efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491306010251

OMB No. 1545-0052

2020

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
or	caler	ndar year 2020, or tax year b	eginning 01-01-20)20 , aı	nd en	ding 12-31-	2020	
		indation				A Employer ide	entification numbe	r
TH	IE WEIS	S FAMILY FOUNDATION				82-2287833		
		street (or P.O. box number if mail is not o	delivered to street address)	Room/suite		B Telephone nui	mber (see instruction	
1	999 CIR	CLE DRIVE NO B				(216) 464-0540	,	,
		, state or province, country, and ZIP or for	eign postal code		-			
CLE,	/ELAND	, OH 44106				C If exemption	application is pendin	g, check here
G CI	neck al	l that apply: $\ \square$ Initial return	\square Initial return of a	former public charity		D 1. Foreign org	ganizations, check he	re
		Final return	Amended return				ganizations meeting k here and attach col	
		Address change				·		· _
1 CI	neck ty	pe of organization: 🗹 Section 501	l(c)(3) exempt private				indation status was t n 507(b)(1)(A), chec	
		n 4947(a)(1) nonexempt charitable tr		e private foundation				
		(et value of all assets at end irom Part II, col. (c),		✓ Cash ☐ Accru	ıal		tion is in a 60-month n 507(b)(1)(B), chec	
		▶¢ 11 274 353	☐ Other (specify) Part I, column (d) must	he on cash hasis)			(-)(-)(-),	
				T			r	Т
Pa	rt I	Analysis of Revenue and Ex of amounts in columns (b), (c), and (d)	•	(a) Revenue and	(b)	Net investment	(c) Adjusted net	(d) Disbursements for charitable
		equal the amounts in column (a) (see in		expenses per books		income	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., re	ceived (attach					, , , , , ,
		schedule)		1,700,000				
	2	Check ► ✓ if the foundation is not						
	3	Sch. B		29	9	29	29	
	4	Dividends and interest from securiti		48,60:	1	48,601	48,601	
	5a	Gross rents						
	b	Net rental income or (loss)						
<u>e</u>	6a	Net gain or (loss) from sale of asset	ts not on line 10	-12,000,88	1			
Revenue	b	Gross sales price for all assets on li	ne 6a 11,643,360					
æ	7	Capital gain net income (from Part				0		
	8	Net short-term capital gain						
	9	Income modifications						
	10a	Gross sales less returns and allowa	nces					
	b	Less: Cost of goods sold	-					
	C	Gross profit or (loss) (attach schedu	ule)					
	11	Other income (attach schedule)						
	12			-10,252,25		48,630	<u>'</u>	
	13	Compensation of officers, directors,	,		טן	0	0	(
. ^	14 15	Other employee salaries and wages Pension plans, employee benefits						
Se	16a	Legal fees (attach schedule)						
<u></u>	ь	Accounting fees (attach schedule)		19,300		9,650	9,650	9,650
Ä		Other professional fees (attach sche		99,046		57,233	<u>'</u>	, , , , , , , , , , , , , , , , , , ,
Operating and Administrative Expenses	17	Interest	ŕ	32,910	1	3.,230	1 . ,	. =,520
IIat	18	Taxes (attach schedule) (see instru						
<u> </u>	19	Depreciation (attach schedule) and	•					
Ē	20	Occupancy						
Ă	21	Travel, conferences, and meetings						
anc	22	Printing and publications						
<u>5</u> .	23	Other expenses (attach schedule)		45,558	8	254	254	45,304
≣	24	Total operating and administrat	ive expenses.					
<u>p</u>		Add lines 13 through 23		163,904	4	67,137	67,137	96,76
\supset	25	Contributions, gifts, grants paid		3,675,500				3,675,500
	26	Total expenses and disbursement 25	nts. Add lines 24 and	3,839,404	4	67,137	67,137	3,772,26
	27	Subtract line 26 from line 12:				,,	,-5/	
	а	Excess of revenue over expense	s and	14.004.65	_			
	b	disbursements Net investment income (if negati	ve, enter -0-)	-14,091,655	1	0		
	c	Adjusted net income (if negative,	•		1	0	0	
	i .			I .	1		ı	I

Page 2

11,274,353

	_				
		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 ▶			
\mathbf{z}	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
¥	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	22,130,295	432,082	1,268,203
	C	Investments—corporate bonds (attach schedule)	1,259,849	343,872	363,051
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			

23,480,658

25,396,942

-1.916.284

23,480,658

23,480,658

10,419,053

25,396,942

-14.977.889

10,419,053

10,419,053

2

3

4

5

6

23,480,658

-14,091,655

1,030,050 10,419,053

10,419,053

Form **990-PF** (2020)

investments corporate stock (attach senedale)	
Investments—corporate bonds (attach schedule)	
Investments—land, buildings, and equipment: basis ▶	
Less: accumulated depreciation (attach schedule) ▶	
Investments—mortgage loans	
Investments—other (attach schedule)	
Land, buildings, and equipment: basis ▶	
Less: accumulated depreciation (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 FASB ASC 958, check here 🕨 🗹

Retained earnings, accumulated income, endowment, or other funds

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

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Total net assets or fund balances (see instructions) . . .

Foundations that follow FASB ASC 958, check here

Capital stock, trust principal, or current funds

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

Form 990-PF (2020)

14

15

16

17 18

19

20

21

22 23

24

25

26

27

28

29

30

Part III

2

Liabilities

Net Assets or Fund Balances

Other assets (describe > _

Other liabilities (describe ...

Grants payable

instructions. Also, see page 1, item I) Accounts payable and accrued expenses .

Deferred revenue

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions .

and complete lines 26 through 30.

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶

Net assets with donor restrictions .

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

I GICEV	- Capital Sallis and E	COSCO IO. IUX OII IIIVCS	tillelie zileoille				
		kind(s) of property sold (e.g., se; or common stock, 200 sh		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1 a KEY	'BANK			Р	2020-06-30	2020-12-31	
b KEY	'BANK			Р	2019-06-30	2020-12-31	
c PAR	TY CITY			Р	2018-04-06	2020-11-19	
d PAR	RTY CITY			Р	2018-04-06	2020-11-19	
e							
	(e) (f) Depreciation allowed (or allowable)		(g) Cost or other basis plus expense of sale		(h) Gain or (loss) (e) plus (f) minus (g)		
a	21,370			20,016		1,354	
b	3,439,626			2,135,175		1,304,451	
С	2,993,548			1,495,050		1,498,498	
d	5,188,816			19,994,000		-14,805,184	
e							
Cor	mplete only for assets show	ing gain in column (h) and ow	ned by the foundation	on 12/31/69	(
F	(i) (j) F.M.V. as of 12/31/69 Adjusted basis as of 12/31/69		Excess	(k) s of col. (i) l. (j), if any	Gains (Col. (col. (k), but not	h) gain minus less than -0-) or om col.(h))	
а						1,354	
b						1,304,451	
С С						1,498,498	
d						-14,805,184	
						, , , <u>, , , , , , , , , , , , , , , , </u>	
3 Ne	gain, also enter in Part I, lir	et capital loss) (loss) as defined in sections le 8, column (c) (see instructi	. ,	Part I, line 7	2	-12,000,881	
in	Part I, line 8			\cdots	3	1,354	
Part V	Oualification Under	Section 4940(e) for Re	educed Tax on Net	Investment Inc	ome		
SECTION	<u> </u>	ON DECEMBER 20, 2019					
1 Res		511 5202115211 20, 2013	201101 001112				
	(a)	(b)	(c)		(d)		
	Reserved	Reserved	Reserved		Reserved		
2 Rese	erved			2			
3 Res	erved						
				3]		
				4	1		
5 Res	erved			5			
6 Res	erved			6			
7 Resi	erved			<u> </u>			
				<u></u>	<u> </u>		
o Kes	erved ,			8			

							<u>'</u>	age v
Par		ling Activities for Which	Form 4720 May Be	Required (continued	1)			
ia	During the year did the foundation						Yes	No
	(1) Carry on propaganda, or otherv	vise attempt to influence legisl	ation (section 4945(e))?	Yes	✓ No	,		
	(2) Influence the outcome of any s	pecific public election (see sec	tion 4955); or to carry					
	on, directly or indirectly, any vo	ter registration drive?		· · · Yes	✓ No	,		
	(3) Provide a grant to an individual	for travel, study, or other sim	ilar purposes?		✓ No			
	(4) Provide a grant to an organization	ion other than a charitable, etc	c., organization described					
	in section 4945(d)(4)(A)? See i	nstructions		· · 🗌 Yes	✓ No	,		
	(5) Provide for any purpose other t	han religious, charitable, scien	tific, literary, or					
	educational purposes, or for the	prevention of cruelty to child	ren or animals?	· ·	✓ N			
b	If any answer is "Yes" to $5a(1)-(5)$,	did any of the transactions fa	ail to qualify under the ex	ceptions described in		´		
	Regulations section 53.4945 or in a	current notice regarding disas	ter assistance? See instr	ructions		5b		
	Organizations relying on a current r	otice regarding disaster assist	ance check here					
C	If the answer is "Yes" to question 5	a(4), does the foundation clair	n exemption from the					
	tax because it maintained expenditu	ure responsibility for the grant	?	· · 🔲 Yes	□ No			
	If "Yes," attach the statement requi	red by Regulations section 53.	4945-5(d).	□ 1es		'		
a	Did the foundation, during the year,	, receive any funds, directly or	indirectly, to pay premi	ums on				
b	Did the foundation, during the year,	, pay premiums, directly or inc	lirectly, on a personal be		. ✓ No	6b		No
	If "Yes" to 6b, file Form 8870.	, , ,	,, 1					
'a	At any time during the tax year, wa	s the foundation a party to a r	prohibited tax shelter tra	nsaction?				
	If "Yes", did the foundation receive			∟ res	✓ No	7b		
	Is the foundation subject to the sec				•	1.5		
	excess parachute payment during the	, , , ,						
		<u> </u>			✓ No		<u> </u>	<u> </u>
Par	and Contractors	Officers, Directors, Trust	tees, Foundation Ma	anagers, Hignly Paid	I Emp	ioyees,		
1	List all officers, directors, truste							
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans		e) Expen		
	. ,	devoted to position	· -0-)	deferred compensatio		other al	llowand	ces
ee A	Additional Data Table							
]						
		1						
		1						
		1						
2	Compensation of five highest-pa	id employees (other than t	hose included on line :	1—see instructions). If	none,	enter "	NONE	."
				(d) Contributions to				
a) [Name and address of each employee	paid (b) Title, and average hours per week	(c) Compensation	employee benefit) Expens		
	more than \$50,000	devoted to position	(c) compensation	plans and deferred compensation		other all	owanc	es
ONE	=			Compensation				
ONE	=							
ota	I number of other employees paid ov	er \$50,000 						- (
					F	orm 99 0	N-DE	(2020

Form 990-PF (2020)		Page 7
Part VIII Information About Officers, Directors, Truste and Contractors (continued)	es, Foundation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional se	ervices (see instructions). If none, enter "NOI	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
FIVE FORTY MANAGEMENT LLC	MANAGEMENT FEES	83,625
1999 CIRCLE DRIVE SUITE B		
CLEVELAND, OH 44106		_
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	la valaviant statistical information and as the minutes of	
organizations and other beneficiaries served, conferences convened, research papers		Expenses
1 DISTRIBUTION OF FUNDS TO NUMEROUS CHARITABLE ORGANIZATION	DNS.	3,675,500
2		_
3		
4		
Part IX-B Summary of Program-Related Investments (s	see instructions)	
Describe the two largest program-related investments made by the foundation dur	•	Amount
1		
2		
All other program-related investments. See instructions.		
3		
⁻		
Total. Add lines 1 through 3		0
		Form 990-PF (2020)

1a

1b

2

За 3h

4

5

3,772,267

3.772.267

3.772.267

Form 990-PF (2020)

Part XII

1

2

3

4

5

b

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

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

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

519.746

Form **990-PF** (2020)

Page 9

Par	t X	•	ι

Form 990-PF (2020) Jndistributed Income (see instructions)

Distributable amount for 2020 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2020:

a Enter amount for 2019 only.

3 Excess distributions carryover, if any, to 2020:

a From 2015. **b** From 2016. c From 2017. . . . d From 2018. e From 2019.

10.123

2,585,258 f Total of lines 3a through e. 4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$

a Applied to 2019, but not more than line 2a **b** Applied to undistributed income of prior years

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

6 Enter the net total of each column as

b Prior years' undistributed income. Subtract 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 2019. Subtract line 4a from line 2a. Taxable amount—see instructions f Undistributed income for 2021. 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 2015 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2021.

10 Analysis of line 9: a Excess from 2016. . . **b** Excess from 2017. .

c Excess from 2018. . . .

d Excess from 2019. . . e Excess from 2020. . .

Subtract lines 7 and 8 from line 6a

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

indicated below:

(Election required—see instructions).

c Treated as distributions out of corpus (Election

required—see instructions).

d Applied to 2020 distributable amount. . . .

e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2020.

10.123

2,585,258

3,252,521

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

3,252,521

2,595,381

5,847,902

5,847,902

(a)

Corpus

(b)

Years prior to 2019

(c)

2019

Form

h

Form **990-PF** (2020)

990-PF (2020)					Page 10
rt XIV Private Operating Founda	ations (see instr	uctions and Part V	/II-A, question 9)		
f the foundation has received a ruling or dete foundation, and the ruling is effective for 202					
Check box to indicate whether the organization	on is a private opera	ating foundation des	cribed in section \Box	4942(j)(3) or] 4942(j)(5)
Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
income from Part I or the minimum nvestment return from Part X for each	(a) 2020	(b) 2019	(c) 2018	(d) 2017	(e) Total
rear listed					
Qualifying distributions from Part XII, ine 4 for each year listed					
Amounts included in line 2c not used lirectly for active conduct of exempt activities					
Qualifying distributions made directly or active conduct of exempt activities. Subtract line 2d from line 2c					
omplete 3a, b, or c for the ulternative test relied upon:					
Assets" alternative test—enter: 1) Value of all assets					
2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
Endowment" alternative test— enter 2/3					

3 h of minimum investment return shown in Part X, line 6 for each year listed. "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 Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.) Information Regarding Foundation Managers: 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). (See section 507(d)(2).)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. 2

MRS. MARY KAY INCANDELA WRITTEN FORM-PROVIDE AS MUCH INFORMATION AS POSSIBLE TO SUPPORT A CHARITABLE DEDUCTION.

unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under

b The form in which applications should be submitted and information and materials they should include:

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

other conditions, complete items 2a, b, c, and d. See instructions

Check here ▶ 🔲 if the foundation only makes contributions to preselected charitable organizations and does not accept

factors: MRS. MARY KAY INCANDELA DOES NOT GRANT SCHOLARSHIPS TO INDIVIDUALS.

MRS. MARY KAY INCANDELA NONE

MRS MARY KAY INCANDELA 1999 CIRCLE DRIVE SUITE B CLEVELAND, OH 44106 (216) 464-0540

c Any submission deadlines:

Form 990-PF (2020)	•			Page 11
Part XV Supplementary Informa	ation (continued)			
3 Grants and Contributions Paid	d During the Year or Appr	oved for Futur	re Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	3,675,500
b Approved for future payment				
Total		<u> </u>	▶ 3b	0

	I-A Analysis of Income-Producing s amounts unless otherwise indicated.		usiness income	Excluded by section	n 512, 513, or 514	(e)
	n service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
_			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	
b						
-	and contracts from government agencies					
	ership dues and assessments					
3 Interest investr	t on savings and temporary cash					
	nds and interest from securities.			14 14	29 48,601	
	ntal income or (loss) from real estate:			14	40,001	
	financed property.					
b Not d	lebt-financed property					
	ntal income or (loss) from personal property					
	nvestment income					
invento				18	-12,000,881	
9 Net inc	come or (loss) from special events:			10	12,000,001	
.0 Gross	profit or (loss) from sales of inventory					
	revenue: a					
ď						
e L 2 Subtot	al. Add columns (b), (d), and (e)		0		-11,952,251	
e 2 Subtot 3 Total.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)				-11,952,251 3	
e 2 Subtot 3 Total. (See w	al. Add columns (b), (d), and (e)	lations.)		1		
e 2 Subtot 3 Total. (See w Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e 2 Subtot 3 Total. (See w Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e 2 Subtot 3 Total. (See w Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e 2 Subtot 3 Total. (See w Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e 2 Subtot 3 Total. (See w Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e 2 Subtot 3 Total. (See w Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e 2 Subtot 3 Total. (See w Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e 2 Subtot 3 Total. (See w Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e 2 Subtot 3 Total. (See w Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e 2 Subtot 3 Total. (See w Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	
e	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) IE Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3uted importantly to	-11,952,251

orm 9	90-PF (<u> </u>											Pa	ge 13
Par	: XVII	Information Re Exempt Organia		ansf	fers To a	nd Transac	ction	s and	Relatio	nships With No	ncharita	able		
		ganization directly or in- than section 501(c)(3)									on 501		Yes	No
. ,	•	from the reporting foun	-	•		-		-			-			
						, ,					.	1a(1)		No
-		rassets										1a(2)		No
b Otl	her tran	sactions:												
(1) Sales	of assets to a nonchari	table exempt	orga	nization.							1b(1)		No
(2) Purch	nases of assets from a n	oncharitable	exem	pt organiz	ation					[1b(2)		No
(3) Renta	al of facilities, equipmer	nt, or other as	sets.							[1b(3)		No
(4) Reim	bursement arrangemen	ts									1b(4)		No
(5) Loan:	s or loan guarantees.									. [1b(5)		No
(6) Perfor	mance of services or m	embership or	fund	raising soli	citations					. [1b(6)		No
c Sh	aring of	f facilities, equipment, n	nailing lists, o	thera	assets, or _l	paid employe	es				. [1c		No
of in	the goo any trai	wer to any of the above ds, other assets, or serv nsaction or sharing arra	vices given by ngement, sho	the win	reporting f column (d	oundation. If) the value of	the fo	oundatio goods, ot	n receive ther asse	ed less than fair mar ts, or services recei	ket value ved.	!		
(a) Lin	e No.	(b) Amount involved	(c) Name of	noncha	aritable exen	npt organization	1	(d) Des	cription of	transfers, transactions	, and shari	ng arra	ngemen	its
	-						+							
							+							
							_							
							+							
							+							
	-						+							
							+							
2a Is	the foui	ndation directly or indire	ectly affiliated	with	, or related	d to, one or m	ore ta	ax-exem	pt organ	izations	_			
de	scribed	in section 501(c) (other	than section	501(c)(3)) or ii	n section 527	?			□ ʏ	es 🔽	No		
b If	'Yes," c	omplete the following so	chedule.											
		(a) Name of organization	n		(b) Type of organ	ization	1		(c) Description	n of relation	nship		
o'	of m	er penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, co								ased on a	ıİl infor	mation	n of
Sign	1	*****				2021-11-01		*	****		May the return	IRS di	scuss th	nis
Here	. (— b-			with the	e prepa	rer shov	wn
	 	Signature of officer or to	rustee			Date		7 T	itle		below (see ins	str.) 🗸	Yes [□ _{No}
		Print/Type preparer's	name	Prepa	arer's Sign	ature		Date			PTIN			
										Check if self-	F	00304	380	
		JOSEPH SILVAGGI	O CPA					2021-	11-01	employed ▶ ☐	,	,,,,,,		
Paid														
	oarer Only		TIN BARTELL	& FIT	ZGERALD	LTD					Firm's EI	N ▶34	-17488	361
	•		01 EAST NIN	TH ST	TREET STE	920								
		CL	EVELAND, OF	H 441	114						Phone no	. (216) 621-	1180
			,, •							l I				

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

			Compensation	
ZEV WEISS	DIRECTOR	0	0	C
1999 CIRCLE DRIVE SUITE B CLEVELAND, OH 44106	1.00			
MORRY WEISS	DIRECTOR	0	0	C
1999 CIRCLE DRIVE SHITE B	1.00			

1999 CIRCLE DRIVE SUITE B CLEVELAND, OH 44106	1.00			
MORRY WEISS	DIRECTOR	0	0	0
1999 CIRCLE DRIVE SUITE B CLEVELAND, OH 44106	1.00			

1999 CIRCLE DRIVE SUITE B CLEVELAND, OH 44106	1.00			
JEFFREY WEISS	DIRECTOR	0	0	0
1999 CIRCLE DRIVE SUITE B CLEVELAND, OH 44106	1.00			
CARY WEICE	DIRECTOR	0	0	0

JEFFREY WEISS	DIRECTOR 1.00	0	0	0
1999 CIRCLE DRIVE SUITE B CLEVELAND, OH 44106				
GARY WEISS	DIRECTOR 1.00	0	0	0
1999 CIRCLE DRIVE SUITE B CLEVELAND, OH 44106				
ELIE WEISS	DIRECTOR	0	0	0

		_	_	_
1999 CIRCLE DRIVE SUITE B CLEVELAND, OH 44106	DIRECTOR 1.00			
ELIE WEISS		0	0	0
1999 CIRCLE DRIVE SUITE B CLEVELAND, OH 44106	DIRECTOR 1.00			
GARY WEISS		0	0	0

·				
ELIE WEISS	DIRECTOR	0	0	0
1999 CIRCLE DRIVE SUITE B CLEVELAND, OH 44106	1.00			
MARY KAY INCANDELA	DIRECTOR	0	0	0
1000 CIRCLE DRIVE CUITE D	2.00			

1999 CIRCLE DRIVE SUITE B CLEVELAND, OH 44106	1.00			
MARY KAY INCANDELA	DIRECTOR	0	0	0
1999 CIRCLE DRIVE SUITE B	2.00			

MARY KAY INCANDELA	DIRECTOR	0	0	
1999 CIRCLE DRIVE SUITE B CLEVELAND, OH 44106	2.00			
·				

DIRECTOR 1.00

JUDITH STONE WEISS

1999 CIRCLE DRIVE SUITE B CLEVELAND, OH 44106

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

recipient

▶ 3a

3,675,500

any foundation manager

or substantial contributor

Name and address (home or business)

	or substantial contributor		
a Paid during the year			
AISH HATORAH 14077 CEDAR ROAD SUITE 7 CLEVELAND, OH 44118	NONE	EDUCATIONAL SUPPORT	1,000
AKIFIM FAMILY ENRICHMENT	NONE	COMMUNITY OUTREACH	3,500

AKIFIM FAMILY ENRICHMENT 1715 51ST STREET BROOKLYN, NY 11204	NONE	COMMUNITY OUTREACH	
ALEHPO BOX 36163	NONE	COMMUNITY OUTREACH	

1715 51ST STREET BROOKLYN, NY 11204			
ALEHPO BOX 36163 JERUSALEM 9361 IS	NONE	COMMUNITY OUTREACH	1,000

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 Dated dissipated the access

a Paid during the year			
AMERICAN FRIENDS OF ERETZ HEMDAH INSTITUTIONS 8 SOUTH MICHIGAN AVENUE SUITE 605		EDUCATIONAL SUPPORT	5,000
CHICAGO, IL 60603			

CHICAGO, IL 60603			
AMERICAN FRIENDS OF MAGEN DAVID ADAM 3300 PGA BOULEVARD SUITE 970	NONE	COMMUNITY OUTREACH	

Total .

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

ADAM 3300 PGA BOULEVARD SUITE 970 PALM BEACH GARDENS, FL 33410	NONE	COMMONITY OUTREACT	10,000
AMERICAN FRIENDS OF SHALVA	NONE	EDUCATIONAL SUPPORT	4,500

10 000

3,675,500

PALM BEACH GARDENS, FL 33410			
AMERICAN FRIENDS OF SHALVA 315 FIFTH AVENUE 6TH FLOOR NEW YORK, NY 10016	NONE	EDUCATIONAL SUPPORT	4,500

AMERICAN FRIENDS OF SHALVA B15 FIFTH AVENUE 6TH FLOOR NEW YORK, NY 10016	NONE	EDUCATIONAL SUPPORT	4,500

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

recipient

3,675,500

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year			
AMERICAN FRIENDS OF YESHIVAT KOL TZOFAVICH 46 LYMAN STREET SHAKER HEIGHTS, OH 44122	NONE	EDUCATIONAL SUPPORT	25,000
B'NET AKTVA OF HE AND CANADA	NONE	EDITOATIONAL SUBBORT	15 000

SHARER HEIGHTS, OH 44122			
B'NEI AKIVA OF US AND CANADA 4520 8TH AVENUE 15TH FLOOR NEW YORK, NY 10018	NONE	EDUCATIONAL SUPPORT	15,000
CAMP STONE2463 S GREEN	NONE	EDUCATIONAL SUPPORT	60,000

4520 8TH AVENUE 15TH FLOOR NEW YORK, NY 10018	NONE	EDUCATIONAL SOFT ORT	13,000
CAMP STONE2463 S GREEN	NONE	EDUCATIONAL SUPPORT	60,000

NEW YORK, NY 10018			
CAMP STONE2463 S GREEN BEACHWOOD, OH 44122	NONE	EDUCATIONAL SUPPORT	60,000

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 contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year

Total .

CHARAD OF DALM BEACH CARDENC	NONE	COMMUNITY OUTDER OU	500
CENTRAL FUND OF ISRAEL 980 6TH AVENUE NEW YORK, NY 10018	NONE	COMMUNITY OUTREACH	1,000
	<u> </u>		

CHABAD OF PALM BEACH GARDENS 100 PGA BOULEVARD ALM BEACH GARDENS, FL 33418	NONE	COMMUNITY OUTREACH	500
CHAI LIFELINE106 CLIFTON AVENUE	NONE	EDUCATIONAL SUPPORT	500

3,675,500

■ 3a

PALM BEACH GARDENS, FL 33418			
CHAI LIFELINE106 CLIFTON AVENUE LAKEWOOD, NJ 08701	NONE	EDUCATIONAL SUPPORT	500

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			
CLEVELAND CLINIC FOUNDATION 9500 EUCLID AVENUE UA3-315 CLEVELAND, OH 44195	NONE	COMMUNITY OUTREACH	200,000

9500 EUCLID AVENUE UA3-315 CLEVELAND, OH 44195			·
CROSSROADS8TH AVENUE FL 20 NEW YORK, NY 10018	NONE	EDUCATIONAL SUPPORT	4,500

CROSSROADS8TH AVENUE FL 20 NEW YORK, NY 10018	NONE	EDUCATIONAL SUPPORT	4,500
FRIENDS OF YAD LAKASHISPO BOX 494 ENGLEWOOD, NJ 07631	NONE	EDUCATIONAL SUPPORT	3,500

NEW YORK, NY 10018			i .
FRIENDS OF YAD LAKASHISPO BOX 494 ENGLEWOOD, NJ 07631	NONE	EDUCATIONAL SUPPORT	3,500

3,675,500

RIENDS OF YAD LAKASHISPO BOX 494	NONE	EDUCATIONAL SUPPORT	3,50
NGLEWOOD, NJ 07631			

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

Name and address (home or business)

Traine and dadress (nome or pasiness)	or substantial contributor		
a Paid during the year			
FUCHS MIZRACHI 26600 SHAKER BOULEVARD	NONE	EDUCATIONAL SUPPORT	13,574

recipient

BEACHWOOD, OH 44122			
GREEN ROAD SYNAGOGUE 2437 SHAKER BOULEVARD BEACHWOOD, OH 44122	NONE	COMMUNITY OUTREACH	3,049,496

2437 SHAKER BOULEVARD BEACHWOOD, OH 44122			
HEBREW ACADEMY OF CLEVELAND 1860 TAYLOR RD CLEVELAND HTS, OH 44118	NONE	EDUCATIONAL SUPPORT	4,180

Total		 ▶ 3a	3,675,500
HEBREW ACADEMY OF CLEVELAND 1860 TAYLOR RD CLEVELAND HTS, OH 44118	NONE	EDUCATIONAL SUPPORT	4,180
BEACHWOOD, OH 44122			

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			
KOL HANEARIM INC 220 WEST 26TH STREET APT 604 NEW YORK, NY 10001	NONE	EDUCATIONAL SUPPORT	1,000
		 1	

NEW YORK, NY 10001			
MIDRESHET DARKAYNU 49 W 45TH STREET SUITE 701 NEW YORK, NY 40036	NONE	EDUCATIONAL SUPPORT	1,000

49 W 45TH STREET SUITE 701 NEW YORK, NY 40036	NONE	EDUCATIONAL SOFT ORT	1,000
OU-JLIC11 BROADWAY	NONE	EDUCATIONAL SUPPORT	10,000

NEW YORK, NY 40036			
OU-JLIC11 BROADWAY NEW YORK, NY 10004	NONE	EDUCATIONAL SUPPORT	10,000

3,675,500

■ 3a

OU-JLIC11 BROADWAY NEW YORK, NY 10004	NONE	EDUCATIONAL SUPPORT	10,00
			í

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			
PEF ISRAEL ENDOWMENT FUND 630 THIRD AVENUE STE 1501 NEW YORK, NY 10017	NONE	COMMUNITY OUTREACH	13,500

SAINT MARTIN DE PORRES HIGH SCHOOL 6202 ST CLAIR AVENUE CLEVELAND, OH 44103	NONE	EDUCATIONAL SUPPORT	5,000
SESAME STREET	NONE	EDUCATIONAL SUBBORT	10.000

6202 ST CLAIR AVENUE CLEVELAND, OH 44103			
SESAME STREET 1900 BROADWAY AVENUE	NONE	EDUCATIONAL SUPPORT	10,000

CLEVELAND, OH 44103			
SESAME STREET 1900 BROADWAY AVENUE NEW YORK, NY 10023	NONE	EDUCATIONAL SUPPORT	10,000

SESAME STREET 1900 BROADWAY AVENUE NEW YORK, NY 10023	NONE	EDUCATIONAL SUPPORT	10,00
Total		 ▶ 3a	3,675,500

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			
SHELTERS FOR ISRAELPO BOX 17324 BEVERLY HILLS, CA 90209	NONE	COMMUNITY OUTREACH	1,500
STANDING TOGETHER	NONE	COMMUNITY OUTREACH	2,500

ANDING TOGETHER FLORENCE STREET REAT NECKS, NY 11023	NONE	COMMUNITY OUTREACH

20 FLORENCE STREET GREAT NECKS, NY 11023	NONE	COMMUNITY OUTREACH	2,
THE NEW SCHOOL	NONE	EDUCATIONAL SUPPORT	80.

GREAT NECKS, NY 11023			
THE NEW SCHOOL 79 FIFTH AVENUE 17TH FLOOR NEW YORK, NY 10003	NONE	EDUCATIONAL SUPPORT	80,000

THE NEW SCHOOL 79 FIFTH AVENUE 17TH FLOOR NEW YORK, NY 10003	NONE	EDUCATIONAL SUPPORT	80,000
Total		▶ 3a	3,675,500

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

a Paid during the year			
THE WASHINGTON INSTITUTE FOR NEAR EAST POLICY 1111 19TH STREET NW SUITE 500 WASHINGTON, DC 20036	NONE	COMMUNITY OUTREACH	25,000

WASHINGTON, DC 20036			
CAMP KOBY 36 PEARSALL AVENUE SUITE 1 CEDARHURST, NY 11516	NONE	EDUCATIONAL SUPPORT	4,500

36 PEARSALL AVENUE SUITE 1 CEDARHURST, NY 11516	NONE	EDUCATIONAL SUPPORT	4,500
CLEVELAND INSTITUTE OF ART 11610 EUCLID AVENUE CEDARHURST OH 44106	NONE	EDUCATIONAL SUPPORT	2,500

3a

3,675,500

CEDARHURST, NY 11516			
CLEVELAND INSTITUTE OF ART 11610 EUCLID AVENUE CEDARHURST, OH 44106	NONE	EDUCATIONAL SUPPORT	2,500

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
FRIENDS OF ISRAEL DEFENSE FORCES	NONE		COMMUNITY OUTREACH	30,000

POP BOX 999 WALLED LAKE, MI 48390			
FRIENDS OF YAD SARAH INC 455 PARK AVENUE SUITE 1702 NEW YORK, NY 10022	NONE	EDUCATIONAL SUPPORT	5,000

FRIENDS OF YAD SARAH INC 455 PARK AVENUE SUITE 1702 NEW YORK, NY 10022	NONE	EDUCATIONAL SUPPORT	5,000
HILLEL FOUNDATION 11303 EUCLID AVENUE CLEVELAND, OH 44106	NONE	EDUCATIONAL SUPPORT	5,000

NEW YORK, NY 10022			
HILLEL FOUNDATION 11303 EUCLID AVENUE CLEVELAND, OH 44106	NONE	EDUCATIONAL SUPPORT	5,000

Total .

3,675,500

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

recipient

▶ 3a

3,675,500

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

or substantial contributor

Name and address (home or business)

a Paid during the year			
JEWISH EDUCATION CENTER 2030 SOUTH TAYLOR ROAD CLEVELAND HEIGHTS, OH 44118	NONE	EDUCATIONAL SUPPORT	3,000
JEWISH FAMILY EXPERIENCE	NONE	COMMUNITY OUTREACH	1,800

JEWISH FAMILY EXPERIENCE 23980 CHAGRIN BLVD SUITE 100 BEACHWOOD, OH 44122	NONE	COMMUNITY OUTREACH	1,8
JEWISH NATIONAL FUND	NONE	COMMUNITY OUTREACH	10,0

23980 CHAGRIN BLVD SUITE 100 BEACHWOOD, OH 44122			
JEWISH NATIONAL FUND 60 REVERE DRIVE SUITE 725	NONE	COMMUNITY OUTREACH	10,00

			1
JEWISH NATIONAL FUND 60 REVERE DRIVE SUITE 725 NORTHBROOK, IL 60062	NONE	COMMUNITY OUTREACH	10,000
			1

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

7,500

	or substantial contributor		
a Paid during the year			
LEUKEMIA & LYMPHOMA SOCIETY 611 OAK TREE BLVD SUITE 139 INDEPENDENCE, OH 44131	NONE	CANCER RESEARCH	500

1950 RICHMOND ROAD TR 205 LYNDHURST, OH 44124			
MEDWORKS	NONE	COMMUNITY OUTREACH	

Name and address (home or business)

LYNDHURST, OH 44124				
NEEMAN FOUNDATION 18 HAZELTON ROAD	NONE		COMMUNITY OUTREACH	3,50
NEWTON MA 024E0		1		1

Total		 ▶ 3a	3,675,500
NEEMAN FOUNDATION 18 HAZELTON ROAD NEWTON, MA 02459	NONE	COMMUNITY OUTREACH	3,500
LINDHURSI, OH 44124			

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

Name and address (home or business)

PALM BEACH, FL 33480

Total .

	or substantial contributor		
a Paid during the year			
NEW YORK UNIVERSITY- BRONFMAN CENTER 25 W 4TH STREET ROOM 405 NEW YORK, NY 10012	NONE	EDUCATIONAL SUPPORT	47,500
PJ LIBRARY67 HUNT STREET SUITE 100 AGAWAM, MA 01001	NONE	EDUCATIONAL SUPPORT	1,500

recipient

▶ 3a

3,675,500

25 W 4TH STREET ROOM 405 NEW YORK, NY 10012			
PJ LIBRARY67 HUNT STREET SUITE 100 AGAWAM, MA 01001	NONE	EDUCATIONAL SUPPORT	1,500
PALM BEACH SYNAGOGUE 120 NORTH COUNTY ROAD	NONE	COMMUNITY OUTREACH	1,450

efile GRAPHIC print - DO NOT PR	OCESS	As Filed Data	-	D	LN: 93491306010251		
TY 2020 Accounting Fees Schedule							
	Name:	THE WEISS I	FAMILY FOUND	ATION			
	ETNI.	02 2207022					
	EIN: 82-2287833						
Category	Amo	unt Ne	et Investment	Adjusted Net	Disbursements		
			Income	Income	for Charitable		
					Purposes		

9,650

19,300

ACCOUNTING FEE

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491306010251				
TV 2020 Investments Company	ta Banda Caba	ماريام					
TY 2020 Investments Corporate Bonds Schedule							
Name:	THE WEISS FAMI	LY FOUNDATION					
EIN:	82-2287833						

363,051

343,872

EIN: 82-2287833		
Investments Corporate Bonds Schedule		
Name of Bond	End of Year Book	End of Year Fair
	Value	Market Value

KEYBANK BONDS

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491306010251						
TV 2020 Investments Compounts Stock Schodule								
TY 2020 Investments Corporate Stock Schedule								
		*** = 0.11						
Name:	THE WEISS FAMI	ILY FOUNDATION						

1,268,203

432,082

Name:	THE WEISS FAMILY FOUNDATION
EIN:	82-2287833

KEYBANK STOCK

Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491306010251		
TY 2020 Other Expenses Schedule						
Name:	THE WEISS FAM	ILY FOUNDATIO	N			
EIN:	82-2287833					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
BANK CHARGES	254	254	254	0		
EXCISE TAX	45,000	0	0	45,000		

STATE OF OHIO FEES

FILING FEE

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491306010251
TY 2020 Other Increases Sche	dule		
Name:	THE WEISS FA	AMILY FOUNDATION	
EIN:	82-2287833		
Other Increases Schedule			1
De	escription		Amount
CHANGE IN BOOK VALUE OF ASSET			1,030,050

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	-	DL	N: 93491306010251				
TY 2020 Other Professional Fees Schedule								
Name: THE WEISS FAMILY FOUNDATION								
EIN: 82-2287833								
Category	Amount	Net Investment	Adjusted Net	Disbursements				

EIN: 82-228/833					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
MANAGEMENT FEE	83,625	41,812	41,812	41,813	

15,421

15,421

15,421

INVESTMENT FEES