

For calendar year 2020, or tax year beginning 01-01-2020 , and ending 12-31-2020

|                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                        |                                                                                                                                                                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name of foundation<br>THE RUDOLPH J & DAPHNE A MUNZER FOUNDATION                                                                                                                                                                                                                                           |                                                                                                                                                                                                        | <b>A Employer identification number</b><br>33-0686779                                                                                                                                               |
| Number and street (or P.O. box number if mail is not delivered to street address)<br>3450 EAST SPRING STREET NO 216                                                                                                                                                                                        | Room/suite                                                                                                                                                                                             | <b>B Telephone number</b> (see instructions)<br>(562) 912-7732                                                                                                                                      |
| City or town, state or province, country, and ZIP or foreign postal code<br>LONG BEACH, CA 90806                                                                                                                                                                                                           |                                                                                                                                                                                                        | <b>C</b> If exemption application is pending, check here <input type="checkbox"/>                                                                                                                   |
| <b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Final return <input type="checkbox"/> Amended return<br><input type="checkbox"/> Address change <input type="checkbox"/> Name change |                                                                                                                                                                                                        | <b>D 1.</b> Foreign organizations, check here..... <input type="checkbox"/><br><b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/> |
| <b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation                                                   |                                                                                                                                                                                                        | <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ..... <input type="checkbox"/>                                                                          |
| <b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶\$ <u>99,367,674</u>                                                                                                                                                                                            | <b>J</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____<br>(Part I, column (d) must be on cash basis.) | <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ..... <input type="checkbox"/>                                                                       |

| Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</small> |                                                                                                             | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| Revenue                                                                                                                                                                            | <b>1</b> Contributions, gifts, grants, etc., received (attach schedule)                                     | 79,441,712                         |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B . . . . . |                                    |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>3</b> Interest on savings and temporary cash investments . . . . .                                       |                                    |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>4</b> Dividends and interest from securities . . . . .                                                   | 95,771                             | 95,771                    |                         |                                                             |
|                                                                                                                                                                                    | <b>5a</b> Gross rents . . . . .                                                                             |                                    |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>b</b> Net rental income or (loss) _____                                                                  |                                    |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>6a</b> Net gain or (loss) from sale of assets not on line 10                                             | -7,478,916                         |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>b</b> Gross sales price for all assets on line 6a<br>369,059,232                                         |                                    |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>7</b> Capital gain net income (from Part IV, line 2) . . . . .                                           |                                    | 0                         |                         |                                                             |
|                                                                                                                                                                                    | <b>8</b> Net short-term capital gain . . . . .                                                              |                                    |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>9</b> Income modifications . . . . .                                                                     |                                    |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>10a</b> Gross sales less returns and allowances                                                          |                                    |                           |                         |                                                             |
| Operating and Administrative Expenses                                                                                                                                              | <b>b</b> Less: Cost of goods sold . . . . .                                                                 |                                    |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>c</b> Gross profit or (loss) (attach schedule) . . . . .                                                 |                                    |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>11</b> Other income (attach schedule) . . . . .                                                          | 3,773                              | 3,773                     | 0                       |                                                             |
|                                                                                                                                                                                    | <b>12 Total.</b> Add lines 1 through 11 . . . . .                                                           | 72,062,340                         | 99,544                    | 0                       |                                                             |
|                                                                                                                                                                                    | <b>13</b> Compensation of officers, directors, trustees, etc.                                               | 0                                  | 0                         | 0                       | 0                                                           |
|                                                                                                                                                                                    | <b>14</b> Other employee salaries and wages . . . . .                                                       | 197,359                            | 19,736                    | 0                       | 177,623                                                     |
|                                                                                                                                                                                    | <b>15</b> Pension plans, employee benefits . . . . .                                                        | 52,615                             | 5,263                     | 0                       | 47,352                                                      |
|                                                                                                                                                                                    | <b>16a</b> Legal fees (attach schedule) . . . . .                                                           |                                    |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>b</b> Accounting fees (attach schedule) . . . . .                                                        | 27,900                             | 27,900                    | 0                       | 0                                                           |
|                                                                                                                                                                                    | <b>c</b> Other professional fees (attach schedule) . . . . .                                                | 441,761                            | 441,761                   | 0                       | 0                                                           |
|                                                                                                                                                                                    | <b>17</b> Interest . . . . .                                                                                |                                    |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>18</b> Taxes (attach schedule) (see instructions) . . . . .                                              | 10                                 | 10                        | 0                       | 0                                                           |
|                                                                                                                                                                                    | <b>19</b> Depreciation (attach schedule) and depletion . . . . .                                            |                                    |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>20</b> Occupancy . . . . .                                                                               | 15,170                             | 3,394                     | 0                       | 11,776                                                      |
|                                                                                                                                                                                    | <b>21</b> Travel, conferences, and meetings . . . . .                                                       | 261                                | 0                         | 0                       | 261                                                         |
|                                                                                                                                                                                    | <b>22</b> Printing and publications . . . . .                                                               |                                    |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>23</b> Other expenses (attach schedule) . . . . .                                                        | 40,148                             | 5,425                     | 0                       | 34,723                                                      |
|                                                                                                                                                                                    | <b>24 Total operating and administrative expenses.</b><br>Add lines 13 through 23 . . . . .                 | 775,224                            | 503,489                   | 0                       | 271,735                                                     |
|                                                                                                                                                                                    | <b>25</b> Contributions, gifts, grants paid . . . . .                                                       | 3,871,340                          |                           |                         | 3,871,340                                                   |
|                                                                                                                                                                                    | <b>26 Total expenses and disbursements.</b> Add lines 24 and 25                                             | 4,646,564                          | 503,489                   | 0                       | 4,143,075                                                   |
|                                                                                                                                                                                    | <b>27</b> Subtract line 26 from line 12:                                                                    |                                    |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>a Excess of revenue over expenses and disbursements</b>                                                  | 67,415,776                         |                           |                         |                                                             |
|                                                                                                                                                                                    | <b>b Net investment income</b> (if negative, enter -0-)                                                     |                                    | 0                         |                         |                                                             |
|                                                                                                                                                                                    | <b>c Adjusted net income</b> (if negative, enter -0-)                                                       |                                    |                           | 0                       |                                                             |

| Part II                     |                                                                                                                                            | Balance Sheets                                                                                                                    | Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.) | Beginning of year | End of year    |                       |
|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|-------------------|----------------|-----------------------|
|                             |                                                                                                                                            |                                                                                                                                   |                                                                                                                      | (a) Book Value    | (b) Book Value | (c) Fair Market Value |
| Assets                      | 1                                                                                                                                          | Cash—non-interest-bearing . . . . .                                                                                               |                                                                                                                      | 187,714           | 151,888        | 151,888               |
|                             | 2                                                                                                                                          | Savings and temporary cash investments . . . . .                                                                                  |                                                                                                                      | 524,454           | 2,177          | 2,177                 |
|                             | 3                                                                                                                                          | Accounts receivable ▶ _____<br>Less: allowance for doubtful accounts ▶ _____                                                      |                                                                                                                      |                   |                |                       |
|                             | 4                                                                                                                                          | Pledges receivable ▶ _____<br>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) ▶ _____<br>Less: allowance for doubtful accounts ▶ _____                       |                                                                                                                      |                   |                |                       |
|                             | 8                                                                                                                                          | Inventories for sale or use . . . . .                                                                                             |                                                                                                                      |                   |                |                       |
|                             | 9                                                                                                                                          | Prepaid expenses and deferred charges . . . . .                                                                                   |                                                                                                                      | 1,360             | 13,930         | 13,930                |
|                             | 10a                                                                                                                                        | Investments—U.S. and state government obligations (attach schedule)                                                               |                                                                                                                      |                   |                |                       |
|                             | b                                                                                                                                          | Investments—corporate stock (attach schedule) . . . . .                                                                           |                                                                                                                      | 17,817,892        | 99,190,512     | 99,190,512            |
|                             | c                                                                                                                                          | Investments—corporate bonds (attach schedule) . . . . .                                                                           |                                                                                                                      |                   |                |                       |
|                             | 11                                                                                                                                         | Investments—land, buildings, and equipment: basis ▶ _____<br>Less: accumulated depreciation (attach schedule) ▶ _____             |                                                                                                                      |                   |                |                       |
|                             | 12                                                                                                                                         | Investments—mortgage loans . . . . .                                                                                              |                                                                                                                      |                   |                |                       |
|                             | 13                                                                                                                                         | Investments—other (attach schedule) . . . . .                                                                                     |                                                                                                                      |                   |                |                       |
|                             | 14                                                                                                                                         | Land, buildings, and equipment: basis ▶ _____ 10,000<br>Less: accumulated depreciation (attach schedule) ▶ _____ 833              |                                                                                                                      | 4,375             | 9,167          | 9,167                 |
| 15                          | Other assets (describe ▶ _____)                                                                                                            |                                                                                                                                   |                                                                                                                      |                   |                |                       |
| 16                          | <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)                                         |                                                                                                                                   | 18,535,795                                                                                                           | 99,367,674        | 99,367,674     |                       |
| Liabilities                 | 17                                                                                                                                         | Accounts payable and accrued expenses . . . . .                                                                                   |                                                                                                                      | 35,616            | 138,627        |                       |
|                             | 18                                                                                                                                         | Grants payable . . . . .                                                                                                          |                                                                                                                      | 876,500           | 310,500        |                       |
|                             | 19                                                                                                                                         | Deferred revenue. . . . .                                                                                                         |                                                                                                                      |                   |                |                       |
|                             | 20                                                                                                                                         | Loans from officers, directors, trustees, and other disqualified persons                                                          |                                                                                                                      |                   |                |                       |
|                             | 21                                                                                                                                         | Mortgages and other notes payable (attach schedule) . . . . .                                                                     |                                                                                                                      |                   |                |                       |
|                             | 22                                                                                                                                         | Other liabilities (describe ▶ _____)                                                                                              |                                                                                                                      |                   |                |                       |
|                             | 23                                                                                                                                         | <b>Total liabilities</b> (add lines 17 through 22). . . . .                                                                       |                                                                                                                      | 912,116           | 449,127        |                       |
| Net Assets or Fund Balances | <b>Foundations that follow FASB ASC 958, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b> |                                                                                                                                   |                                                                                                                      |                   |                |                       |
|                             | 24                                                                                                                                         | Net assets without donor restrictions . . . . .                                                                                   |                                                                                                                      | 17,623,679        | 98,918,547     |                       |
|                             | 25                                                                                                                                         | Net assets with donor restrictions . . . . .                                                                                      |                                                                                                                      |                   |                |                       |
|                             | <b>Foundations that do not follow FASB ASC 958, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 26 through 30.</b>         |                                                                                                                                   |                                                                                                                      |                   |                |                       |
|                             | 26                                                                                                                                         | Capital stock, trust principal, or current funds . . . . .                                                                        |                                                                                                                      |                   |                |                       |
|                             | 27                                                                                                                                         | Paid-in or capital surplus, or land, bldg., and equipment fund                                                                    |                                                                                                                      |                   |                |                       |
|                             | 28                                                                                                                                         | Retained earnings, accumulated income, endowment, or other funds                                                                  |                                                                                                                      |                   |                |                       |
|                             | 29                                                                                                                                         | <b>Total net assets or fund balances</b> (see instructions) . . . . .                                                             |                                                                                                                      | 17,623,679        | 98,918,547     |                       |
|                             | 30                                                                                                                                         | <b>Total liabilities and net assets/fund balances</b> (see instructions) .                                                        |                                                                                                                      | 18,535,795        | 99,367,674     |                       |

| Part III Analysis of Changes in Net Assets or Fund Balances |                                                                                                                                                                    |              |
|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| 1                                                           | Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) . . . . . | 1 17,623,679 |
| 2                                                           | Enter amount from Part I, line 27a . . . . .                                                                                                                       | 2 67,415,776 |
| 3                                                           | Other increases not included in line 2 (itemize) ▶ _____                                                                                                           | 3 13,879,092 |
| 4                                                           | Add lines 1, 2, and 3 . . . . .                                                                                                                                    | 4 98,918,547 |
| 5                                                           | Decreases not included in line 2 (itemize) ▶ _____                                                                                                                 | 5 0          |
| 6                                                           | Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29.                                                               | 6 98,918,547 |

Part IV Capital Gains and Losses for Tax on Investment Income

|                                                                                                                                                                                                    |                                               |                                                                                     |                                                                                                   |                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------|
| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)                                                                 |                                               | (b)<br>How acquired<br>P—Purchase<br>D—Donation                                     | (c)<br>Date acquired<br>(mo., day, yr.)                                                           | (d)<br>Date sold<br>(mo., day, yr.) |
| 1 a PUBLICLY TRADED SECURITIES                                                                                                                                                                     |                                               |                                                                                     |                                                                                                   |                                     |
| b                                                                                                                                                                                                  |                                               |                                                                                     |                                                                                                   |                                     |
| c                                                                                                                                                                                                  |                                               |                                                                                     |                                                                                                   |                                     |
| d                                                                                                                                                                                                  |                                               |                                                                                     |                                                                                                   |                                     |
| e                                                                                                                                                                                                  |                                               |                                                                                     |                                                                                                   |                                     |
| (e)<br>Gross sales price                                                                                                                                                                           | (f)<br>Depreciation allowed<br>(or allowable) | (g)<br>Cost or other basis<br>plus expense of sale                                  | (h)<br>Gain or (loss)<br>(e) plus (f) minus (g)                                                   |                                     |
| a 369,059,232                                                                                                                                                                                      |                                               | 376,538,148                                                                         | -7,478,916                                                                                        |                                     |
| b                                                                                                                                                                                                  |                                               |                                                                                     |                                                                                                   |                                     |
| c                                                                                                                                                                                                  |                                               |                                                                                     |                                                                                                   |                                     |
| d                                                                                                                                                                                                  |                                               |                                                                                     |                                                                                                   |                                     |
| e                                                                                                                                                                                                  |                                               |                                                                                     |                                                                                                   |                                     |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69                                                                                                        |                                               |                                                                                     | (l)<br>Gains (Col. (h) gain minus<br>col. (k), but not less than -0-) or<br>Losses (from col.(h)) |                                     |
| (i)<br>F.M.V. as of 12/31/69                                                                                                                                                                       | (j)<br>Adjusted basis<br>as of 12/31/69       | (k)<br>Excess of col. (i)<br>over col. (j), if any                                  |                                                                                                   |                                     |
| a                                                                                                                                                                                                  |                                               |                                                                                     | -7,478,916                                                                                        |                                     |
| b                                                                                                                                                                                                  |                                               |                                                                                     |                                                                                                   |                                     |
| c                                                                                                                                                                                                  |                                               |                                                                                     |                                                                                                   |                                     |
| d                                                                                                                                                                                                  |                                               |                                                                                     |                                                                                                   |                                     |
| e                                                                                                                                                                                                  |                                               |                                                                                     |                                                                                                   |                                     |
| Capital gain net income or (net capital loss)                                                                                                                                                      |                                               | { If gain, also enter in Part I, line 7<br>If (loss), enter -0- in Part I, line 7 } | 2                                                                                                 | -7,478,916                          |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):<br>If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0-<br>in Part I, line 8 |                                               | {                                                                                   | 3                                                                                                 |                                     |

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE

|                 |                 |                 |                 |
|-----------------|-----------------|-----------------|-----------------|
| 1 Reserved      |                 |                 |                 |
| (a)<br>Reserved | (b)<br>Reserved | (c)<br>Reserved | (d)<br>Reserved |
|                 |                 |                 |                 |
|                 |                 |                 |                 |
|                 |                 |                 |                 |
| 2 Reserved      |                 |                 | 2               |
| 3 Reserved.     |                 |                 | 3               |
| 4 Reserved      |                 |                 | 4               |
| 5 Reserved      |                 |                 | 5               |
| 6 Reserved      |                 |                 | 6               |
| 7 Reserved      |                 |                 | 7               |
| 8 Reserved      |                 |                 | 8               |

Part VII

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

|                                                                                                                            |                                                                                                                              |    |        |
|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|----|--------|
| 1a                                                                                                                         | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. |    |        |
|                                                                                                                            | Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)                          |    |        |
| b                                                                                                                          | Reserved                                                                                                                     | 1  | 0      |
| All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) |                                                                                                                              |    |        |
| 2                                                                                                                          | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                    | 2  | 0      |
| 3                                                                                                                          | Add lines 1 and 2.                                                                                                           | 3  | 0      |
| 4                                                                                                                          | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                  | 4  | 0      |
| 5                                                                                                                          | <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-.                              | 5  | 0      |
| 6                                                                                                                          | Credits/Payments:                                                                                                            |    |        |
| a                                                                                                                          | 2020 estimated tax payments and 2019 overpayment credited to 2020                                                            | 6a | 12,568 |
| b                                                                                                                          | Exempt foreign organizations—tax withheld at source                                                                          | 6b |        |
| c                                                                                                                          | Tax paid with application for extension of time to file (Form 8868)                                                          | 6c | 0      |
| d                                                                                                                          | Backup withholding erroneously withheld                                                                                      | 6d | 0      |
| 7                                                                                                                          | Total credits and payments. Add lines 6a through 6d                                                                          | 7  | 12,568 |
| 8                                                                                                                          | Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.    | 8  | 0      |
| 9                                                                                                                          | <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>                                  | 9  |        |
| 10                                                                                                                         | <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> .                    | 10 | 12,568 |
| 11                                                                                                                         | Enter the amount of line 10 to be: <b>Credited to 2021 estimated tax</b> <b>Refunded</b>                                     | 11 | 0      |

Part VII-A

Statements Regarding Activities

|    |                                                                                                                                                                                                                                                                                                                                                 |    |     |    |
|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?                                                                                                                                                                            |    | Yes | No |
|    |                                                                                                                                                                                                                                                                                                                                                 | 1a |     | No |
|    |                                                                                                                                                                                                                                                                                                                                                 |    |     |    |
| b  | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition).<br><i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i> |    |     | No |
|    |                                                                                                                                                                                                                                                                                                                                                 | 1b |     | No |
|    |                                                                                                                                                                                                                                                                                                                                                 |    |     |    |
| c  | Did the foundation file <b>Form 1120-POL</b> for this year?.                                                                                                                                                                                                                                                                                    | 1c |     | No |
| d  | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br><b>(1)</b> On the foundation. <input type="checkbox"/> \$ <u>0</u> <b>(2)</b> On foundation managers. <input type="checkbox"/> \$ <u>0</u>                                                                                                |    |     |    |
|    |                                                                                                                                                                                                                                                                                                                                                 |    |     |    |
|    |                                                                                                                                                                                                                                                                                                                                                 |    |     |    |
| e  | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ <u>0</u>                                                                                                                                                                      |    |     |    |
| 2  | Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>                                                                                                                                                                               | 2  |     | No |
| 3  | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>                                                                                                               | 3  |     | No |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year?.                                                                                                                                                                                                                                                    | 4a |     | No |
| b  | If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?.                                                                                                                                                                                                                                                                        | 4b |     |    |
| 5  | Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br><i>If "Yes," attach the statement required by General Instruction T.</i>                                                                                                                                                                      | 5  |     | No |
| 6  | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?.             |    |     |    |
|    |                                                                                                                                                                                                                                                                                                                                                 |    |     |    |
|    |                                                                                                                                                                                                                                                                                                                                                 |    |     |    |
| 7  | Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>                                                                                                                                                                                                       | 7  | Yes |    |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions)<br><input type="checkbox"/> CA                                                                                                                                                                                                               |    |     |    |
| b  | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>                                                                                                                              | 8b | Yes |    |
| 9  | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2020 or the taxable year beginning in 2020? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>                                                                                  | 9  |     | No |
| 10 | Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>                                                                                                                                                                                                      | 10 |     | No |

Part VII-A

Statements Regarding Activities (continued)

|                                                                                                                          |                                                                                                                                                                                                                              |    |     |    |
|--------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| 11                                                                                                                       | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions. . . . .                              | 11 |     | No |
| 12                                                                                                                       | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions . . . . .                            | 12 |     | No |
| 13                                                                                                                       | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>HTTPS://MUNZERFDN.ORG/</u>                                                          | 13 | Yes |    |
| 14                                                                                                                       | The books are in care of ▶ <u>ZAYDA L GARCIA</u> Telephone no. ▶ <u>(562) 912-7732</u><br>Located at ▶ <u>3450 E SPRING STREET SUITE 216 LONG BEACH CA</u> ZIP+4 ▶ <u>90806</u>                                              |    |     |    |
| 15                                                                                                                       | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . . ▶<br>and enter the amount of tax-exempt interest received or accrued during the year . . . . . <u>15</u> |    |     |    |
| 16                                                                                                                       | At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .                          | 16 | Yes | No |
| See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign |                                                                                                                                                                                                                              |    |     |    |

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

|                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |    |     |    |
|-----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |    | Yes | No |
| 1a                                                                                      | During the year did the foundation (either directly or indirectly):                                                                                                                                                                                                                                                                                                                                                                                                                                      |    |     |    |
|                                                                                         | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                               |    |     |    |
|                                                                                         | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                             |    |     |    |
|                                                                                         | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                           |    |     |    |
|                                                                                         | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                 |    |     |    |
|                                                                                         | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                              |    |     |    |
|                                                                                         | (6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                    |    |     |    |
| b                                                                                       | If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions . . . . . <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>                                                                                                                              | 1b |     |    |
| c                                                                                       | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2020? . . . . .                                                                                                                                                                                                                                                                                                        | 1c |     | No |
| 2                                                                                       | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):                                                                                                                                                                                                                                                                                                                           |    |     |    |
| a                                                                                       | At the end of tax year 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If "Yes," list the years ▶ 20____, 20____, 20____, 20____                                                                                                                                                                                                             |    |     |    |
| b                                                                                       | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions.) . . . . .                                                                                                                                                                          | 2b |     |    |
| c                                                                                       | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ▶ 20____, 20____, 20____, 20____                                                                                                                                                                                                                                                                                                                                                 |    |     |    |
| 3a                                                                                      | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                 |    |     |    |
| b                                                                                       | If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2020.) . . . . . | 3b |     |    |
| 4a                                                                                      | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                                                                                                                                                                                                                                                                                                                                                                          | 4a |     | No |
| b                                                                                       | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?                                                                                                                                                                                                                                                                        | 4b |     | No |

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a

During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes

☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? . . . . .

☐ Yes

☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes

☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions. . . . .

☐ Yes

☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .

☐ Yes

☒ No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions

Organizations relying on a current notice regarding disaster assistance check here. . . . . ☒

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . .

☐ Yes

☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .

☐ Yes

☒ No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .

☐ Yes

☒ No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b

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

☐ Yes

☒ No

8

Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year? . . . . .

☐ Yes

☒ No

Yes

No

5b

6b

7b

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation. See instructions

| (a) Name and address                                      | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|-----------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| DANIEL WARREN MUNZER                                      | PRESIDENT                                                 | 0                                         | 0                                                                     | 0                                     |
| 3450 EAST SPRING STREET SUITE 216<br>LONG BEACH, CA 90806 | 4.00                                                      |                                           |                                                                       |                                       |
| ANNE BOURNE                                               | SECRETARY & TREASURER                                     | 0                                         | 0                                                                     | 0                                     |
| 3450 EAST SPRING STREET SUITE 216<br>LONG BEACH, CA 90806 | 4.00                                                      |                                           |                                                                       |                                       |
| DANA BOURNE                                               | DIRECTOR                                                  | 0                                         | 0                                                                     | 0                                     |
| 3450 EAST SPRING STREET SUITE 216<br>LONG BEACH, CA 90806 | 4.00                                                      |                                           |                                                                       |                                       |
| JOHN G BOURNE                                             | DIRECTOR                                                  | 0                                         | 0                                                                     | 0                                     |
| 3450 EAST SPRING STREET SUITE 216<br>LONG BEACH, CA 90806 | 4.00                                                      |                                           |                                                                       |                                       |
| KIRSTEN BOURNE                                            | DIRECTOR                                                  | 0                                         | 0                                                                     | 0                                     |
| 3450 EAST SPRING STREET SUITE 216<br>LONG BEACH, CA 90806 | 4.00                                                      |                                           |                                                                       |                                       |
| DANIEL WAYNE MUNZER                                       | DIRECTOR                                                  | 0                                         | 0                                                                     | 0                                     |
| 3450 EAST SPRING STREET SUITE 216<br>LONG BEACH, CA 90806 | 4.00                                                      |                                           |                                                                       |                                       |
| ELIZABETH MUNZER                                          | DIRECTOR                                                  | 0                                         | 0                                                                     | 0                                     |
| 3450 EAST SPRING STREET SUITE 216<br>LONG BEACH, CA 90806 | 4.00                                                      |                                           |                                                                       |                                       |
| JAMES R MUNZER                                            | DIRECTOR                                                  | 0                                         | 0                                                                     | 0                                     |
| 3450 EAST SPRING STREET SUITE 216<br>LONG BEACH, CA 90806 | 4.00                                                      |                                           |                                                                       |                                       |
| JEFFREY R MUNZER                                          | DIRECTOR                                                  | 0                                         | 0                                                                     | 0                                     |
| 3450 EAST SPRING STREET SUITE 216<br>LONG BEACH, CA 90806 | 4.00                                                      |                                           |                                                                       |                                       |
| NICOLE C MUNZER                                           | DIRECTOR                                                  | 0                                         | 0                                                                     | 0                                     |
| 3450 EAST SPRING STREET SUITE 216<br>LONG BEACH, CA 90806 | 4.00                                                      |                                           |                                                                       |                                       |

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---------------------------------------------------------------|-----------------------------------------------------------|------------------|-----------------------------------------------------------------------|---------------------------------------|
| ZAYDA GARCIA                                                  | EXECUTIVE                                                 | 107,428          | 12,763                                                                | 0                                     |
| 3450 EAST SPRING STREET SUITE 216<br>LONG BEACH,CA 90806      | DIRECTOR<br>40.00                                         |                  |                                                                       |                                       |
| MONICA OCHOA                                                  | PROGRAM                                                   | 59,476           | 11,094                                                                | 0                                     |
| 3450 EAST SPRING STREET SUITE 216<br>LONG BEACH,CA 90806      | ASSOCIATE<br>40.00                                        |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
| Total number of other employees paid over \$50,000. . . . .   |                                                           |                  |                                                                       | 0                                     |

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

| 3 Five highest-paid independent contractors for professional 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 |
| RUSSELL INVESTMENTS                                                                                              | INVESTMENT MANAGEMENT | 441,761          |
| 1301 2ND AVENUE 18TH FLOOR                                                                                       |                       |                  |
| SEATTLE,WA 98101                                                                                                 |                       |                  |
|                                                                                                                  |                       |                  |
|                                                                                                                  |                       |                  |
|                                                                                                                  |                       |                  |
|                                                                                                                  |                       |                  |
|                                                                                                                  |                       |                  |

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 relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 1                                                                                                                                                                                                                                                      |          |
|                                                                                                                                                                                                                                                        |          |
|                                                                                                                                                                                                                                                        |          |
| 2                                                                                                                                                                                                                                                      |          |
|                                                                                                                                                                                                                                                        |          |
|                                                                                                                                                                                                                                                        |          |
| 3                                                                                                                                                                                                                                                      |          |
|                                                                                                                                                                                                                                                        |          |
|                                                                                                                                                                                                                                                        |          |
| 4                                                                                                                                                                                                                                                      |          |
|                                                                                                                                                                                                                                                        |          |
|                                                                                                                                                                                                                                                        |          |

Part IX-B

Summary of Program-Related Investments (see instructions)

| Describe the two largest program-related investments made by the foundation 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

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

|   |                                                                                                                    |    |            |
|---|--------------------------------------------------------------------------------------------------------------------|----|------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:        |    |            |
| a | Average monthly fair market value of securities. . . . .                                                           | 1a | 82,119,741 |
| b | Average of monthly cash balances. . . . .                                                                          | 1b | 432,966    |
| c | Fair market value of all other assets (see instructions). . . . .                                                  | 1c | 13,097     |
| d | Total (add lines 1a, b, and c). . . . .                                                                            | 1d | 82,565,804 |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . . | 1e | 0          |
| 2 | Acquisition indebtedness applicable to line 1 assets                                                               | 2  | 0          |
| 3 | Subtract line 2 from line 1d. . . . .                                                                              | 3  | 82,565,804 |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . . | 4  | 1,238,487  |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4               | 5  | 81,327,317 |
| 6 | Minimum investment return. Enter 5% of line 5. . . . .                                                             | 6  | 4,066,366  |

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

|    |                                                                                                             |    |           |
|----|-------------------------------------------------------------------------------------------------------------|----|-----------|
| 1  | Minimum investment return from Part X, line 6. . . . .                                                      | 1  | 4,066,366 |
| 2a | Tax on investment income for 2020 from Part VI, line 5. . . . .                                             | 2a |           |
| b  | Income tax for 2020. (This does not include the tax from Part VI.)                                          | 2b |           |
| c  | Add lines 2a and 2b. . . . .                                                                                | 2c | 0         |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1. . . . .                              | 3  | 4,066,366 |
| 4  | Recoveries of amounts treated as qualifying distributions. . . . .                                          | 4  | 0         |
| 5  | Add lines 3 and 4. . . . .                                                                                  | 5  | 4,066,366 |
| 6  | Deduction from distributable amount (see instructions). . . . .                                             | 6  | 0         |
| 7  | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . . | 7  | 4,066,366 |

Part XII Qualifying Distributions (see instructions)

|   |                                                                                                                                                              |    |           |
|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----------|
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:                                                                   |    |           |
| a | Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .                                                                         | 1a | 4,143,075 |
| b | Program-related investments—total from Part IX-B. . . . .                                                                                                    | 1b | 0         |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .                                           | 2  |           |
| 3 | Amounts set aside for specific charitable projects that satisfy the:                                                                                         |    |           |
| a | Suitability test (prior IRS approval required). . . . .                                                                                                      | 3a |           |
| b | Cash distribution test (attach the required schedule). . . . .                                                                                               | 3b |           |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                                                   | 4  | 4,143,075 |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions. . . . . | 5  | 0         |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .                                                                                      | 6  | 4,143,075 |

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII

Undistributed Income (see instructions)

|                                                                                                                                                                               | (a)<br>Corpus | (b)<br>Years prior to 2019 | (c)<br>2019 | (d)<br>2020 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2020 from Part XI, line 7                                                                                                                          |               |                            |             | 4,066,366   |
| 2 Undistributed income, if any, as of the end of 2020:                                                                                                                        |               |                            |             |             |
| a Enter amount for 2019 only. . . . .                                                                                                                                         |               |                            | 0           |             |
| b Total for prior years: 20____, 20____, 20____                                                                                                                               |               | 0                          |             |             |
| 3 Excess distributions carryover, if any, to 2020:                                                                                                                            |               |                            |             |             |
| a From 2015. . . . .                                                                                                                                                          |               |                            |             |             |
| b From 2016. . . . .                                                                                                                                                          | 719,674       |                            |             |             |
| c From 2017. . . . .                                                                                                                                                          | 1,663,438     |                            |             |             |
| d From 2018. . . . .                                                                                                                                                          | 2,340,210     |                            |             |             |
| e From 2019. . . . .                                                                                                                                                          | 4,406,798     |                            |             |             |
| f Total of lines 3a through e. . . . .                                                                                                                                        | 9,130,120     |                            |             |             |
| 4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ 4,143,075                                                                                                     |               |                            |             |             |
| a Applied to 2019, but not more than line 2a                                                                                                                                  |               |                            | 0           |             |
| b Applied to undistributed income of prior years (Election required—see instructions). . . . .                                                                                |               | 0                          |             |             |
| c Treated as distributions out of corpus (Election required—see instructions). . . . .                                                                                        | 0             |                            |             |             |
| d Applied to 2020 distributable amount                                                                                                                                        |               |                            |             | 4,066,366   |
| e Remaining amount distributed out of corpus                                                                                                                                  | 76,709        |                            |             |             |
| 5 Excess distributions carryover applied to 2020. (If an amount appears in column (d), the same amount must be shown in column (a).)                                          | 0             |                            |             | 0           |
| 6 Enter the net total of each column as indicated below:                                                                                                                      |               |                            |             |             |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5                                                                                                                           | 9,206,829     |                            |             |             |
| b Prior years' undistributed income. Subtract line 4b from line 2b. . . . .                                                                                                   |               | 0                          |             |             |
| 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    |               | 0                          |             |             |
| d Subtract line 6c from line 6b. Taxable amount—see instructions. . . . .                                                                                                     |               | 0                          |             |             |
| e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions. . . . .                                                                      |               |                            | 0           |             |
| f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020                                                                 |               |                            |             | 0           |
| 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). . . . . | 0             |                            |             |             |
| 8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions)                                                                                 | 0             |                            |             |             |
| 9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a                                                                                                 | 9,206,829     |                            |             |             |
| 10 Analysis of line 9:                                                                                                                                                        |               |                            |             |             |
| a Excess from 2016                                                                                                                                                            | 719,674       |                            |             |             |
| b Excess from 2017                                                                                                                                                            | 1,663,438     |                            |             |             |
| c Excess from 2018. . . . .                                                                                                                                                   | 2,340,210     |                            |             |             |
| d Excess from 2019                                                                                                                                                            | 4,406,798     |                            |             |             |
| e Excess from 2020                                                                                                                                                            | 76,709        |                            |             |             |



Part XV

Supplementary Information (continued)

3

Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient                                                                                                                 | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution                                                                                    | Amount    |
|---------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|---------------------------------------------------------------------------------------------------------------------|-----------|
| Name and address (home or business)                                                                                       |                                                                                                           |                                |                                                                                                                     |           |
| <b>a</b> Paid during the year                                                                                             |                                                                                                           |                                |                                                                                                                     |           |
| 1736 FAMILY CRISIS CENTER<br>2116 ARLINGTON AVE STE 200<br>LOS ANGELES,CA 90018                                           | NONE                                                                                                      | P C                            | LONG BEACH SHELTER PROGRAM                                                                                          | 50,000    |
| ABILIS<br>50 GLENVILLE ST<br>GREENWICH,CT 06831                                                                           | NONE                                                                                                      | P C                            | ABILIS EARLY INTERVENTION BIRTH TO THREE                                                                            | 50,000    |
| ABILITYFIRST<br>1300 EAST GREEN STREET<br>PASADENA,CA 91106                                                               | NONE                                                                                                      | P C                            | ABILITYFIRST LONG BEACH CENTER AFTER SCHOOL PROGRAM                                                                 | 25,000    |
| ABLE ARTS WORK<br>3626 E PACIFIC COAST HWY<br>LONG BEACH,CA 90804                                                         | NONE                                                                                                      | P C                            | ABLE ARTS WORK'S CREATIVE HEALTH AND WELLNESS CLINIC EXPANSION                                                      | 30,000    |
| ACT OUT THEATRE COMPANY<br>3710 N WESTON PL<br>LONG BEACH,CA 90807                                                        | NONE                                                                                                      | P C                            | ACT OUT THEATRE COMPANY: PROGRAM AND OPERATIONAL SUPPORT                                                            | 15,000    |
| ANGELS GATE CULTURAL CENTER INC<br>3601 S GAFFEY ST BOX 1 BLDG A<br>SAN PEDRO,CA 907316969                                | NONE                                                                                                      | P C                            | ARTISTS-IN-CLASSROOMS                                                                                               | 20,000    |
| AQUARIUM OF THE PACIFIC<br>100 AQUARIUM WAY<br>LONG BEACH,CA 90802                                                        | NONE                                                                                                      | P C                            | AQUARIUM FIELD TRIP PROGRAM AND SCIENCE INTEGRATION WITH LONG BEACH UNIFIED SCHOOL DISTRICT                         | 45,000    |
| ARTS COUNCIL FOR LONG BEACH<br>350 ELM AVENUE<br>LONG BEACH,CA 90802                                                      | NONE                                                                                                      | P C                            | EMPOWER ARTS AND LIVING ARTS                                                                                        | 20,000    |
| ASSISTANCE LEAGUE OF LONG BEACH<br>6220 E SPRING STREET<br>LONG BEACH,CA 90815                                            | NONE                                                                                                      | P C                            | OPERATION SCHOOL BELL                                                                                               | 70,000    |
| BOY SCOUTS OF AMERICA LONG BEACH AREA COUNCIL<br>401 E 37TH STREET<br>LONG BEACH,CA 90807                                 | NONE                                                                                                      | P C                            | SCOUTREACH 2020                                                                                                     | 40,000    |
| BOYS & GIRLS CLUBS OF LONG BEACH<br>3635 LONG BEACH BOULEVARD<br>LONG BEACH,CA 90807                                      | NONE                                                                                                      | P C                            | STEM PROGRAM                                                                                                        | 60,000    |
| CALIFORNIA CONFERENCE FOR EQUALITY AND JUSTICE INC<br>3605 LONG BEACH BOULEVARD SUITE 100<br>LONG BEACH,CA 90807          | NONE                                                                                                      | P C                            | CONSCIOUS CLASSROOMS                                                                                                | 50,000    |
| CAMP NUGGET CALIFORNIA STATE UNIVERSITY LONG BEACH<br>1250 BELLFLOWER BOULEVARD MS 5605<br>ETC-200<br>LONG BEACH,CA 90840 | NONE                                                                                                      | P C                            | CAMP NUGGET                                                                                                         | 10,000    |
| CASA YOUTH SHELTER<br>10911 REAGAN STREET<br>LOS ALAMITOS,CA 90720                                                        | NONE                                                                                                      | P C                            | CASA YOUTH SHELTER: EXPANSION AND IMPROVEMENTS TO OUR CLINICAL AND CASE MANAGEMENT TEAMS                            | 30,000    |
| CENTRO CHA INC<br>1633 LONG BEACH BLVD<br>LONG BEACH,CA 90813                                                             | NONE                                                                                                      | P C                            | PARENTS 2 WORK INNOVATION PROJECT                                                                                   | 50,000    |
| CENTURY VILLAGES AT CABRILLO INC<br>2001 RIVER AVENUE<br>LONG BEACH,CA 90810                                              | NONE                                                                                                      | P C                            | YOUTH AND FAMILY SERVICES AT THE VILLAGES AT CABRILLO                                                               | 45,000    |
| CHILD LANE (COMPREHENSIVE)<br>2545 PACIFIC AVE<br>LONG BEACH,CA 90806                                                     | NONE                                                                                                      | P C                            | LONG BEACH ECE WORKFORCE PROFESSIONALIZATION AND ADVOCACY / COMPREHENSIVE CHILD DEVELOPMENT: LONG BEACH ECE PROGRAM | 180,000   |
| CHILD360<br>515 S FIGUEROA ST STE 900<br>LOS ANGELES,CA 90071                                                             | NONE                                                                                                      | P C                            | CHILD360S EXCEPTIONAL POPULATIONS TEACHER INSTITUTE                                                                 | 35,000    |
| CHILDREN TODAY<br>2951 LONG BEACH BLVD<br>LONG BEACH,CA 90806                                                             | NONE                                                                                                      | P C                            | CHILDREN TODAY'S ECOHOUSE                                                                                           | 35,000    |
| CHILDREN'S DENTAL HEALTH CLINIC<br>455 E COLUMBIA ST STE 32<br>LONG BEACH,CA 90806                                        | NONE                                                                                                      | P C                            | MULTI-SPECIALTY PEDIATRIC DENTAL TREATMENT                                                                          | 100,000   |
| CHILDREN'S INSTITUTE (CII)<br>2121 WEST TEMPLE STREET<br>LOS ANGELES,CA 90026                                             | NONE                                                                                                      | P C                            | TRAUMA INFORMED SUPPORT SERVICES FOR FAMILIES                                                                       | 60,000    |
| CHILDREN'S LEARNING CENTERS OF FAIRFIELD COUNTY INC<br>64 PALMERS HILL ROAD<br>STAMFORD,CT 069022113                      | NONE                                                                                                      | P C                            | CHILDREN'S LEARNING CENTERS OF FAIRFIELD COUNTY EARLY HEAD START CHILDHOOD NUTRITION PROGRAM                        | 25,000    |
| DRAMATIC RESULTS<br>3310 LIME AVENUE<br>SIGNAL HILL,CA 90755                                                              | NONE                                                                                                      | P C                            | STEAM SATURDAY SCHOOL                                                                                               | 45,000    |
| EDUCARE LA AT LONG BEACH - LONG BEACH EDUCATION FOUNDATION<br>4840 LEMON AVE<br>LONG BEACH,CA 90807                       | NONE                                                                                                      | P C                            | ADDRESSING COMPENSATION FOR EARLY CHILDHOOD EDUCATORS: ENSURING ECE PROGRAM QUALITY                                 | 25,000    |
| ESP EDUCATION AND LEADERSHIP INSTITUTE INC<br>7941 E CRAMER STREET<br>LONG BEACH,CA 90808                                 | NONE                                                                                                      | P C                            | BOSS (BUSINESS OF SUCCESS BEYOND SPORTS)                                                                            | 20,000    |
| FAMILIES UNITING FAMILIES<br>525 E 7TH STREET SUITE 115<br>LONG BEACH,CA 90813                                            | NONE                                                                                                      | P C                            | FAMILIES UNITING FAMILIES - PROJECT FATHERHOOD                                                                      | 50,000    |
| FILIPINO MIGRANT CENTER<br>2125 SANTA FE AVE<br>LONG BEACH,CA 90810                                                       | NONE                                                                                                      | P C                            | FILIPINOS REACHING FOR EDUCATION AND EMPOWERMENT (FREE) PROGRAM                                                     | 15,000    |
| FOOD FINDERS INC<br>10539 HUMBOLT STREET<br>LOS ALAMITOS,CA 90720                                                         | NONE                                                                                                      | P C                            | FOOD 4 KIDS                                                                                                         | 40,000    |
| FOR THE CHILD INC<br>4565 CALIFORNIA AVENUE<br>LONG BEACH,CA 90807                                                        | NONE                                                                                                      | P C                            | CHILD ABUSE & NEGLECT SAFETY NET PROGRAM                                                                            | 50,000    |
| FRESHFARM MARKETS INC<br>1380 MONROE ST NW 605<br>WASHINGTON,DC 20010                                                     | NONE                                                                                                      | P C                            | FOODPRINTS & MARKET SHARE FOR EARLY LEARNERS                                                                        | 70,000    |
| GOODWILL SERVING THE PEOPLE OF SOUTHERN LOS ANGELES COUNTY<br>800 W PACIFIC COAST HIGHWAY<br>LONG BEACH,CA 90806          | NONE                                                                                                      | P C                            | ADVANCING HEALTHCARE CAREER OPPORTUNITY FOR LOW-INCOME HIGH SCHOOL STUDENTS IN LONG BEACH                           | 90,000    |
| GROUND EDUCATION<br>6475 E PACIFIC COAST HIGHWAY 294<br>LONG BEACH,CA 90803                                               | NONE                                                                                                      | P C                            | BURBANK ELEMENTARY LEARNING GARDEN FACILITATED BY GROUND EDUCATION                                                  | 25,540    |
| INSPIRICA INC<br>141 FRANKLIN STREET<br>STAMFORD,CT 06901                                                                 | NONE                                                                                                      | P C                            | CHILDREN'S SERVICES AND EARLY CHILDHOOD & PARENTING PROGRAM                                                         | 50,000    |
| INTERNATIONAL CITY THEATRE<br>67 LONG BEACH BLVD<br>LONG BEACH,CA 90802                                                   | NONE                                                                                                      | P C                            | PERFORMING ARTS CLASSROOM TEACHING (PACT) PROGRAM                                                                   | 10,000    |
| JEWISH FAMILY & CHILDRENS SERVICE OF LONG BEACH-WEST ORANGE COUNTY<br>3801 E WILLOW ST<br>LONG BEACH,CA 908151734         | NONE                                                                                                      | P C                            | LOW-INCOME COUNSELING PROGRAM FOR RESIDENTS OF LONG BEACH                                                           | 20,000    |
| JOSEPHINE HERRICK PROJECT<br>64 FULTON STREET STE 905<br>NEW YORK,NY 10038                                                | NONE                                                                                                      | P C                            | THE F-STOP PROJECT @ QUEENSBRIDGE HOUSES                                                                            | 25,000    |
| LEADERSHIP LONG BEACH<br>638 ALAMITOS AVENUE<br>LONG BEACH,CA 90802                                                       | NONE                                                                                                      | P C                            | LEADERSHIP LONG BEACH ENVIRONMENTAL YOUTH LEADERSHIP PROGRAM                                                        | 30,000    |
| LEGAL AID FOUNDATION OF LOS ANGELES<br>1550 W 8TH STREET<br>LOS ANGELES,CA 90017                                          | NONE                                                                                                      | P C                            | LEGAL AID FOUNDATION OF LOS ANGELES MEDICAL-LEGAL PARTNERSHIP LONG BEACH                                            | 80,000    |
| LONG BEACH BLAST (BETTER LEARNING FOR ALL STUDENTS TODAY)<br>4201 LONG BEACH BLVD SUITE 201<br>LONG BEACH,CA 90807        | NONE                                                                                                      | P C                            | ACADEMIC MENTORING PROGRAM & BRIDGE TO SUCCESS                                                                      | 40,000    |
| LONG BEACH CALL - LONG BEACH EDUCATION FOUNDATION<br>1515 HUGHES WAY 4TH FL<br>LONG BEACH,CA 90810                        | NONE                                                                                                      | P C                            | SUMMER INTERNSHIPS 2020                                                                                             | 15,000    |
| LONG BEACH CITY COLLEGE FOUNDATION<br>4901 E CARSON STREET B12<br>LONG BEACH,CA 90808                                     | NONE                                                                                                      | P C                            | STEAM INNOVATION STATION                                                                                            | 14,000    |
| LONG BEACH COMMUNITY ACTION PARTNERSHIP<br>117 W VICTORIA STREET<br>LONG BEACH,CA 90805                                   | NONE                                                                                                      | P C                            | LEADERSHIP ACADEMY MENTORING PROGRAM                                                                                | 40,000    |
| LONG BEACH COMMUNITY FOUNDATION<br>400 OCEANGATE SUITE 800<br>LONG BEACH,CA 90802                                         | NONE                                                                                                      | P C                            | CORONAVIRUS RELIEF FUND                                                                                             | 75,000    |
| LONG BEACH DAY NURSERY<br>1548 CHESTNUT AVE<br>LONG BEACH,CA 90813                                                        | NONE                                                                                                      | P C                            | EARLY CHILDHOOD EDUCATION PROGRAM                                                                                   | 50,000    |
| LONG BEACH GIVES - THE NONPROFIT PARTNERSHIP<br>333 W BROADWAY STE 312<br>LONG BEACH,CA 90802                             | NONE                                                                                                      | P C                            | LB GIVES - 2020                                                                                                     | 50,000    |
| LONG BEACH IMMIGRANT RIGHTS COALITION - COMMUNITY PARTNERS<br>1000 N ALAMEDA ST STE 240<br>LOS ANGELES,CA 90012           | NONE                                                                                                      | P C                            | HEALTHY IMMIGRANT FAMILIES                                                                                          | 30,000    |
| LONG BEACH MUSEUM OF ART FOUNDATION<br>2300 E OCEAN BLVD<br>LONG BEACH,CA 90803                                           | NONE                                                                                                      | P C                            | KIDSVISIONS ARTS EDUCATION PROGRAM                                                                                  | 50,000    |
| LONG BEACH PUBLIC LIBRARY FOUNDATION<br>200 W BROADWAY<br>LONG BEACH,CA 90802                                             | NONE                                                                                                      | P C                            | FAMILY LEARNING CENTERS                                                                                             | 70,000    |
| LONG BEACH SYMPHONY ASSOCIATION<br>249 E OCEAN BLVD SUITE 200<br>LONG BEACH,CA 90802                                      | NONE                                                                                                      | P C                            | LONG BEACH SYMPHONY YOUTH CONCERTS                                                                                  | 30,000    |
| MAYOR'S FUND FOR EDUCATION - COMMUNITY PARTNERS<br>1000 N ALAMEDA ST STE 240<br>LOS ANGELES,CA 900121804                  | NONE                                                                                                      | P C                            | READYROSIELB FAMILY ENGAGEMENT PROGRAM (PHASE 4)                                                                    | 50,000    |
| MEMORIAL MEDICAL CENTER FOUNDATION<br>2801 ATLANTIC AVE<br>LONG BEACH,CA 90806                                            | NONE                                                                                                      | P C                            | MILLER CHILDREN'S SEVERE ASTHMA OUTPATIENT CLINIC                                                                   | 100,000   |
| MENTAL HEALTH AMERICA OF LOS ANGELES<br>200 PINE AVENUE STE 400<br>LONG BEACH,CA 90802                                    | NONE                                                                                                      | P C                            | MHALA DROP-IN CENTER                                                                                                | 100,000   |
| NEW YORK HARBOR FOUNDATION INC DBA BILLION OYSTER PROJECT<br>10 SOUTH STREET SLIP 7<br>NEW YORK,NY 10004                  | NONE                                                                                                      | P C                            | BILLION OYSTER PROJECT SCHOOLS NETWORK                                                                              | 20,000    |
| OPERATION JUMP START<br>3515 LINDEN AVE<br>LONG BEACH,CA 90807                                                            | NONE                                                                                                      | P C                            | OJS PROGRAMS                                                                                                        | 45,000    |
| PARTNERS OF PARKS<br>1150 EAST 4TH STREET ROOM 104<br>LONG BEACH,CA 90802                                                 | NONE                                                                                                      | P C                            | YOUTH SCHOLARSHIPS                                                                                                  | 14,000    |
| PEDIATRIC THERAPY NETWORK<br>1815 W 213TH STREET SUITE 100<br>TORRANCE,CA 90501                                           | NONE                                                                                                      | P C                            | LEAPS & BOUNDS EARLY INTERVENTION PROGRAM                                                                           | 45,000    |
| PLANNED PARENTHOOD LOS ANGELES<br>400 W 30TH ST<br>LOS ANGELES,CA 900073320                                               | NONE                                                                                                      | P C                            | WOMENS REPRODUCTIVE AND SEXUAL HEALTH SERVICES AT PPLAS LONG BEACH HEALTH CENTER                                    | 25,000    |
| POOLS OF HOPE (DBA)<br>6801 LONG BEACH BLVD<br>LONG BEACH,CA 90805                                                        | NONE                                                                                                      | P C                            | YOUTH WELLNESS PROGRAM                                                                                              | 30,000    |
| PORT CHESTER CARVER CENTER INC<br>P O BOX 429<br>PORT CHESTER,NY 10573                                                    | NONE                                                                                                      | P C                            | CARVER AFTER SCHOOL PROGRAM (CAP)                                                                                   | 60,000    |
| PRECIOUS LAMB PRESCHOOL<br>2005 PALO VERDE AVE PMB 301<br>LONG BEACH,CA 90815                                             | NONE                                                                                                      | P C                            | ON-SITE FAMILY RESOURCE CENTER                                                                                      | 60,000    |
| RANCHO LOS CERRITOS FOUNDATION<br>4600 VIRGINIA RD<br>LONG BEACH,CA 90807                                                 | NONE                                                                                                      | P C                            | OPENING DOORS: EDUCATIONAL MASTER PLAN, NEW AND UPDATED CURRICULUM TO FOCUS ON HUMANITIES AND STEM                  | 30,000    |
| RANCHO LOS CERRITOS FOUNDATION<br>4600 VIRGINIA RD<br>LONG BEACH,CA 90807                                                 | NONE                                                                                                      | P C                            | LONG AGO LONG BEACH                                                                                                 | 35,000    |
| RISING TIDE AT MARGUERITE KIEFER EDUCATION CENTER INC<br>607 E THIRD ST<br>LONG BEACH,CA 90802                            | NONE                                                                                                      | P C                            | PROGRAM SUPPORT                                                                                                     | 20,000    |
| RONALD MCDONALD HOUSE CHARITIES OF SOUTHERN CALIFORNIA<br>1250 LYMAN PLACE<br>LOS ANGELES,CA 90029                        | NONE                                                                                                      | P C                            | CAMP RONALD MCDONALD FOR GOOD TIMES                                                                                 | 20,000    |
| SHARED SCIENCE<br>5318 E 2ND STREET 602<br>LONG BEACH,CA 90803                                                            | NONE                                                                                                      | P C                            | STEM EDUCATION PARTNERSHIP                                                                                          | 28,000    |
| SOUND WATERS INC<br>1281 COVE RD<br>STAMFORD,CT 06902                                                                     | NONE                                                                                                      | P C                            | SOUNDGENERATION RESEARCH PROGRAM                                                                                    | 30,000    |
| ST ANTHONY HIGH SCHOOL<br>620 OLIVE AVENUE<br>LONG BEACH,CA 90802                                                         | NONE                                                                                                      | P C                            | STUDENT SCHOLARSHIPS                                                                                                | 48,000    |
| ST BARNABAS SCHOOL<br>3980 MARRON AVE<br>LONG BEACH,CA 90807                                                              | NONE                                                                                                      | P C                            | TUITION ASSISTANCE                                                                                                  | 40,500    |
| ST MARY MEDICAL CENTER FOUNDATION<br>1050 LINDEN AVE<br>LONG BEACH,CA 90813                                               | NONE                                                                                                      | P C                            | MUNZER NURSE SCHOLAR PROGRAM                                                                                        | 60,000    |
| SU CASA - ENDING DOMESTIC VIOLENCE<br>3750 E ANAHEIM STREET SUITE 100<br>LONG BEACH,CA 90804                              | NONE                                                                                                      | P C                            | SU CASA CAPACITY BUILDING INITIATIVE - YEAR 3                                                                       | 50,000    |
| SUCCESS IN CHALLENGES<br>4508 ATLANTIC AVENUE UNIT 782<br>LONG BEACH,CA 90807                                             | NONE                                                                                                      | P C                            | PATHWAYS TO MANHOOD                                                                                                 | 25,000    |
| TEENS RUN DC<br>PO BOX 15651<br>WASHINGTON,DC 20003                                                                       | NONE                                                                                                      | P C                            | TEENS RUN DC                                                                                                        | 30,000    |
| THE CHILDREN'S CLINIC SERVING CHILDREN AND THEIR FAMILIES<br>701 EAST 28TH ST STE 200<br>LONG BEACH,CA 90806              | NONE                                                                                                      | P C                            | HEALTHY MEALS, HEALTHY FAMILIES                                                                                     | 100,000   |
| THE GUIDANCE CENTER<br>1301 PINE AVE<br>LONG BEACH,CA 90813                                                               | NONE                                                                                                      | P C                            | MUSIC FOR YOUTH MENTAL HEALTH                                                                                       | 75,000    |
| THE JEWEL BOX CHILDREN'S THEATER COMPANY<br>3371 CERRITOS AVE<br>SIGNAL HILL,CA 90755                                     | NONE                                                                                                      | P C                            | ARTS EDUCATION OUTREACH PROGRAM                                                                                     | 12,000    |
| THE LGBTQ CENTER LONG BEACH (DBA)<br>2017 E 4TH STREET<br>LONG BEACH,CA 90814                                             | NONE                                                                                                      | P C                            | MENTORING YOUTH THROUGH EMPOWERMENT (MYTE)                                                                          | 50,000    |
| THE MAYE CENTER A PROJECT OF SOUTH COAST INTERFAITH COUNCIL<br>759 LINDEN AVENUE<br>LONG BEACH,CA 90812                   | NONE                                                                                                      | P C                            | INTERGENERATIONAL HEALING - KHMER ROUGE SURVIVORS AND THEIR CHILDREN AND GRANDCHILDREN                              | 10,000    |
| THE NONPROFIT PARTNERSHIP<br>4900 E CONANT ST BLDG 0-2 STE 225<br>LONG BEACH,CA 90808                                     | NONE                                                                                                      | P C                            | THE NONPROFIT PARTNERSHIP                                                                                           | 50,000    |
| THE SALVATION ARMY LONG BEACH CORPS AND COMMUNITY CENTER<br>3060 LONG BEACH BLVD<br>LONG BEACH,CA 90807                   | NONE                                                                                                      | P C                            | COVID-19 RELIEF EFFORTS                                                                                             | 10,000    |
| THE VOLUNTEER CENTER SOUTH BAY-HARBOR-LONG BEACH<br>1230 CRAVENS AVENUE<br>TORRANCE,CA 90501                              | NONE                                                                                                      | P C                            | CONNECTING IRL (IN REAL LIFE)                                                                                       | 20,000    |
| THE WOODEN FLOOR FOR YOUTH MOVEMENT<br>1810 N MAIN STREET<br>SANTA ANA,CA 92706                                           | NONE                                                                                                      | P C                            | LIFTING YOUTH OUT OF POVERTY: A 10-YEAR JOURNEY @ THE WOODEN FLOOR                                                  | 10,000    |
| TICHENOR CLINIC FOR CHILDREN<br>1660 TERMINO AVE<br>LONG BEACH,CA 90804                                                   | NONE                                                                                                      | P C                            | SPEECH THERAPY PROGRAM PROJECT                                                                                      | 25,000    |
| UN MUNDO DE AMIGOS PRESCHOOL<br>1480 LONG BEACH BLVD<br>LONG BEACH,CA 90813                                               | NONE                                                                                                      | P C                            | ARTS SPECIALISTS AND ENRICHMENT PROGRAMS                                                                            | 40,000    |
| URBAN COMMUNITY OUTREACH<br>241 CEDAR AVE<br>LONG BEACH,CA 90802                                                          | NONE                                                                                                      | P C                            | DROP-IN CENTER OPERATIONS AND HOUSING COORDINATOR                                                                   | 60,000    |
| WOMENSHELTER OF LONG BEACH<br>PO BOX 17098<br>LONG BEACH,CA 90807                                                         | NONE                                                                                                      | P C                            | CHILDREN & YOUTH SERVICES PROGRAM                                                                                   | 40,000    |
| YMCA OF GREATER LONG BEACH<br>3605 LONG BEACH BLVD SUITE 210<br>LONG BEACH,CA 90807                                       | NONE                                                                                                      | P C                            | YMCA YOUTH INSTITUTE                                                                                                | 35,000    |
| YOUNG HORIZONS<br>501 ATLANTIC AVE<br>LONG BEACH,CA 90802                                                                 | NONE                                                                                                      | P C                            | EARLY CHILDHOOD EDUCATION PROGRAM                                                                                   | 50,000    |
| YWCA GREENWICH<br>259 EAST PUTNAM AVENUE<br>GREENWICH,CT 06830                                                            | NONE                                                                                                      | P C                            | DOMESTIC ABUSE SERVICES CHILD COUNSELING                                                                            | 25,000    |
| MISCELLANEOUS GRANTS TO CHARITABLE ORGANIATIONS<br>3450 EAST SPRING STREET<br>LONG BEACH,CA 90806                         | NONE                                                                                                      | P C                            | MISCELLANEOUS GRANT PROJECTS                                                                                        | 139,300   |
| <b>Total</b>                                                                                                              |                                                                                                           |                                |                                                                                                                     | 3,871,340 |
| <b>b</b> Approved for future payment                                                                                      |                                                                                                           |                                |                                                                                                                     |           |
| <b>Total</b>                                                                                                              |                                                                                                           |                                |                                                                                                                     |           |

| Enter gross amounts unless otherwise indicated.                                |  | Unrelated business income |               | Excluded by section 512, 513, or 514 |               | (e)<br>Related or exempt<br>function income<br>(See<br>instructions.) |
|--------------------------------------------------------------------------------|--|---------------------------|---------------|--------------------------------------|---------------|-----------------------------------------------------------------------|
|                                                                                |  | (a)<br>Business<br>code   | (b)<br>Amount | (c)<br>Exclusion code                | (d)<br>Amount |                                                                       |
| <b>1</b> Program service revenue:                                              |  |                           |               |                                      |               |                                                                       |
| <b>a</b> _____                                                                 |  |                           |               |                                      |               |                                                                       |
| <b>b</b> _____                                                                 |  |                           |               |                                      |               |                                                                       |
| <b>c</b> _____                                                                 |  |                           |               |                                      |               |                                                                       |
| <b>d</b> _____                                                                 |  |                           |               |                                      |               |                                                                       |
| <b>e</b> _____                                                                 |  |                           |               |                                      |               |                                                                       |
| <b>f</b> _____                                                                 |  |                           |               |                                      |               |                                                                       |
| <b>g</b> Fees and contracts from government agencies                           |  |                           |               |                                      |               |                                                                       |
| <b>2</b> Membership dues and assessments. . . . .                              |  |                           |               |                                      |               |                                                                       |
| <b>3</b> Interest on savings and temporary cash<br>investments . . . . .       |  |                           |               |                                      |               |                                                                       |
| <b>4</b> Dividends and interest from securities<br>. . . . .                   |  |                           |               | 14                                   | 95,771        |                                                                       |
| <b>5</b> Net rental income or (loss) from real estate:                         |  |                           |               |                                      |               |                                                                       |
| <b>a</b> Debt-financed property. . . . .                                       |  |                           |               |                                      |               |                                                                       |
| <b>b</b> Not debt-financed property. . . . .                                   |  |                           |               |                                      |               |                                                                       |
| <b>6</b> Net rental income or (loss) from personal<br>property                 |  |                           |               |                                      |               |                                                                       |
| <b>7</b> Other investment income. . . . .                                      |  |                           |               | 01                                   | 3,773         |                                                                       |
| <b>8</b> Gain or (loss) from sales of assets other than<br>inventory . . . . . |  |                           |               | 18                                   | -7,478,916    |                                                                       |
| <b>9</b> Net income or (loss) from special events:                             |  |                           |               |                                      |               |                                                                       |
| <b>10</b> Gross profit or (loss) from sales of inventory                       |  |                           |               |                                      |               |                                                                       |
| <b>11</b> Other revenue: <b>a</b> _____                                        |  |                           |               |                                      |               |                                                                       |
| <b>b</b> _____                                                                 |  |                           |               |                                      |               |                                                                       |
| <b>c</b> _____                                                                 |  |                           |               |                                      |               |                                                                       |
| <b>d</b> _____                                                                 |  |                           |               |                                      |               |                                                                       |
| <b>e</b> _____                                                                 |  |                           |               |                                      |               |                                                                       |
| <b>12</b> Subtotal. Add columns (b), (d), and (e). . . . .                     |  |                           | 0             |                                      | -7,379,372    | 0                                                                     |
| <b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . .               |  |                           |               | <b>13</b>                            | -7,379,372    | -7,379,372                                                            |

(See worksheet in line 13 instructions to verify calculations.)

[illegible]

## Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

**1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

**a** Transfers from the reporting foundation to a noncharitable exempt organization of:

(1) Cash. . . . .

(2) Other assets. . . . .

**b Other transactions:**

**(1) Sales of assets to a noncharitable exempt organization.** . . . . .

**(2) Purchases of assets from a noncharitable exempt organization**

**(3) Rental of facilities, equipment, or other assets.** . . . . .

(4) Reimbursement arrangements. . . . .

(5) Loans or loan guarantees. . . .

**(6)** Performance of services or membership or fundraising solicitations. . . . .

**c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .

**d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule.

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

## Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

|                                 |            |       |
|---------------------------------|------------|-------|
|                                 | 2021-05-10 |       |
| Signature of officer or trustee | Date       | Title |

May the IRS discuss this return with the preparer shown below  
(see instr.) ☒ Yes ☐ No

**Paid  
Preparer  
Use Only**

|                               |                                                            |                      |                        |                                                 |                             |
|-------------------------------|------------------------------------------------------------|----------------------|------------------------|-------------------------------------------------|-----------------------------|
| <b>Paid Preparer Use Only</b> | Print/Type preparer's name<br><br>DONITA M JOSEPH          | Preparer's Signature | Date<br><br>2021-05-10 | Check if self-employed <input type="checkbox"/> | PTIN<br><br>P00286656       |
|                               | Firm's name ▶ WINDES INC                                   |                      |                        |                                                 | Firm's EIN ▶ 95-300117      |
|                               | Firm's address ▶ PO BOX 87<br><br>LONG BEACH, CA 908010087 |                      |                        |                                                 | Phone no.<br>(562) 435-1191 |

**Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

**Form 990PF - Special Condition Description:**

**Special Condition Description**

|                                                                                                              |                                                                                                                                                                                     |                                                     |
|--------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| <b>Schedule B</b><br>(Form 990, 990-EZ, or 990-PF)<br>Department of the Treasury<br>Internal Revenue Service | <b>Schedule of Contributors</b><br><br>▶ Attach to Form 990, 990-EZ, or 990-PF.<br>▶ Go to <a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a> for the latest information. | OMB No. 1545-0047                                   |
|                                                                                                              |                                                                                                                                                                                     | <b>2020</b>                                         |
| Name of the organization<br>THE RUDOLPH J & DAPHNE A MUNZER<br>FOUNDATION                                    |                                                                                                                                                                                     | <b>Employer identification number</b><br>33-0686779 |

Organization type (check one):

|                    |                                                                                                           |
|--------------------|-----------------------------------------------------------------------------------------------------------|
| <b>Filers of:</b>  | <b>Section:</b>                                                                                           |
| Form 990 or 990-EZ | <input type="checkbox"/> 501(c)( ) (enter number) organization                                            |
|                    | <input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation |
|                    | <input type="checkbox"/> 527 political organization                                                       |
| Form 990-PF        | <input checked="" type="checkbox"/> 501(c)(3) exempt private foundation                                   |
|                    | <input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation            |
|                    | <input type="checkbox"/> 501(c)(3) taxable private foundation                                             |

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

|                                                                       |                                              |
|-----------------------------------------------------------------------|----------------------------------------------|
| Name of organization<br>THE RUDOLPH J & DAPHNE A MUNZER<br>FOUNDATION | Employer identification number<br>33-0686779 |
|-----------------------------------------------------------------------|----------------------------------------------|

Part I

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                         | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                         |
|------------|-------------------------------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1          | DAPHNE ANN MUNZER ADMINISTRATIVE TRUST<br>3450 EAST SPRING STREET<br>LONG BEACH, CA 90806 | \$ 79,441,712              | <input checked="" type="checkbox"/> Person<br><input type="checkbox"/> Payroll<br><input type="checkbox"/> Noncash<br>(Complete Part II for noncash contributions.) |
| -          |                                                                                           | \$                         | <input type="checkbox"/> Person<br><input type="checkbox"/> Payroll<br><input type="checkbox"/> Noncash<br>(Complete Part II for noncash contributions.)            |
| -          |                                                                                           | \$                         | <input type="checkbox"/> Person<br><input type="checkbox"/> Payroll<br><input type="checkbox"/> Noncash<br>(Complete Part II for noncash contributions.)            |
| -          |                                                                                           | \$                         | <input type="checkbox"/> Person<br><input type="checkbox"/> Payroll<br><input type="checkbox"/> Noncash<br>(Complete Part II for noncash contributions.)            |
| -          |                                                                                           | \$                         | <input type="checkbox"/> Person<br><input type="checkbox"/> Payroll<br><input type="checkbox"/> Noncash<br>(Complete Part II for noncash contributions.)            |
| -          |                                                                                           | \$                         | <input type="checkbox"/> Person<br><input type="checkbox"/> Payroll<br><input type="checkbox"/> Noncash<br>(Complete Part II for noncash contributions.)            |
| -          |                                                                                           | \$                         | <input type="checkbox"/> Person<br><input type="checkbox"/> Payroll<br><input type="checkbox"/> Noncash<br>(Complete Part II for noncash contributions.)            |

|                                                                       |                                                  |
|-----------------------------------------------------------------------|--------------------------------------------------|
| Name of organization<br>THE RUDOLPH J & DAPHNE A MUNZER<br>FOUNDATION | Employer identification number<br><br>33-0686779 |
|-----------------------------------------------------------------------|--------------------------------------------------|

**Part II**      **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a)<br>No. from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(See instructions) | (d)<br>Date received |
|---------------------------|----------------------------------------------|------------------------------------------------|----------------------|
| -                         | <div></div> <div></div> <div></div>          | <div></div> \$                                 | <div></div>          |
| (a)<br>No. from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(See instructions) | (d)<br>Date received |
| -                         | <div></div> <div></div> <div></div>          | <div></div> \$                                 | <div></div>          |
| (a)<br>No. from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(See instructions) | (d)<br>Date received |
| -                         | <div></div> <div></div> <div></div>          | <div></div> \$                                 | <div></div>          |
| (a)<br>No. from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(See instructions) | (d)<br>Date received |
| -                         | <div></div> <div></div> <div></div>          | <div></div> \$                                 | <div></div>          |
| (a)<br>No. from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(See instructions) | (d)<br>Date received |
| -                         | <div></div> <div></div> <div></div>          | <div></div> \$                                 | <div></div>          |
| (a)<br>No. from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(See instructions) | (d)<br>Date received |
| -                         | <div></div> <div></div> <div></div>          | <div></div> \$                                 | <div></div>          |

|                                                                       |                                                  |
|-----------------------------------------------------------------------|--------------------------------------------------|
| Name of organization<br>THE RUDOLPH J & DAPHNE A MUNZER<br>FOUNDATION | Employer identification number<br><br>33-0686779 |
|-----------------------------------------------------------------------|--------------------------------------------------|

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

| (a)<br>No. from<br>Part I | (b) Purpose of gift                   | (c) Use of gift                     | (d) Description of how gift is held      |
|---------------------------|---------------------------------------|-------------------------------------|------------------------------------------|
|                           | <div></div> <div></div> <div></div>   | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div>      |
|                           | (e) Transfer of gift                  |                                     |                                          |
|                           | Transferee's name, address, and ZIP 4 |                                     | Relationship of transferor to transferee |
|                           | <div></div> <div></div> <div></div>   | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div>      |

| (a)<br>No. from<br>Part I | (b) Purpose of gift                   | (c) Use of gift                     | (d) Description of how gift is held      |
|---------------------------|---------------------------------------|-------------------------------------|------------------------------------------|
|                           | <div></div> <div></div> <div></div>   | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div>      |
|                           | (e) Transfer of gift                  |                                     |                                          |
|                           | Transferee's name, address, and ZIP 4 |                                     | Relationship of transferor to transferee |
|                           | <div></div> <div></div> <div></div>   | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div>      |

| (a)<br>No. from<br>Part I | (b) Purpose of gift                   | (c) Use of gift                     | (d) Description of how gift is held      |
|---------------------------|---------------------------------------|-------------------------------------|------------------------------------------|
|                           | <div></div> <div></div> <div></div>   | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div>      |
|                           | (e) Transfer of gift                  |                                     |                                          |
|                           | Transferee's name, address, and ZIP 4 |                                     | Relationship of transferor to transferee |
|                           | <div></div> <div></div> <div></div>   | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div>      |

| (a)<br>No. from<br>Part I | (b) Purpose of gift                   | (c) Use of gift                     | (d) Description of how gift is held      |
|---------------------------|---------------------------------------|-------------------------------------|------------------------------------------|
|                           | <div></div> <div></div> <div></div>   | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div>      |
|                           | (e) Transfer of gift                  |                                     |                                          |
|                           | Transferee's name, address, and ZIP 4 |                                     | Relationship of transferor to transferee |
|                           | <div></div> <div></div> <div></div>   | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div>      |

# Additional Data

[Return to Form](#)

Software ID:

Software Version:

## TY 2020 IRS 990 e-File Render

**Name:** THE RUDOLPH J & DAPHNE A MUNZER  
FOUNDATION

**EIN:** 33-0686779

| Category   | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
|------------|--------|--------------------------|------------------------|---------------------------------------------|
| ACCOUNTING | 27,900 | 27,900                   | 0                      | 0                                           |

## TY 2020 IRS 990 e-File Render

**Name:** THE RUDOLPH J & DAPHNE A MUNZER  
FOUNDATION

**EIN:** 33-0686779

| Name of Stock                          | End of Year Book Value | End of Year Fair Market Value |
|----------------------------------------|------------------------|-------------------------------|
| HALBERT HARGROVE EQUITY - SEE ATTACHED | 114,140                | 114,140                       |
| RUSSELL EQUITY                         | 99,076,372             | 99,076,372                    |

## TY 2020 IRS 990 e-File Render

**Name:** THE RUDOLPH J & DAPHNE A MUNZER  
FOUNDATION

**EIN:** 33-0686779

| Description            | Revenue and<br>Expenses per Books | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable Purposes |
|------------------------|-----------------------------------|--------------------------|------------------------|------------------------------------------|
| OFFICE SUPPLIES        | 16,831                            | 3,342                    | 0                      | 13,489                                   |
| BOARD MEETING EXPENSES | 721                               | 0                        | 0                      | 721                                      |
| DUES & SUBSCRIPTIONS   | 10,403                            | 66                       | 0                      | 10,337                                   |
| INSURANCE              | 3,327                             | 1,664                    | 0                      | 1,663                                    |
| TELEPHONE              | 2,225                             | 111                      | 0                      | 2,114                                    |
| MISCELLANEOUS          | 4,342                             | 242                      | 0                      | 4,100                                    |
| WEBSITE                | 2,299                             | 0                        | 0                      | 2,299                                    |

## TY 2020 IRS 990 e-File Render

**Name:** THE RUDOLPH J & DAPHNE A MUNZER  
FOUNDATION

**EIN:** 33-0686779

| Description          | Revenue And<br>Expenses Per Books | Net Investment<br>Income | Adjusted Net<br>Income |
|----------------------|-----------------------------------|--------------------------|------------------------|
| OTHER INCOME FROM LP | 3,698                             | 3,698                    |                        |
| FOREIGN TAX DEPOSIT  | 75                                | 75                       |                        |

## TY 2020 IRS 990 e-File Render

**Name:** THE RUDOLPH J & DAPHNE A MUNZER  
FOUNDATION

**EIN:** 33-0686779

| Description                                                   | Amount     |
|---------------------------------------------------------------|------------|
| UNREALIZED GAIN                                               | 13,872,356 |
| PRIOR PERIOD ADJUSTMENT FOR PREPAID TAXES                     | 2,570      |
| INCOME FROM PASS-THROUGH ENTITIES NOT INCLUDED IN BOOK INCOME | 4,166      |

## TY 2020 IRS 990 e-File Render

**Name:** THE RUDOLPH J & DAPHNE A MUNZER  
FOUNDATION

**EIN:** 33-0686779

| Category                   | Amount  | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
|----------------------------|---------|--------------------------|------------------------|---------------------------------------------|
| INVESTMENT MANAGEMENT FEES | 441,761 | 441,761                  | 0                      | 0                                           |

## TY 2020 IRS 990 e-File Render

**Name:** THE RUDOLPH J & DAPHNE A MUNZER  
FOUNDATION

**EIN:** 33-0686779

| Category      | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
|---------------|--------|--------------------------|------------------------|---------------------------------------------|
| CA FILING FEE | 1 0    | 1 0                      | 0                      | 0                                           |