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2019

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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 2019, or tax year beginning 01-01-20)19 , aı	nd en	iding 12-31-	2019				
LI		undation KANFER FOUNDATION FOR LIVING			A Employer id 46-1811101	entification numbe	r			
		d about the control of the control o	I Danielavita		40-1011101					
		d street (or P.O. box number if mail is not delivered to street address) IO PLAZA NO 300	Room/suite		B Telephone number (see instructions)					
City	or town	n, state or province, country, and ZIP or foreign postal code			(330) 258-6449					
		44311			C If exemption	application is pendin	g, check here			
G Cl	neck al	Il that apply: \qed Initial return \qed 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			,	ındation status was t	· -			
_	,	/pe of organization: \square Section 501(c)(3) exempt private				n 507(b)(1)(A), chec				
		T	e private foundation							
of	year (f	ket value of all assets at end from Part II, col. (c), ▶\$ 25,517,551 J Accounting method: □ Other (specify) (Part I, column (d) must	✓ Cash ☐ Accru	ıaı		ition is in a 60-montl n 507(b)(1)(B), chec				
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).)	(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 schedule)	25,000							
	2	Check ► ☑ if the foundation is not required to attach								
Revenue		Sch. B	4 201		4 201					
	3	Interest on savings and temporary cash investments Dividends and interest from securities	4,301 529,799	+	4,301 529,799					
	5a	Gross rents	323,733	1	329,799					
	Ь	Net rental income or (loss)								
	6a	Net gain or (loss) from sale of assets not on line 10	637,005	5						
	Ь	Gross sales price for all assets on line 6a								
eve	_	3,233,634								
Œ	7	Capital gain net income (from Part IV, line 2)			637,005					
	8	Income modifications								
	10a	Gross sales less returns and allowances								
	b	Less: Cost of goods sold								
	C	Gross profit or (loss) (attach schedule)	<u></u>							
	11	Other income (attach schedule)	7,062	2	36,347					
	12	Total. Add lines 1 through 11	1,203,167	7	1,207,452					
	13	Compensation of officers, directors, trustees, etc.	C		0		0			
	14	Other employee salaries and wages								
es	15	Pension plans, employee benefits								
ens	16a	Legal fees (attach schedule)	19,465	5	0		0			
and Administrative Expenses	b	Accounting fees (attach schedule)								
e E	С	Other professional fees (attach schedule)	1,283,042	2	69,988		0			
ativ	17	Interest	00.1							
istr	18	Taxes (attach schedule) (see instructions)	17,016		17,016		0			
Ë	19	Depreciation (attach schedule) and depletion								
Adı	20	Occupancy	20.500	-	0		20 500			
пd	21	Travel, conferences, and meetings	38,588	2	0		38,588			
	22	Other expenses (attach schedule)	216,059		0		0			
Ē	24	Total operating and administrative expenses.	2							
Operating		Add lines 13 through 23	1,574,170		87,004		38,588			
Ö	25	Contributions, gifts, grants paid	1,517,743	+	<u> </u>		1,517,743			
	26	Total expenses and disbursements. Add lines 24 and 25	2.001.012		97.004		1 556 224			
	27	Subtract line 26 from line 12:	3,091,913		87,004		1,556,331			
	a	Excess of revenue over expenses and								
	 L.	disbursements Net investment income (if negative, enter -0-)	-1,888,746	5						
	b c	Adjusted net income (if negative, enter -0-)			1,120,448					
For		work Reduction Act Notice, see instructions.	<u> </u>		Cat. No. 11289>	[For	m 990-PF (2019)			

For	m 990-	PF (2019)				Page 2
Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year (a) Book Value	/h	End o	f year (c) Fair Market Value
	1	Cash—non-interest-bearing	(a) book value	(,,) Dook Value	(c) Full Market Value
	2	Savings and temporary cash investments	1,636,706			
	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				
	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
455	10a	Investments—U.S. and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	c	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)	21,296,283	26÷i	20,640,604	25,517,551
	14	Land, buildings, and equipment: basis	21,230,203	-29	20,010,001	23,317,331
		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)	22,932,989		20,640,604	25,517,551
_	17	Accounts payable and accrued expenses				
	18	Grants payable				
es	19	Deferred revenue				
Ξ	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe	0	4	39,451	
	23	Total liabilities(add lines 17 through 22)	0		39,451	
<u> </u>		Foundations that follow FASB ASC 958, check here				
Fund Balances		and complete lines 24, 25, 29 and 30.				
<u>=</u>	24	Net assets without donor restrictions				
8	25	Net assets with donor restrictions				
Ξ		- I.: II. II III IIII III III III III III III III III IIII III III III III III III III III IIII III III III III III III III III IIII III III III III III III III III IIII III III III III III III III III IIII III III III III III III III III IIII III III III III III III III III IIII III III III III III III III III IIII III III III III III III III III IIII III III III III III III III III IIII III III III III III III III III III				
		Foundations that do not follow FASB ASC 958, check here ▶ and complete lines 26 through 30.				
ŏ	26	Capital stock, trust principal, or current funds	0		0	
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0		0	
Assets	28	Retained earnings, accumulated income, endowment, or other funds	22,932,989		20,601,153	
	29	Total net assets or fund balances (see instructions)	22,932,989		20,601,153	
Net	30	Total liabilities and net assets/fund balances (see instructions) .	22,932,989		20,640,604	
Pa	rt III	, , ,	<u> </u>		*	
1		al net assets or fund balances at beginning of year—Part II, column (a), li	ne 29 (must agree with	end-		
		, , , , ,		•	1	22,932,989
2		er amount from Part I, line 27a		.	2	-1,888,746
3 4		lines 1, 2, and 3		_ }	3 4	<u>0</u> 21,044,243
5		reases not included in line 2 (itemize)		•	5	443,090
6		al net assets or fund balances at end of year (line 4 minus line 5)—Part II,		. [6	20,601,153

	ee the kind(s) of property sold (e.g., arehouse; or common stock, 200 shs	. MLC Co.) P-	w acquired -Purchase -Donation	Date acquired (mo., day, yr.)	Date sold (mo., day, yr.)
1a See Additional Data Tabl	e				
b					
c					
d					
e					
(e)	(f)	(g)		(h)
Gross sales price	Depreciation allowed	Cost or other b			r (loss)
a See Additional Data Tabl	(or allowable)	plus expense o	rsale	(e) plus (r) minus (g)
	<u>e</u>				
b					
d					
e			21 (60		
Complete only for assets	s showing gain in column (h) and ow		31/69		(I) h) gain minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. over col. (j), if		col. (k), but not	less than -0-) or om col.(h))
a See Additional Data Table	· · ·	377		`	. , ,
b					
d					
e					
•	gain or (loss) { gain or (loss) as defined in sections 1 irt I, line 8, column (c) (see instruction	. , , , ,		3	637,009
	Under Section 4940(e) for Re	educed Tax on Net Inve	stment Inc	come	
(For optional use by domestic p	private foundations subject to the sec	tion 4940(a) tax on net inves	stment incom	ie.)	
76 40.40(.)(2)					
If section 4940(d)(2) applies, le	eave this part blank.				
If "Yes," the foundation does no	ne section 4942 tax on the distributal ot qualify under section 4940(e). Do	not complete this part.			es 🗹 No
1 Enter the appropriate an	nount in each column for each year;	see instructions before makir	ng any entries	5.	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use a	assets	(d) Distribution rati (col. (b) divided by c	
2018	1,660,911	·	74,326		0.061803
2017	2,827,471	29,80	06,465		0.094861
2016	2,769,130	25,81	13,259		0.107275
2015	0		0		0.000000
2014	0		0		0.000000
2 Total of line 1, column (2		0.263939
	o for the 5-year base period—divide t		by the 3		0.053700
	ndation has been in existence if less t Incharitable-use assets for 2019 from		: : 3	-	0.052788 26,171,776
5 Multiply line 4 by line 3		·	5		1,381,556
	ent income (1% of Part I, line 27b)		6	 	11,204
7 Add lines 5 and 6	ent income (170 of Part 1, line 27b)		6		1,392,760
	ions from Part XII, line 4 ,			 	1,556,331
	eater than line 7, check the box in Pa				e the Part VI
				C,	orm QQ0-PF (201)

orm	990-PF (2019)							F	age 6
Pai	t VII-B Statements Regard	ling	Activities for Which	Form 4720 May Be	Required (continued)				
ā	During the year did the foundation p	рау с	r incur any amount to:					Yes	No
	(1) Carry on propaganda, or otherw	ise a	attempt to influence legisla	ation (section 4945(e))?	☐ Yes 🗸	No.			
	(2) Influence the outcome of any sp	ecifi	c public election (see sect	ion 4955); or to carry	∟ res 🖭	NO			
	on, directly or indirectly, any vo	ter r	egistration drive?		· · 🗌 Yes 🗸	No			
	(3) Provide a grant to an individual	for t	ravel, study, or other sim	ilar purposes?	Yes V	No.			
	(4) Provide a grant to an organizati	on of	ther than a charitable, etc	, organization described		"			
	in section 4945(d)(4)(A)? See ir	ıstru	ctions		· · • • Yes 🗌	No			
	(5) Provide for any purpose other th	nan r	eligious, charitable, scien	tific, literary, or	□ les □	"			
	educational purposes, or for the	prev	ention of cruelty to childr	en or animals?	· · □ Yes 🗸	No.			
b	If any answer is "Yes" to $5a(1)-(5)$,	did	any of the transactions fa	il to qualify under the ex	ceptions described in	110			
	Regulations section 53.4945 or in a	curre	ent notice regarding disas	ter assistance? See instr	uctions	L	5 b		No
	Organizations relying on a current n	otice	regarding disaster assist	ance check here	▶ □				
C	If the answer is "Yes" to question 5a	ı(4),	does the foundation claim	n exemption from the	_				
	tax because it maintained expenditu	ire re	esponsibility for the grant?		· · 🗸 Yes 🗌	No			
	If "Yes," attach the statement requir	red b	y Regulations section 53.	4945-5(d). %	□ les □	10			
5a	Did the foundation, during the year,	rece	eive any funds, directly or	indirectly, to pay premiu	ims on				
	a personal benefit contract?				· 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	s the	foundation a party to a p	rohibited tax shelter trar	nsaction? Yes	No			
b	If "Yes", did the foundation receive a	any p	proceeds or have any net	income attributable to th	e transaction?		7b		
3	Is the foundation subject to the sect	ion 4	1960 tax on payment(s) o	f more than \$1,000,000	in remuneration or				
	excess parachute payment during th	ne ye	ar?		· · 🗌 Yes 🗸	No L			
	Information About C	Offic	ers, Directors, Trust	ees, Foundation Ma	nagers, Highly Paid En		ees,	,	
Pai	and Contractors			·			-		
1	List all officers, directors, trustee	es, fo	oundation managers an	d their compensation.	See instructions				
	,		(b) Title, and average	(c) Compensation (If	(d) Contributions to	(a) F	vner	se acc	ount
	(a) Name and address		hours per week devoted to position	not paid, enter -0-)	employee benefit plans and deferred compensation			llowand	
	Additional Data Table		devoted to position	-0-)	dererred compensation				
	tuditional Buta Tubic								
		1							
2	Compensation of five highest-pa	id er	nnlovees (other than th	ose included on line 1	—see instructions). If nor	l ne. ent	er "	NONE.	71
				T	(d) Contributions to	,			
(a)	Name and address of each employee	paid	(b) Title, and average hours per week	(c) Compensation	employee benefit			se acco	
	more than \$50,000		devoted to position	(5) 35	plans and deferred compensation	oth	er all	owanc	es
IONI					Compensation				
0111	-		-						
			-						
			1						
			-						
			-						
-t-	I wombou of other and a second		70,000						
ota	number of other employees paid over	er \$5				Earr	004	0-PF	0
						rorm		U-PF (ZU191

Form 990-PF (2019)		Page 7
Part VIII Information About Officers, Directors, True and Contractors (continued)	ustees, Foundation Managers, Highly P	aid Employees,
3 Five highest-paid independent contractors for profession	al services (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
WALNUT RIDGE STRATEGIC MANAGEMENT COMPANY LLC	MANAGEMENT SERVICES	78,000
ONE GOJO PLAZA NO 300 AKRON, OH 44311		
LEGACY STRATEGIC ASSET MANAGEMENT	ASSET MANAGEMENT	70,468
1891 GEORGETOWN RD HUDSON, OH 44236		,
Total number of others receiving over \$50,000 for professional service	cor.	• 0
Part IX-A Summary of Direct Charitable Activities	Les	
List the foundation's four largest direct charitable activities during the tax year. I	Include relevant statistical information such as the numbe	er of L
organizations and other beneficiaries served, conferences convened, research pa	pers produced, etc.	Expenses
1		
-		_
2		
2		
3		
4		
<u> </u>		—
		
Part IX-B Summary of Program-Related Investmen	ts (see instructions)	
Describe the two largest program-related investments made by the foundation	on during the 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 (2019)

2b

Income tax for 2019. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

Distributable amount before adjustments. Subtract line 2c from line 1.

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

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

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

income. Enter 1% of Part I, line 27b. See instructions.

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 paid (including administrative expenses) to accomplish charitable, etc., purposes:

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

11,204

2c

3

4

5

6

7

1a

1b

2

За 3h

4

5

11,204

1,297,385

1.297.385

1,297,385

1,556,331

1,556,331

Form 990-PF (2019)

11,204 1,545,127

2a

3

4 5

6

1

2

3

4

5

b

Part XII

a From 2014.

b From 2015. c From 2016. . .

d From 2017.

e From 2018.

1,297,385

Form **990-PF** (2019)

Page 9

Form	990-PF	(20
Pa	rt XII	1

0-PF	(2	01	9	
VIII	7		7	ı

0-PF (20	019)		
XIII	Undistributed Income (see instruc	tions)	
			(a)

Distributable amount for 2019 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2019: a Enter amount for 2018 only. **b** Total for prior years: 20______, 20______ Excess distributions carryover, if any, to 2019:

f Total of lines 3a through e.

d Applied to 2019 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a).)

5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

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 —see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 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 2014 not

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

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2020.

10 Analysis of line 9: a Excess from 2015. . .

b Excess from 2016. .

c Excess from 2017. . . .

d Excess from 2018. . .

e Excess from 2019. . .

6 Enter the net total of each column as

indicated below:

4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ 1,556,331 a Applied to 2018, 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). 2019 1,297,385

(b)

Years prior to 2018

Corpus

4,339,547

258.946

4,598,493

704.313

3,894,180

386.900 1,507,119

1.387.100

354,115

258.946

704.313 386,900

1.507.119

1.387.100 354,115 (c)

2018

For	m 990-PF (2019)					Page 10
1	Part XIV Private Operating Found	l ations (see instr	ructions and Part \	/II-A, question 9)		
1a	If the foundation has received a ruling or de foundation, and the ruling is effective for 20			erating		
b	Check box to indicate whether the organizat	ion is a private oper	rating foundation des	scribed in section \Box] 4942(j)(3) or □	d942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test—enter:					
	(1) Value of all assets(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
С	"Support" alternative test—enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Information assets at any time during th			foundation had	\$5,000 or more i	in
1 a	Information Regarding Foundation Man List any managers of the foundation who have	agers: /e contributed more	than 2% of the tota			n
h	before the close of any tax year (but only if List any managers of the foundation who ow					
	ownership of a partnership or other entity)	of which the founda	ition has a 10% or gr	reater interest.		
2	Information Regarding Contribution, Gr	ant, Gift, Loan, So	cholarship, etc., Pro	ograms:		
	Check here ► ☐ if the foundation only mak unsolicited requests for funds. If the founda other conditions, complete items 2a, b, c, a	tion makes gifts, gr	ants, etc. to individu			
a	The name, address, and telephone number			n applications should	be addressed:	
	INFOLIPPMANKANFERORG 23 PARK PLACE BROOKLYN, NY 11217 (330) 255-6200					
b	The form in which applications should be su ORGANIZATIONS MAY SUBMIT AN INFORMA			•		
С	Any submission deadlines: NONE					
d	Any restrictions or limitations on awards, su factors:	ch as by geographic	cal areas, charitable	fields, kinds of institu	utions, or other	
	NONE					

er gross	amounts unless otherwise indicated.		usiness income	Excluded by section		(e) Related or exemple function in some
_	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					
	on savings and temporary cash					
investme				14	4,301	
	ds and interest from securities			14	529,799	
	al income or (loss) from real estate:					
	inanced property.					
	ebt-financed property					
	al income or (loss) from personal property					
	(loss) from sales of assets other than					
inventor	• •			18	637,005	
Net inco	ome or (loss) from special events:			10	037,003	
	rofit or (loss) from sales of inventory					
Other re	• •					
a PARTNE	ERSHIP INCOME	523000	-29,285	14	36,347	
b						
с						
с						
c d e						
c d e Subtotal	l. Add columns (b), (d), and (e).		-29,285		1,207,452	
c d e Subtotal Total. A	l. Add columns (b), (d), and (e)		-29,285		1,207,452 3	1,178,1
c d e Subtotal Total. A (See wor	l. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu	lations.)		1		
d e Subtota Total. A (See won	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
Subtotal Total. A (See wor	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
d e Subtota Total. A (See won	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
d e Subtota Total. A (See won	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
d e Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
d e Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
d e Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
d e Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
d e Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
d e Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
d e Subtota Total. A (See won	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
d e Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
d e Subtota Total. A (See won	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
d e Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	
d e Subtotal Total. A (See wor rt XVI-	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3uted importantly to	

Part XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations	_
L Did the organ	sization directly or indirectly engage in any of the following with any other organization described in section 501	Г

	art XAT	Exempt Organ	izations										
1	Did the o	organization directly or i er than section 501(c)(3)	ndirectly enga	ge in an	y of the section 5	following with a 527, relating to p	ny of	ther organization	n described in sect s?	tion 501		Yes	No
а	Transfers	s from the reporting fou	ndation to a n	oncharit	able exe	empt organizatio	n of:	:		Ī			
	(1) Cas	h								. [1a(1)		No
	(2) Oth	er assets									1a(2)		No
b	Other tra	ansactions:											
	(1) Sale	es of assets to a noncha	ritable exempt	t organiz	zation.						1b(1)		No
			ases of assets from a noncharitable exempt organization										No
		ital of facilities, equipme	-				•				1b(3)		No
		mbursement arrangeme								F	1b(4)		No
		ns or loan guarantees.									1b(5)		No
		ormance of services or r								•	1b(6)		No
	-	of facilities, equipment,								١	1c		No
a		swer to any of the abov oods, other assets, or se											
		ansaction or sharing arr									-		
			1.634										
(a)	Line No.	(b) Amount involved	(c) Name of	noncharit	able exer	mpt organization		(d) Description of 1	transfers, transaction	s, and shar	ing arrar	igement	ts
			+										
			-										
	-		+										
	-		+										
			+										
2a	Is the fo	undation directly or indi	rectly affiliated	d with, o	r related	d to, one or more	e tax	k-exempt organi	zations				
	described	d in section 501(c) (othe	er than section	501(c)((3)) or i	n section 527? .				res 🔽	No No		
b	If "Yes,"	complete the following	schedule.										
		(a) Name of organizat	ion		(b) Type of organizat	tion		(c) Descriptio	n of relatio	nship		
	Un	der penalties of perjury	I declare that	t I have	evamin	ed this return in	cludi	ling accompanyir	ng schedules and s	tatement	s and t	o the l	hest
	of	my knowledge and belie	f, it is true, co										
~:		ich preparer has any kn	owledge.			ı							
	gn	*****				2020-11-16		*****		May the return	e IRS dis	cuss th	is
He	ere							_		with th	e prepar	er show	/n
		Signature of officer or	trustee			Date		Title		below		ı –	,
										(see in	str.) 🗹	Yes □	No
		Print/Type preparer	s name	Prepare	er's Sign	nature	D	ate		PTIN			
				·	_			-	Check if self-		P00369	660	
		BRIAN CARTER						2020-11-16	employed ▶ 🏻		-00303	000	
Pa	id							2020-11-10					
	epare	THE THAT I LET	NTE & MORAN	I PLLC						Eirmin Fi	N b 20	12570	E1
Us	e Only									Firm's EI	N ►36-	135/9	21
		Firm's address ► 1	0 S RIVERSID	E PLAZA	9TH FL	.OOR							
		c	HICAGO, IL 6	0606						Phone no	o. (312)	207-1	1040
			, -										

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation WELLS FARGO ST COVERED #5910 (AVAILABLE UPON REQUEST) Ρ 2019-12-31 WELLS FARGO LT COVERED #5910 (AVAILABLE UPON REQUEST) Ρ 2019-12-31 WELLS FARGO LT NONCOVERED #5910 (AVAILABLE UPON REQUEST) Р 2019-12-31 WELLS FARGO ST COVERED #3672 (AVAILABLE UPON REQUEST) Ρ 2019-12-31 WELLS FARGO LT COVERED #3672 (AVAILABLE UPON REQUEST) Ρ 2019-12-31 Ρ WELLS FARGO ST COVERED #9028 (AVAILABLE UPON REQUEST) 2019-12-31 Ρ WELLS FARGO ST NONCOVERED #9028 (AVAILABLE UPON REQUEST) 2019-12-31 Р 2019-12-31 WELLS FARGO LT COVERED #9028 (AVAILABLE UPON REQUEST) Ρ 2019-12-31 WELLS FARGO LT NONCOVERED #9028 (AVAILABLE UPON REQUEST) WELLS FARGO CAPITAL GAIN DISTRIBUTION #9028 Ρ 2019-12-31 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 49.556 47,040 2,516 257,815 253.232 4,583 303,128 71,216 231,912 154,387 123,898 30,489 1,051,315 773,954 277,361 31,745 -1,406 33,151 114,599 114,597 2 680,733 677,766 2,967 490,864 501,775 -10,911 98,724 98,724 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 2,516 4,583 231,912 30,489 277,361 -1,406 2,967 -10,911 98,724

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D—Donation WELLS FARGO CAPITAL GAIN DISTRIBUTION #5910 2019-12-31 Form 990PF Part IV - Capital Gains and Losses for Tay on Investment Income - Columns e - h

TOTHI SSOFT FUIL	orni 990F1 Fart IV - Capital Gams and E039C3 for Tax on Investment Income - Columns C - II							
(e) Gross sales price		Depreciation allowed (f) (or allowable)		Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)			
	768					768		
Form 990PF Part	Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I							
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					Gains (Col. (h) gain minus			
<i>(2)</i> = 14 17	6 4 2 /24 /62		A 11 1 1 1 1	F (:)	col. (k), but not less than -0-) or		

768			768
Form 990PF Part IV - Capital	Gains and Losses for Tax on	Investment Income - Colum	ns i - I
Complete only for assets show	Gains (Col. (h) gain minus		
(i) F.M.V. as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col. (i) (k) over col. (j), if any	col. (k), but not less than -0-) or (I) Losses (from col.(h))

768

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, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation JOSEPH KANFER DIRECTOR

	J	1		_
ONE GOJO PLAZA NO 300 AKRON, OH 44311	1.00			
MARCELLA KANFER ROLNICK	DIRECTOR/CHAIR	0	0	0
ONE GOJO PLAZA NO 300 AKRON, OH 44311	4.00			
JOSHUA POLNICK	DIRECTOR	0	0	0

			l .	
ONE GOJO PLAZA NO 300 AKRON, OH 44311	1 4.00			
JOSHUA ROLNICK	DIRECTOR	0	0	0
ONE GOJO PLAZA NO 300 AKRON, OH 44311	1.00			
MAMIE KANFER STEWART	DIRECTOR	0	0	0

		1	· ·	
ONE GOJO PLAZA NO 300 AKRON, OH 44311	1.00			
MAMIE KANFER STEWART	DIRECTOR	0	0	0
ONE GOJO PLAZA NO 300 AKRON, OH 44311	1.00			
JP ENGLISH	TREASURER	0	0	0
	□ 1.00			

MAMIE KANFER STEWART	DIRECTOR	0	0	0
ONE GOJO PLAZA NO 300 AKRON, OH 44311	1.00			
JP ENGLISH	TREASURER	0	0	0
ONE GOJO PLAZA NO 300 AKRON, OH 44311	1.00			
AARON DORFMAN	PRESIDENT	0	0	0

JP ENGLISH	TREASURER	0	0	0
ONE GOJO PLAZA NO 300 AKRON, OH 44311	1.00			
AARON DORFMAN	PRESIDENT	0	0	0
ONE GO10 PLAZA NO 300	40.00			

ONE GOJO PLAZA NO 300 AKRON, OH 44311	1.00			
AARON DORFMAN	PRESIDENT	0	0	C
ONE GOJO PLAZA NO 300	40.00			

7111110117 011 11311				
AARON DORFMAN	PRESIDENT	0	0	
ONE GOJO PLAZA NO 300 AKRON, OH 44311	40.00			

/ALERIE POSENBERG	CECRETARY		0	
ONE GOJO PLAZA NO 300 AKRON, OH 44311	40.00			
AARON DORFMAN	PRESIDENT	0	0	1

711(1011) 011 11511				
VALERIE ROSENBERG	SECRETARY	0	0	0
ONE GOJO PLAZA NO 300 AKRON, OH 44311	40.00			

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 AMERICAN JEWISH WORLD SERVICE NONE PC **GENERAL** 120,000 45 WEST 36TH STREET 11TH FLOOR

NEW YORK, NY 10018				
BEND THE ARC 330 7TH AVENUE 19TH FLOOR NEW YORK, NY 10001	NONE	PC	GENERAL	80,000
JEWISH SOCIAL JUSTICE ROUNDTABLE - BEND THE ARC 2027 MASSACHUSETTS AVENUE NW	NONE	PC	GENERAL	1,962

NEW YORK, NY 10001				
JEWISH SOCIAL JUSTICE ROUNDTABLE - BEND THE ARC 2027 MASSACHUSETTS AVENUE NW WASHINGTON DC 20036	NONE	PC	GENERAL	1,9

JEWISH SOCIAL JUSTICE ROUNDTABLE	NONE	PC	GENERAL	1,90
- BEND THE ARC 2027 MASSACHUSETTS AVENUE NW				
WASHINGTON, DC 20036				

Total .

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 CIVIC SPIRIT - HILLEL NONE PC GENERAL 25,000 800 EIGHTH STREET NW WASHINGTON, DC 20001

EMBODIED JEWISH LEARNING - UPSTART BAY AREA 1111 BROADWAY 3RD FLOOR OAKLAND, CA 94607	NONE	PC	GENERAL	20,000
HAZON 45 WEST 36TH STREET 8TH FLOOR NEW YORK, NY 10018	NONE	PC	GENERAL	28,000

Total .

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 HILLEL INTERNATIONAL NONE PC **GENERAL** 100,000 800 FIGHTH STREET NW

WASHINGTON, DC 20001				
ISRAEL CENTER FOR EDUCATIONAL INNOVATION - NEW ISRAEL FUND 6 EAST 39TH ST SUITE 301 NEW YORK, NEW YORK 10016	NONE	PC	GENERAL	30,000

INNOVATION - NEW ISRAEL FUND 6 EAST 39TH ST SUITE 301 NEW YORK, NEW YORK 10016 IS				
JEWISH STUDIO PROJECT 940 DWIGHT WAY 13B	NONE	PC	GENERAL	30,000

IS				
JEWISH STUDIO PROJECT 940 DWIGHT WAY 13B BERKELEY, CA 94710	NONE	PC	GENERAL	30,000
Total			▶ 3a	1,517,743

Foundation Purpose of grant or Recipient 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 HADAR INSTITUTE NONE PC GENERAL 45,000 190 AMSTERDAM AVENUE NEW YORK, NY 10023

PC

PC

GENERAL

GENERAL

3a

50,000

25,000

1,517,743

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

NONE

NONE

RESETTING THE TABLE - JEWISH

SAFETY RESPECT EQUITY COALITION -

COUNCIL OF PUBLIC AFFAIRS 116 E 27TH STREET NEW YORK, NY 10016

NEW VENTURE FUND 209 KEARNY STREET SAN FRANCISCO, CA 94108

Total . .

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

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

Foundation status of recipient

recipient

Purpose of grant or contribution

a Paid during the year

51 MA INSTITUTE 520 S MAIN STREET SUITE 2457 AKRON, OH 44311	NONE	PC	GENERAL	/3,/11
THE SHALOM HARTMAN INSTITUTE OF NORTH AMERICA 475 RIVERSIDE DRIVE SUITE 820	NONE	PC	GENERAL	100,000

NORTH AMERICA 475 RIVERSIDE DRIVE SUITE 820 NEW YORK, NY 10115				
T'RUAH 266 WEST 37TH STREET SUITE 803 NEW YORK, NY 10018	NONE	PC	GENERAL	40,000

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

Foundation status of recipient contribution

Purpose of grant or contribution

UPSTART1111 BROADWAY 3RD FLOOR OAKLAND, CA 94607	NONE	PC	GENERAL	75,000
AT THE WELL3417 ORDWAY STREET NW WASHINGTON, DC 20016	NONE	PC	GENERAL	30,000

AT THE WELL3417 ORDWAY STREET NW WASHINGTON, DC 20016	NONE	PC	GENERAL	30,000
CENTER FOR AMERICAN PROGRESS 1333 H STREET NW 10TH FLOOR WASHINGTON, DC 20005	NONE	PC	GENERAL	22,000

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 a Paid during the year INSTITUTE FOR JEWISH SPIRITUALITY NONE PC GENERAL 20,000 121 WEST 27TH STREET SUITE 404 NEW YORK, NY 10001

INSTITUTE FOR THE NEXT JEWISH FUTURE 5472 SOUTH EVERETT AVENUE CHICAGO, IL 60615	NONE	PC	GENERAL	25,000
JEWISH FARM SCHOOL 707 SOUTH 50TH STREET	NONE	PC	GENERAL	2,500

CHICAGO, IL 60615				
JEWISH FARM SCHOOL 707 SOUTH 50TH STREET PHILIDELPHIA, PA 19143	NONE	PC	GENERAL	2,500
Total			▶ 3a	1,517,743

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

Total .

a Paid during the year				
JEWS OF COLOR FIELD-BUILDING INITIATIVE - IMPACT CUBED 441 SAXONY ROAD ENCINITAS, CA 92024	NONE	PC	GENERAL	35,000

ENCINITAS, CA 92024				
JOIN FOR JUSTICE 359 BOYLSTON STREET 4TH FLOOR BOSTON, MA 02116	NONE	PC	GENERAL	40,000

JOIN FOR JUSTICE 359 BOYLSTON STREET 4TH FLOOR BOSTON, MA 02116	NONE	PC	GENERAL	40,000
KIRVA INSTITUTE10 STONE STREET SHARON, MA 02067	NONE	PC	GENERAL	20,000

359 BOYLSTON STREET 4TH FLOOR BOSTON, MA 02116				
KIRVA INSTITUTE10 STONE STREET SHARON, MA 02067	NONE	PC	GENERAL	20,000

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	recipient		
a Paid during the year				
LET IT RIPPLE	NONE	PC	GENERAL	70,000

SAN FRANCISCO, CA 94194				
MITZVAH MATZOS 55 CROMWELL AVENUE PROVIDENCE. RI 02860	NONE	PC	GENERAL	50,000

MITZVAH MATZOS 55 CROMWELL AVENUE PROVIDENCE, RI 02860	NONE	PC	GENERAL	50,000
MOISHE HOUSE 5007 PROVIDENCE ROAD CHARLOTTE, NC 28226	NONE	PC	GENERAL	27,000

PROVIDENCE, RI 02000				
MOISHE HOUSE 5007 PROVIDENCE ROAD CHARLOTTE, NC 28226	NONE	PC	GENERAL	27,000
Total			▶ 3a	1,517,743

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 MOMENT MAGAZINE NONE PC GENERAL 10,000 4115 WISCONSIN AVENUE NW SUITE LL10

WASHINGTON, DC 20016				
ONE TABLE 70 MADISON AVENUE 8TH FLOOR NEW YORK, NY 10016	NONE	PC	GENERAL	55,000
RECONSTRUCTING JUDAISM 1299 CHURCH ROAD WYNCOTE, PA 19095	NONE	PC	GENERAL	18,000

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 (nome or business)	or substantial contributor	,		
a Paid during the year				
SEFARIA	NONE	PC	GENERAL	45,850

195 MONTAGUE STREET 14TH FLOOR SUITE 1203 NEW YORK, NY 11201	NONE		GENERAL	43,030
SVARA1101 DAVIS STREET 529 EVANSTON, IL 60204	NONE	PC	GENERAL	25,000

NEW YORK, NY 11201				
SVARA1101 DAVIS STREET 529 EVANSTON,IL 60204	NONE	PC	GENERAL	25,000
URJ CAMP NEWMAN 711 GRAND AVENUE SUITE 280	NONE	PC	GENERAL	27,500

SVARA1101 DAVIS STREET 529 EVANSTON, IL 60204	NONE	PC	GENERAL	25,000
URJ CAMP NEWMAN 711 GRAND AVENUE SUITE 280 SAN RAFAEL, CA 94901	NONE	PC	GENERAL	27,500

EVANSTON, IL 60204				
URJ CAMP NEWMAN 711 GRAND AVENUE SUITE 280 SAN RAFAEL, CA 94901	NONE	PC	GENERAL	27,500
Total			▶ 3a	1,517,743

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)

Name and address (nome or business)	or substantial contributor	-		
a Paid during the year				
WILDERNESS TORAH	NONE	PC	GENERAL	27,500

BERKELEY, CA 94704				
KESHET284 ARMORY STREET BOSTON, MA 02130	NONE	PC	GENERAL	18,000

KESHET284 ARMORY STREET BOSTON, MA 02130	NONE	PC	GENERAL	
DIMENSIONS EDUCATIONAL CONSULTING 716 BEACON STREET UNIT 590633	NONE	PC	GENERAL	

Total .

D0510N, MA 02130				
DIMENSIONS EDUCATIONAL CONSULTING 716 BEACON STREET UNIT 590633 NEWTON, MA 02459	NONE	PC	GENERAL	15,000

1,517,743

▶ 3a

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 NIONE D.C. 35 000

411 EAST CLINTON AVENUE TENAFLY, NJ 07670	NONE	PC	GENERAL	25,000
JEWISH EMERGENT NETWORK - IKAR	NONE	PC	GENERAL	5,000

JEWISH EMERGENT NETWORK - IKAR 1737 SOUTH LA CIENEGA BOULEVARD LOS ANGELES, CA 90035	NONE	PC	GENERAL	5,000
HEBREW COLLEGE160 HERRICK ROAD	NONE	PC	GENERAL	180

LOS ANGELES, CA 90035				
HEBREW COLLEGE160 HERRICK ROAD NEWTON CENTRE, MA 02459	NONE	PC	GENERAL	180

Total .

1,517,743

■ 3a

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
DOROT171 WEST 85TH STREET	NONE	PC	GENERAL	180

NEW YORK, NY 10024	NONE	PC	GENERAL	180
HFLA OF NORTHEAST OHIO 23300 CHAGRIN BOULEVARD SUITE 204	NONE	PC	GENERAL	180

HFLA OF NORTHEAST OHIO 23300 CHAGRIN BOULEVARD SUITE 204 BEECHWOOD, OH 44122	NONE	PC	GENERAL	
KNOXVILLE JEWISH ALLIANCE	NONE	PC	GENERAL	

Total .

204 BEECHWOOD, OH 44122				
KNOXVILLE JEWISH ALLIANCE 6800 DEANE HILL DRIVE SW	NONE	PC	GENERAL	180

BEECHWOOD, OH 44122				
KNOXVILLE JEWISH ALLIANCE 6800 DEANE HILL DRIVE SW KNOXVILLE, TN 37919	NONE	PC	GENERAL	180

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

415 SOUTH STREET WALTHAM, MA 02453	NONE	PC	GENERAL	15,000
JEWISH FEDERATION OF LOS ANGELES 6505 WILSHIRE BLVD	NONE	PC	GENERAL	15,000

JEWISH FEDERATION OF LOS ANGELES 6505 WILSHIRE BLVD LOS ANGELES, CA 90048	NONE	PC	GENERAL	15,000
MATOVU4200 BLAINE AVENUE	NONE	PC	GENERAL	15,000

LOS ANGELES, CA 90048				
MATOVU4200 BLAINE AVENUE ST LOUIS, MO 63110	NONE	PC	GENERAL	15,00

▶ 3a

1,517,743

LOS ANGELES, CA 90048				
MATOVU4200 BLAINE AVENUE	NONE	PC	GENERAL	15,0

Total .

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

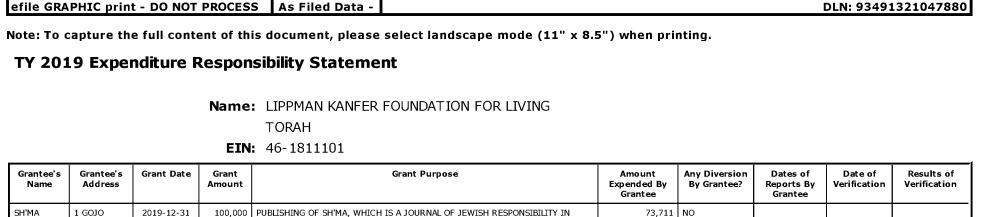
Traine and dadress (nome or business)	or substantial contributor			
a Paid during the year				
NORTHERN VIRGINIA HEBREW	NONE	PC	GENERAL	15,000

1,517,743

CONGREGATION 1441 WIEHLE AVE RESTON, VA 20190

Name and address (home or husiness)

Total . .



PRINT AND ON-LINE FORM. SH'MA USED THE GRANT TO FUND ITS QUALIFIED CHARITABLE ADMINISTRATIVE EXPENSES INCURRED IN PRODUCING THE

JOURNAL.

INSTITUTE

PI A7A

AKRON, OH 44311

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 9349132104	7880
TY 2019 Investments - Other S	Schedule		
Name: 1	_IPPMAN KANFER	FOUNDATION FOR LIVING	

25,517,551

20,640,604

EIN: 46-1811101 Investments Other Schedule 2 Listed at Cost or **End of Year Fair** Category / Item **Book Value FMV** Market Value

AT COST

TORAH

WELLS FARGO INVESTMENTS

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DLI	N: 93491321047880
TY 2019 Legal Fees Schedu	le			_
Nam	ne: LIPPMAN KA	NFER FOUNDATIO	N FOR LIVING	
	TORAH			
EI	: N: 46-1811101			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	19,465	0		0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491321047880
TY 2019 Other Decreases Scho	edule		
Name:	LIPPMAN KANI	FER FOUNDATION FOR LIVING	ì
	TORAH		
EIN:	46-1811101		
De	escription		Amount
UNREALIZED GAIN/LOSS			443,090

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491321047880	
TY 2019 Other Expenses Sch	edule				
Name	: LIPPMAN KANFE	ER FOUNDATION	FOR LIVING		
	TORAH				
EIN: 46-1811101					
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
INSURANCE EXPENSE	1,147	0		0	
APPLYING JEWISH WISDOM INITIATIVE EXPENSES	68,453	0		0	
PRIZE COMPETITION EXPENSES	117,221	0		0	

20,448

8,450 340 0

PROFESSIONAL STAFF DEVELOPMENT EXPENSES

DUES & SUBSCRIPTIONS

FILING FEES

Name: LIPPMAN KANFER FOUNDATION FOR LIVING

PARTNERSHIP INCOME

TORAH

EIN: 46-1811101

Other Income Schedule				
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income	
	Expenses i el Books	2 neonie		

7,062

36,347

7,062

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		D	LN: 93491321047880			
TY 2019 Other Liabilities Schedule							
Name:	Name: LIPPMAN KANFER FOUNDATION FOR LIVING						
	TORAH						
EIN:	46-1811101						
Description	n		Beginning of Year - Book Value	End of Year - Book Value			
CHECKS ISSUED IN EXCESS OF CASH			0	39,451			

efile GRAPHIC print - DO NOT PROC	CESS As Filed Data	-	DLI	N: 93491321047880				
TY 2019 Other Professional Fees Schedule								
Name: LIPPMAN KANFER FOUNDATION FOR LIVING								
	TORAH							
EIN: 46-1811101								
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
10057 10 (7000 5550	1			_ 1				
ASSET ADVISOR FEES	69,988	69,988		0				
CONSULTING FEES	7,577	69,988		0				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	D	LN: 93491321047880				
TY 2019 Taxes Schedule								
Name: LIPPMAN KANFER FOUNDATION FOR LIVING								
	TORAH							
EIN:	46-1811101							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
FOREIGN TAXES PAID	17,016	17,016		0				