NEW YORK, NY 10006	501(C)[3]	PROVIDE CRITICAL CARE TO PEOPLE AFFECTED BY CONFLICT,EPIDEMIC & DISASTER	750
HADASSAH40 WALL STREET NEW YORK, NY 10005	501(C)[3]	TO MOTIVATE AND INSPIRE WOMEN TO STRENGTHEN THEIR PARTNERSHIP WITH ISRAEL ENSURE JEWISH CONTINUITY AND REALIZE THEIR POTENTIAL AS A DYNAMIC FORCE IN AMERICAN SOCIETY	11,924
Total		▶ 3a	323.124

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

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

a Paid during the year			
HEIFER INTERNATIONAL 1 WORLD AVENUE LITTLE ROCK, AZ 72202	501(C)[3]	HELP FAMILIES AROUND THE WORLD	500
JEWISH COMMUNITY ACTION 2375 UNIVERSITY AVENUE WEST SUITE 150 ST PAULS, MN 55114	501(C)[3]	TO BRING TOGETHER JEWISH PEOPLE FROM DIVERSE TRADITIONS AND PERSPECTIVIES TO PROMOTE	10,000

LA MUSICA FOUNDATION	E01/C)[2]	CENEDAL DUBBOCES	1
2375 UNIVERSITY AVENUE WEST SUITE 150 ST PAULS, MN 55114		PEOPLE FROM DIVERSE TRADITIONS AND PERSPECTIVIES TO PROMOTE UNDERSTANDING AND TAKE ACTION ON SOCIAL AND ECONOMIC JUSTICE ISSUES IN MN	

		UNDERSTANDING AND TAKE ACTION ON SOCIAL AND ECONOMIC JUSTICE ISSUES IN MN	
LA MUSICA FOUNDATION	501(C)[3]	GENERAL PURPOSES	1,000

		MN	
LA MUSICA FOUNDATION 2160 FAIRWAY LOOP	501(C)[3]	GENERAL PURPOSES	1,000

_A MUSICA FOUNDATION	501(C)[3]	GENERAL PURPOSES	1,000
2160 FAIRWAY LOOP			•
EUGENE, OR 97401			

323,124

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

1,000

10,000

323,124

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

MAZON 10850 WILSHIRE BLVD SUITE 400 LOS ANGELES, CA 90024	501(C)[3]	RALLY THE AMERICAN JEWISH COMMUNITY AROUND THE ISSUE OF HUNGER	
MUSIC OF REMEMBRANCE PO BOX 27500 SEATTLE, WA 98165	501(C)[3]	TO REMEMBER HOLOCAUST MUSICIANS AND THEIR ART THROUGH MUSICAL	

PO BOX 27500 SEATTLE, WA 98165		MUSICIANS AND THEIR ART THROUGH MUSICAL PERFORMANCES, EDUCATIONAL ACTIVITIES, MUSICIAL RECORDINGS, AND COMMISSIONS OF NEW WORKS	
NATIONAL COUNCIL OF JEWISH	501(C)[3]	TO IMPROVE THE QUALITY OF	

		ACTIVITIES, MUSICIAL RECORDINGS, AND COMMISSIONS OF NEW WORKS	
NATIONAL COUNCIL OF JEWISH WOMEN (NCJW) 5905 GOLDEN VALLEY GOLDEN VALLEY, MN 55424	501(C)[3]	TO IMPROVE THE QUALITY OF LIFE FOR WOMEN, CHILDREN, AND FAMILIES AND TO ENSURE INDIVIDUAL RIGHTS AND	10,000

		COMMISSIONS OF NEW WORKS	
NATIONAL COUNCIL OF JEWISH WOMEN (NCJW) 5905 GOLDEN VALLEY GOLDEN VALLEY, MN 55424	501(C)[3]	TO IMPROVE THE QUALITY OF LIFE FOR WOMEN, CHILDREN, AND FAMILIES AND TO ENSURE INDIVIDUAL RIGHTS AND	10,

		COMMISSIONS OF NEW WORKS	
NATIONAL COUNCIL OF JEWISH WOMEN (NCJW) 5905 GOLDEN VALLEY GOLDEN VALLEY, MN 55424	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	TO IMPROVE THE QUALITY OF LIFE FOR WOMEN, CHILDREN, AND FAMILIES AND TO ENSURE INDIVIDUAL RIGHTS AND	10,00

WOMEN (NCJW)	LIFE FOR WOMEN, CHILDREN,	
5905 GOLDEN VALLEY	AND FAMILIES AND TO ENSURE	
GOLDEN VALLEY, MN 55424	INDIVIDUAL RIGHTS AND	
·	FREEDOMS	

OLDEN VALLEY OLDEN VALLEY, MN 55424		AND FAMILIES AND TO ENSURE INDIVIDUAL RIGHTS AND FREEDOMS	

GOLDEN VALLEY, MN 55424		INDIVIDUAL RIGHTS AND FREEDOMS	

Total .

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

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

a Paid during the year

NEW HAVEN, CT 06508

Total .

a Faid during the year			
NEW ISRAEL FUND 300 SEVENTH AVENUE 11TH FLOOR NEW YORK, NY 10001	501(C)[3]	INVEST IN ISRAELI ORGANIZATIONS WHOSE WORK CHANGES THE EQUATION ON CIVIL RIGHTS, RELIGIOUS PLURALISM & SOCIAL JUSTICE ORGANIZE, ADVOCATE, TRAIN & CONVENE	1,000
STAY FOCUSED 245 EAST 44TH STREET SUITE 22B NEW YORK, NY 10017	501(C)[3]	TRANSFORMATIONAL LEARNING EXPERIENCE TO TEENS AND YOUNG ADULTS WITH	5,500

		CONVENE	
STAY FOCUSED 245 EAST 44TH STREET SUITE 22B NEW YORK, NY 10017	501(C)[3]	TRANSFORMATIONAL LEARNING EXPERIENCE TO TEENS AND YOUNG ADULTS WITH DISABILITIES THROUGH A SCUBA DIVING CERTIFICATION PROGRAM, PARTICIPANTS GAIN CONFIDENCE, DEVELOP LEADERSHIP SKILLS, AND BECOME MORE INDEPENDENT	5,5
THE FUNDS FOR YALE NEW HAVEN	501(C)[3]	COMMUNITY HOSPITAL	-

			DISABILITIES THROUGH A SCUBA DIVING CERTIFICATION PROGRAM, PARTICIPANTS GAIN CONFIDENCE, DEVELOP LEADERSHIP SKILLS, AND BECOME MORE INDEPENDENT	
1	ı	I		

		PROGRAM, PARTICIPANTS GAIN CONFIDENCE, DEVELOP LEADERSHIP SKILLS, AND BECOME MORE INDEPENDENT	
THE FUNDS FOR YALE NEW HAVEN	501(C)[3]	COMMUNITY HOSPITAL	750

		LEADERSHIP SKILLS, AND BECOME MORE INDEPENDENT	
THE FUNDS FOR YALE NEW HAVEN PO BOX 1849	501(C)[3]	COMMUNITY HOSPITAL	750

3a

323,124

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

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

a Paid during the year

a raid during the year			
VISITING NURSE & HOSPICE OF FAIRFIELD COUNTY PO BOX 489 WILTON, CT 06897	501(C)[3]	GENERAL PURPOSES	4,700
WHEATON COLLEGE (MA)26 E MAIN ST	501(C)[3]	SCHOLARSHIP FUND	25,000

PO BOX 489 WILTON, CT 06897			
WHEATON COLLEGE (MA)26 E MAIN ST NORTON, MA 02766	501(C)[3]	SCHOLARSHIP FUND	25,000
WUSF FM RADIO - UNIVERSITY OF SOUTHERN FLORIDA 4202 EAST FOWLER AVENUE TAMPA, FL 33620	501(C)[3]	TO PROVIDE MEANINGFUL AND RELEVANT CONTENT THAT ENHANCES OUR COMMUNITY'S QUALITY OF LIFE	20,000

	1			
WHEATON COLLEGE (MA)26 E MAIN ST NORTON, MA 02766		501(C)[3]	SCHOLARSHIP FUND	25,000
WUSF FM RADIO - UNIVERSITY OF SOUTHERN FLORIDA 4202 EAST FOWLER AVENUE TAMPA, FL 33620		501(C)[3]	TO PROVIDE MEANINGFUL AND RELEVANT CONTENT THAT ENHANCES OUR COMMUNITY'S QUALITY OF LIFE	20,000
Total			▶ 3a	323,124

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		<u> </u>
a Paid during the year		'		
THE ANTI-DEFAMATION LEAGUE 605 THIRD AVENUE NEW YORK, NY 10158		501(C)[3]	TO STOP THE DEFAMATIO NOF JEWISH PEOPLE, AND TO SECURE JUSTIC AND FAIR TREATMENT TO ALL	5,000
FIDELITY DONOR ADVISED FUND PO BOX 770001 CINCINNATI, OH 452770053		501(C)[3]	CHARITY THAT ALLOWS A DONOR TO MAKE A GIFT, TAKE AN IMMEDIATE CHARITABLE DEDUCTION, AND RECOMMEND, TYPICALLY WITH STRONG PERSUASIVE AUTHORITY, FUTURE GRANTS MADE FROM FUNDS IN THE DONOR ADVISED FUND	206,000
CHILD RESCUE INCPO BOX 471356 AURORA, CO 80047		501(C)[3]	TO FEED, HOUSE, PROTECT AND EDUCATE THE INNOCENT, UNDERPRIVILEGED, DISABLED, DISTRAUGHT, AND DISPLACED CHILD TO GIVE HOPE, HELP, AND DIRECTION THROUGH EDUCATION, TRAINING, ASSISTANCE, AND LOVE ALTHOUGH "CHILD" IMPLIES THE YOUNG AND THE LARGEST PORTION OF OUR WORK IS WITH THE YOUNG, WE ARE ALL SOMEONE'S CHILD AND IF IN CRISIS, "CHILD RESCUE" WILL ASSIST WHERE THEY CAN	5,000
Total			▶ 3a	323,124

efile GRAPHIC print - DO NOT F	PROCESS As Filed	Data -		DLN: 93491319013879
TY 2018 Accounting Fo	ees Schedule			_
	Name: THE LE	BOVITZ FUND		
	EIN: 23-627	0079		
	1	1	 	1
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	3,12	5 1,563		0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013879
TY 2018 Investments Corpora	te Stock Sched	dule
Name:	THE LEBOVITZ FU	DND
EIN:	23-6270079	

Investments Corporation Stock Schedule				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
CORPORATE STOCK	966,752	3,055,651		

efile GRAPHIC print - DO NOT PROCESS As Filed Data -	DLN: 93491319013879
TY 2018 Investments - Other Schedule	
Name: THE LEBOVITZ FUND	
EIN: 23-6270079	

DI N. 02404240042070

248,313

44,158

23.11 25 5275075					
Investments Other Schedule 2					
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value		
MUTUAL FUNDS	AT COST	2,469,304	3,085,787		

AT COST

OTHER HOLDINGS

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491319013879	9			
TY 2018 Substantial Contributors							
Schedule				ļ			
Name:	THE LEBOVITZ	′ FUND					
EIN:	23-6270079						
Name			Address	1			
PETER M LEBOVITZ		I	NOVER STREET 309 SMOUTH, NH 03801				

efile GRAPHIC print - DO NOT	PROCESS	As Filed Data	-	DLI	N: 93491319013879		
TY 2018 Taxes Schedule							
Name: THE LEBOVITZ FUND							
EIN: 23-6270079							
Category	An	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
EXCISE TAX		19,410	0		0		