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CLIENT'S COPY

LOPEZ ACCOUNTING GROUP
AN ACCOUNTANCY CORPORATION
3500 WEST OLIVE AVENUE, SUITE 680
BURBANK, CA 91505

NOVEMBER 12, 2019

DURFEE FOUNDATION
700 S. FLOWER NO. 560
LOS ANGELES, CA 90017
ATTENTION: CLAIRE PEEPS

DEAR CLAIRE:

ENCLOSED IS THE ORGANIZATION'S 2018 EXEMPT ORGANIZATION RETURNS. THE STATE EXEMPT ORGANIZATION RETURN AND ANNUAL REPORT ARE ALSO ENCLOSED. THESE SHOULD BE SIGNED, DATED, AND MAILED, AS INDICATED.

SPECIFIC FILING INSTRUCTIONS ARE AS FOLLOWS.

FORM 990-PF RETURN:

THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS.

FORM 990-PF HAS AN OVERPAYMENT OF \$36,550. THE ENTIRE OVERPAYMENT HAS BEEN APPLIED TO THE ESTIMATED TAX PAYMENTS.

NO AMOUNT IS DUE ON FORM 990-PF.

PLEASE NOTE THAT THE FORM 990-PF RETURN CONTAINS EXCESS DISTRIBUTION CARRYOVER OF \$228,856. THIS MAY BE APPLIED TO TAX YEAR 2019 AND SUBSEQUENT YEARS.

FORM 990-T RETURN:

FORM 990-T HAS AN OVERPAYMENT OF \$4,092. THE ENTIRE OVERPAYMENT HAS BEEN APPLIED TO THE ESTIMATED TAX PAYMENTS.

NO AMOUNT IS DUE ON FORM 990-T.

PLEASE SIGN AND MAIL ON OR BEFORE NOVEMBER 15, 2019.

MAIL TO:
DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE CENTER
OGDEN, UT 84201-0027

CALIFORNIA FORM 199 RETURN:

THE CALIFORNIA FORM 199 RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE FTB, PLEASE SIGN, DATE AND RETURN FORM 8453-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE FTB. DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE FTB.

YOUR PAYMENT SHOULD BE MADE AS INSTRUCTED BELOW ON OR BEFORE NOVEMBER 15, 2019.

SEPARATELY MAIL CALIFORNIA FORM FTB 3586 WITH A CHECK OR MONEY ORDER FOR \$10, PAYABLE TO FRANCHISE TAX BOARD.

MAIL TO:
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0531

CALIFORNIA FORM RRF-1:

THE CALIFORNIA FORM RRF-1 SHOULD BE MAILED ON OR BEFORE NOVEMBER 15, 2019 TO:

REGISTRY OF CHARITABLE TRUSTS
P.O. BOX 903447
SACRAMENTO, CA 94203-4470

ENCLOSE A CHECK OR MONEY ORDER FOR \$225, PAYABLE TO ATTORNEY GENERAL REGISTRY OF CHARITABLE TRUSTS.

THE REPORT SHOULD BE SIGNED AND DATED BY THE AUTHORIZED INDIVIDUAL(S).

COPIES OF ALL THE RETURNS ARE ENCLOSED FOR YOUR FILES. WE SUGGEST THAT YOU RETAIN THESE COPIES INDEFINITELY.

VERY TRULY YOURS,

JUAN P. LOPEZ, CPA

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2018, or fiscal year beginning _____, 2018, and ending _____, 20____

2018

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization

Employer identification number

DURFEE FOUNDATION

95-4856207

Name and title of officer

**CLAIRE PEEPS
EXECUTIVE DIRECTOR**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, or 5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, or 5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here ▶ <input type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b _____
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input checked="" type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b <u>30,885.</u>
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b _____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize **LOPEZ ACCOUNTING GROUP** to enter my PIN **90401**
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ _____ Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

95514491505

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ 11/12/19

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2018)

823051 10-26-18

Return of Private Foundation

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

2018

Open to Public Inspection

Form **990-PF**

Department of the Treasury
Internal Revenue Service

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

For calendar year 2018 or tax year beginning , and ending

Name of foundation DURFEE FOUNDATION		A Employer identification number 95-4856207
Number and street (or P.O. box number if mail is not delivered to street address) 700 S. FLOWER	Room/suite 560	B Telephone number 310-899-5120
City or town, state or province, country, and ZIP or foreign postal code LOS ANGELES, CA 90017		C If exemption application is pending, check here ... <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ... <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 49,252,814.	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F 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).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	19,039,147.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	1,930.	1,930.		
	4 Dividends and interest from securities	540,060.	540,060.		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	2,640,304.			
	b Gross sales price for all assets on line 6a	8,061,557.			
	7 Capital gain net income (from Part IV, line 2)		2,640,304.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income	-2,036.	0.		STATEMENT 1	
12 Total. Add lines 1 through 11	22,219,405.	3,182,294.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	363,540.	34,022.		329,518.
	14 Other employee salaries and wages	88,172.	5,042.		73,057.
	15 Pension plans, employee benefits	114,656.	12,596.		102,060.
	16a Legal fees				
	b Accounting fees	STMT 2 41,032.	0.		41,032.
	c Other professional fees	STMT 3 70,081.	42,014.		28,067.
	17 Interest	145.	0.		0.
	18 Taxes	STMT 4 182,105.	145.		0.
	19 Depreciation and depletion	25,065.	0.		
	20 Occupancy	91,837.	0.		91,498.
	21 Travel, conferences, and meetings	43,023.	0.		43,023.
	22 Printing and publications				
	23 Other expenses	STMT 5 261,583.	0.		261,583.
	24 Total operating and administrative expenses. Add lines 13 through 23	1,281,239.	93,819.		969,838.
	25 Contributions, gifts, grants paid	2,387,583.			1,779,479.
26 Total expenses and disbursements. Add lines 24 and 25	3,668,822.	93,819.		2,749,317.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	18,550,583.				
b Net investment income (if negative, enter -0-)		3,088,475.			
c Adjusted net income (if negative, enter -0-)			N/A		

Part II Balance Sheets <small>Attached schedules and amounts in the description column should be for end-of-year amounts only.</small>		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing		70,703.	70,703.
	2 Savings and temporary cash investments	1,155,319.	197,608.	197,608.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable	1,960,853.	1,741,930.	1,741,930.
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	35,988.	58,084.	58,084.
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment: basis ▶			
Less: accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other	STMT 6 31,035,254.	47,041,367.	47,041,367.	
14 Land, buildings, and equipment: basis ▶	202,560.			
Less: accumulated depreciation STMT 7 ▶	59,438.	38,417.	143,122.	
15 Other assets (describe ▶				
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	34,225,831.	49,252,814.	49,252,814.	
Liabilities	17 Accounts payable and accrued expenses	21,278.	37,956.	
	18 Grants payable	232,155.	840,260.	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶	0.	188,470.	
23 Total liabilities (add lines 17 through 22)	253,433.	1,066,686.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26, and lines 30 and 31.			
	24 Unrestricted	32,011,545.	46,444,198.	
	25 Temporarily restricted	1,960,853.	1,741,930.	
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances	33,972,398.	48,186,128.		
31 Total liabilities and net assets/fund balances	34,225,831.	49,252,814.		

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 30 (must agree with end-of-year figure reported on prior year's return)	1	33,972,398.
2 Enter amount from Part I, line 27a	2	18,550,583.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	52,522,981.
5 Decreases not included in line 2 (itemize) ▶ UNREALIZED LOSSES ON SECURITIES	5	4,336,853.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	48,186,128.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a SALE OF PUBLICLY TRADED SECURITIES	P		
b SALE OF PUBLICLY TRADED SECURITIES	P		
c PARTNERSHIP PASSTHROUGH GAINS	P		
d PARTNERSHIP PASSTHROUGH GAINS	P		
e CAPITAL GAINS DIVIDENDS			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a 370,514.		380,068.	-9,554.
b 5,826,247.		5,041,185.	785,062.
c 5.			5.
d 12,146.			12,146.
e 1,852,645.			1,852,645.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
			-9,554.
			785,062.
			5.
			12,146.
			1,852,645.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	2,640,304.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	}	3	N/A

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2017	2,788,457.	32,710,682.	.085246
2016	2,504,837.	31,130,749.	.080462
2015	2,315,301.	33,370,738.	.069381
2014	2,115,138.	29,689,585.	.071242
2013	1,602,928.	27,544,212.	.058195

2 Total of line 1, column (d)	2	.364526
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	.072905
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	35,150,626.
5 Multiply line 4 by line 3	5	2,562,656.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	30,885.
7 Add lines 5 and 6	7	2,593,541.
8 Enter qualifying distributions from Part XII, line 4	8	2,749,317.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI 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 Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	30,885.
c All other domestic foundations enter 2% 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	30,885.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	30,885.
6 Credits/Payments:			
a 2018 estimated tax payments and 2017 overpayment credited to 2018	6a	30,435.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	37,000.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	67,435.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	36,550.	
11 Enter the amount of line 10 to be: Credited to 2019 estimated tax <input checked="" type="checkbox"/> 36,550. Refunded <input type="checkbox"/>	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
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?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 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.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input checked="" type="checkbox"/> \$ 0. (2) On foundation managers. <input checked="" type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
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? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • 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?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input checked="" 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 <i>General Instruction G</i> ? If "No," attach explanation	X	
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 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-16 containing questions about controlled entities, distributions, public inspection requirements, website address, books in care, and foreign country interests.

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.

Table with 3 columns: Question, Yes, No. Rows 1a-4b containing questions about disqualifying acts, taxes on failure to distribute income, and business enterprise interests.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

		Yes	No
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))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(3) Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>			
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? N/A <input type="checkbox"/> Yes <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b		X
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No N/A	7b		
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(s) during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

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

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

(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
SEE STATEMENT 11		363,540.	45,707.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). 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
NONE				

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. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 STANTON FELLOWSHIP - RETREAT, QUARTERLY MEETINGS, PROGRAM EVALUATION AND AWARD CEREMONY.	53,791.
2 SPRINGBOARD PROGRAMS - BRAIN TRUST MEETING, MENTOR FEES AND PHOTOGRAPHY.	49,740.
3 SABBATICAL - RETREAT, FACILITATOR FEES AND AWARD CEREMONY.	38,959.
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
3 All other program-related investments. See instructions.	
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	32,342,905.
b	Average of monthly cash balances	1b	1,399,884.
c	Fair market value of all other assets	1c	1,943,126.
d	Total (add lines 1a, b, and c)	1d	35,685,915.
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	35,685,915.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	535,289.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	35,150,626.
6	Minimum investment return. Enter 5% of line 5	6	1,757,531.

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	1,757,531.
2a	Tax on investment income for 2018 from Part VI, line 5	2a	30,885.
b	Income tax for 2018. (This does not include the tax from Part VI.)	2b	1,158.
c	Add lines 2a and 2b	2c	32,043.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,725,488.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,725,488.
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	1,725,488.

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	2,749,317.
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	2,749,317.
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	5	30,885.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,718,432.

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) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				1,725,488.
2 Undistributed income, if any, as of the end of 2018:				
a Enter amount for 2017 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017	205,027.			
f Total of lines 3a through e	205,027.			
4 Qualifying distributions for 2018 from Part XII, line 4: ▶ \$	2,749,317.			
a Applied to 2017, 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 2018 distributable amount				1,725,488.
e Remaining amount distributed out of corpus	1,023,829.			
5 Excess distributions carryover applied to 2018 (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	1,228,856.			
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 2017. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				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)	1,000,000.			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	228,856.			
10 Analysis of line 9:				
a Excess from 2014				
b Excess from 2015				
c Excess from 2016				
d Excess from 2017				
e Excess from 2018	228,856.			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

Table with 5 columns: (a) 2018, (b) 2017, (c) 2016, (d) 2015, (e) Total. Rows include 2a-e (Qualifying distributions) and 3a-d (Alternative tests).

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

1 Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

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

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds.

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

CLAIRE PEEPS, 310-899-5120 1453 THIRD STREET PROMENADE, SANTA MONICA, CA 90401

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

LETTER FORM - GO TO WWW.DURFEE.ORG

c Any submission deadlines:

NO

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

GO TO WWW.DURFEE.ORG

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)				
a Paid during the year				
1IN6 INC PO BOX 222033 SANTA CLARITA, CA 91322		PC	GENERAL OPERATING	75,000.
AIDS WALK LOS ANGELES 3550 WILSHIRE BLVD. #890 LOS ANGELES, CA 90010		PC	GENERAL OPERATING	100.
ASIAN & PACIFIC ISLANDER AMERICANS IN HISTORIC PRESERVATION 2279 GLENDALE BLVD. #3 LOS ANGELES, CA 90039		PC	GENERAL OPERATING	100.
ASIAN AMERICANS ADVANCING JUSTICE, LOS ANGELES 1145 WILSHIRE BLVD., 2ND FLOOR LOS ANGELES, CA 91001		PC	VIGILANT LOVE	35,000.
CALIFORNIA COMMUNITY FOUNDATION 221 S. FIGUEROA ST., SUITE 400 LOS ANGELES, CA 90012		PC	THE DURFEE COMMUNITY FUND (D150)	100,000.
Total	SEE CONTINUATION SHEET(S)			1,779,479.
b Approved for future payment				
ASIAN AMERICANS ADVANCING JUSTICE, LOS ANGELES 1145 WILSHIRE BLVD., 2ND FLOOR LOS ANGELES, CA 91001		PC	VIGILANT LOVE	35,000.
COMMUNITY PARTNERS 1000 N. ALAMEDA ST., SUITE 240 LOS ANGELES, CA 90012		PC	STANTON FELLOWSHIP	13,128.
EARTHWATCH INSTITUTE 1380 SOLDIERS FIELD ROAD BOSTON, MA 02135		PC	IGNITE LA - 2019	6,721.
Total	SEE CONTINUATION SHEET(S)			805,259.

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	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
CALIFORNIA COMMUNITY FOUNDATION 221 S. FIGUEROA ST., SUITE 400 LOS ANGELES, CA 90012		PC	NONPROFIT SUSTAINABILITY INITIATIVE	25,000.
CENTER FOR COURAGE AND RENEWAL 24 ROY ST., BOX #21 SEATTLE, CA 98109		PC	GENERAL OPERATING	250.
CENTER FOR GOOD FOOD PURCHASING 1953 ADDISON STREET BERKELEY, CA 94707		PC	GENERAL OPERATING	800.
CENTER FOR REPRODUCTIVE RIGHTS 199 WATER STREET, 22ND FLOOR NEW YORK, CA 10038		PC	GENERAL OPERATING	100.
CENTER FOR THE PACIFIC ASIAN FAMILY 3424 WILSHIRE BLVD. SUITE 1000 LOS ANGELES, CA 90010		PC	GENERAL OPERATING	50.
COMMUNITY PARTNERS 1000 N. ALAMEDA ST., SUITE 240 LOS ANGELES, CA 90012		PC	GENERAL OPERATING	208.
COMMUNITY PARTNERS 10900 MULHALL ST. EL MONTE, CA 91731		PC	GENERAL OPERATING	100.
COMMUNITY PARTNERS 1000 N. ALAMEDA ST., SUITE 240 LOS ANGELES, CA 90012		PC	STANTON FELLOWSHIP	14,502.
COMMUNITY PARTNERS 1000 N. ALAMEDA ST., SUITE 240 LOS ANGELES, CA 90012		PC	STANTON FELLOWSHIP	15,651.
COMMUNITY PARTNERS 1000 N. ALAMEDA ST., SUITE 240 LOS ANGELES, CA 90012		PC	STANTON FELLOWSHIP	19,838.
Total from continuation sheets				1,569,279.

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	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
COMMUNITY PARTNERS 1000 N. ALAMEDA ST., SUITE 240 LOS ANGELES, CA 90012		PC	STANTON FELLOWSHIP	16,838.
CROWDEN MUSIC CENTER 1475 ROSE STREET BERKLEY, CA 94702		PC	GENERAL OPERATING	125.
EARTHWATCH INSTITUTE 1380 SOLDIERS FIELD ROAD BOSTON, MA 02135		PC	IGNITE LA - 2018	72,000.
EARTHWATCH INSTITUTE 1380 SOLDIERS FIELD ROAD BOSTON, MA 02135		PC	IGNITE LA - 2018	60,155.
EARTHWATCH INSTITUTE 1380 SOLDIERS FIELD ROAD BOSTON, MA 02135		PC	LA OUTREACH COORDINATOR - 2018	30,000.
EARTHWATCH INSTITUTE 1380 SOLDIERS FIELD ROAD BOSTON, MA 02135		PC	IGNITE LA - 2019	400,000.
EPIP/TIDES CENTER PO BOX 29907 SAN FRANCISCO, CA 94129		PC	EPIP GRANT	2,500.
FIRST PLACE FOR YOUTH 426 17TH STREET, SUITE 100 OAKLAND, CA 94612		PC	GENERAL OPERATING	100.
FOOD FORWARD 7412 FULTON AVE. #3 NORTH HOLLYWOOD, CA 91605		PC	GENERAL OPERATING	50,000.
GRAND PERFORMANCES 350 S. GRAND AVENUE STE. A-4 LOS ANGELES, CA 90071		PC	GENERAL OPERATING	50.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	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
HEART OF LOS ANGELES 2701 WILSHIRE BLVD. #100 LOS ANGELES, CA 90057		PC	SABBATICAL PROFESSIONAL DEVELOPMENT FUND - 2018	5,000.
INNERCITY STRUGGLE 530 SOUTH BOYLE AVENUE LOS ANGELES, CA 90033		PC	SABBATICAL PROFESSIONAL DEVELOPMENT FUND - 2018	5,000.
LA CLEANTECH INCUBATOR 525 S. HEWITT ST. LOS ANGELES, CA 90013		PC	LACI AIR GRANT - 2019	100,000.
LA COMPOST 221 W. AVE 45 LOS ANGELES, CA 90065		PC	SPRINGBOARD	50,000.
LA FAMILY HOUSING 7843 LANKERSHIM BLVD. NORTH HOLLYWOOD, CA 91605		PC	SABBATICAL PROFESSIONAL DEVELOPMENT FUND - 2018	5,000.
LA MAS 3051 N. COOLIDGE AVE. LOS ANGELES, CA 90039		PC	SPRINGBOARD	50,000.
LEGAL AID FOUNDATION OF LOS ANGELES 1550 WEST 8TH STREET LOS ANGELES, CA 90017		PC	SABBATICAL PROFESSIONAL DEVELOPMENT FUND - 2018	5,000.
LIBERTY HILL FOUNDATION 6420 WILSHIRE BLVD., SUITE 700 LOS ANGELES, CA 90064		PC	STANTON FELLOWSHIP	9,355.
LIBERTY HILL FOUNDATION 6420 WILSHIRE BLVD., SUITE 700 LOS ANGELES, CA 90064		PC	STANTON FELLOWSHIP	17,355.
LIBERTY HILL FOUNDATION 6420 WILSHIRE BLVD., SUITE 700 LOS ANGELES, CA 90064		PC	STANTON FELLOWSHIP	15,355.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	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
LIBERTY HILL FOUNDATION 6420 WILSHIRE BLVD., SUITE 700 LOS ANGELES, CA 90064		PC	STANTON FELLOWSHIP	8,355.
LIBERTY HILL FOUNDATION 6420 WILSHIRE BLVD., SUITE 700 LOS ANGELES, CA 90064		PC	STANTON FELLOWSHIP	11,355.
LOST ANGELS CHILDREN'S PROJECT 45715 23RD ST. WEST, SUITE 13 LANCASTER, CA 93536		PC	SPRINGBOARD	35,000.
MENTAL HEALTH ADVOCACY SERVICES, INC. 3255 WILSHIRE BLVD., #902 LOS ANGELES, CA 90010		PC	GENERAL OPERATING	10,000.
MINNESOTA LANDSCAPE ARBORETUM 3675 ARBORETUM DRIVE CHASKA, MN 55318		PC	GENERAL OPERATING	125.
MOVE LA 525 S. HEWITT ST. LOS ANGELES, CA 90013		PC	STANTON FELLOWSHIP	6,816.
MOVE LA 525 S. HEWITT ST. LOS ANGELES, CA 90013		PC	STANTON FELLOWSHIP	6,816.
MOVE LA 525 S. HEWITT ST. LOS ANGELES, CA 90013		PC	STANTON FELLOWSHIP	18,266.
MOVE LA 525 S. HEWITT ST. LOS ANGELES, CA 90013		PC	STANTON FELLOWSHIP	11,066.
MOVE LA 525 S. HEWITT ST. LOS ANGELES, CA 90013		PC	STANTON FELLOWSHIP	6,816.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	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
NATIONAL IMMIGRATION LAW CENTER 3435 WILSHIRE BLVD., SUITE 1600 LOS ANGELES, CA 90010		PC	STANTON FELLOWSHIP	14,417.
NATIONAL IMMIGRATION LAW CENTER 3435 WILSHIRE BLVD., SUITE 1600 LOS ANGELES, CA 90010		PC	STANTON FELLOWSHIP	11,117.
NATIONAL IMMIGRATION LAW CENTER 3435 WILSHIRE BLVD., SUITE 1600 LOS ANGELES, CA 90010		PC	STANTON FELLOWSHIP	12,617.
NATIONAL IMMIGRATION LAW CENTER 3435 WILSHIRE BLVD., SUITE 1600 LOS ANGELES, CA 90010		PC	STANTON FELLOWSHIP	8,917.
NATIONAL IMMIGRATION LAW CENTER 3435 WILSHIRE BLVD., SUITE 1600 LOS ANGELES, CA 90010		PC	STANTON FELLOWSHIP	13,517.
PHILANTHROPY NEW YORK 1500 BROADWAY, 7TH FLOOR NEW YORK, NY 10036		PC	TRUST-BASED PHILANTHROPY COLLABORATIVE	25,000.
PILIPINO WORKERS CENTER OF SOUTHERN CALIFORNIA 153 GLENDALE BLVD., 2ND FLOOR LOS ANGELES, CA 90026		PC	SABBATICAL PROFESSIONAL DEVELOPMENT FUND - 2018	5,000.
PILIPINO WORKERS CENTER OF SOUTHERN CALIFORNIA 153 GLENDALE BLVD., 2ND FLOOR LOS ANGELES, CA 90026		PC	INTERIM DIRECTOR BONUS	5,000.
PILIPINO WORKERS CENTER OF SOUTHERN CALIFORNIA 153 GLENDALE BLVD., 2ND FLOOR LOS ANGELES, CA 90026		PC	SABBATICAL PROFESSIONAL DEVELOPMENT FUND - 2018	50,000.
PLANNED PARENTHOOD 400 W. 30TH STREET LOS ANGELES, CA 90007		PC	GENERAL OPERATING	100.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	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
POLICY LINK 1438 WEBSTER STREET, SUITE 303 OAKLAND, CA 94612		PC	STANTON FELLOWSHIP	6,819.
POLICY LINK 1438 WEBSTER STREET, SUITE 303 OAKLAND, CA 94612		PC	STANTON FELLOWSHIP	6,719.
POLICY LINK 1438 WEBSTER STREET, SUITE 303 OAKLAND, CA 94612		PC	STANTON FELLOWSHIP	17,502.
PREVENTION INSTITUTE 4315 LEIMERT BLVD. LOS ANGELES, CA 90008		PC	STANTON FELLOWSHIP	8,970.
PREVENTION INSTITUTE 4315 LEIMERT BLVD. LOS ANGELES, CA 90008		PC	STANTON FELLOWSHIP	14,222.
PREVENTION INSTITUTE 4315 LEIMERT BLVD. LOS ANGELES, CA 90008		PC	STANTON FELLOWSHIP	11,811.
PREVENTION INSTITUTE 4315 LEIMERT BLVD. LOS ANGELES, CA 90008		PC	STANTON FELLOWSHIP	12,932.
PREVENTION INSTITUTE 4315 LEIMERT BLVD. LOS ANGELES, CA 90008		PC	STANTON FELLOWSHIP	21,322.
RIVERSIDE LEGAL AID 4129 MAIN STREET SUITE 101 RIVERSIDE, CA 92501		PC	GENERAL OPERATING	1,000.
SOUTHERN CALIFORNIA LIBRARY 6120 VERMONT AVENUE LOS ANGELES, CA 90044		PC	GENERAL OPERATING	250.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	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
ST. JOSEPH CENTER 204 HAMPTON DRIVE VENICE, CA 90291		PC	SABBATICAL PROFESSIONAL DEVELOPMENT FUND - 2018	5,000.
ST. JOSEPH CENTER 204 HAMPTON DRIVE VENICE, CA 90291		PC	SABBATICAL PROFESSIONAL DEVELOPMENT FUND - 2018	7,000.
TEN TOES IN 24325 CRENSHAW BLVD., #238 TORRANCE, CA 90505		PC	SPRINGBOARD	35,000.
THE MUSEUM OF JURASSIC TECHNOLOGY INC 9341 VENICE BLVD. CULVER CITY, CA 90232		PC	GENERAL OPERATING	250.
THIRD SECTOR NEW ENGLAND 89 SOUTH STREET, SUITE 700 BOSTON, MA 02111		PC	WHAT'S NEXT SERIES - 2018	70,000.
THIRD SECTOR NEW ENGLAND 89 SOUTH STREET, SUITE 700 BOSTON, MA 02111		PC	LEADERSHIP FUNDERS GROUP	5,000.
THIRD SECTOR NEW ENGLAND 89 SOUTH STREET, SUITE 700 BOSTON, MA 02111		PC	WHAT'S NEXT SERIES - 2018	13,500.
THIRD SECTOR NEW ENGLAND 89 SOUTH STREET, SUITE 700 BOSTON, MA 02111		PC	WHAT'S NEXT SERIES - 2019	100,000.
TROUT UNLIMITED 2642 FULTON STREET DENVER, CO 80238		PC	GENERAL OPERATING	250.
WALKER METHODIST FOUNDATION 3737 BRYANT AVE. SOUTH MINNEAPOLIS, MN 55409		PC	GENERAL OPERATING	100.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Approved for Future Payment (Continuation)

Recipient Name and address (home or business)	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
HEART OF LOS ANGELES 2701 WILSHIRE BLVD. #100 LOS ANGELES, CA 90057		PC	SABBATICAL PROFESSIONAL DEVELOPMENT FUND - 2018	55,000.
INNERCITY STRUGGLE 530 SOUTH BOYLE AVENUE LOS ANGELES, CA 90033		PC	SABBATICAL PROFESSIONAL DEVELOPMENT FUND - 2018	55,000.
LA CLEANTECH INCUBATOR 525 S. HEWITT ST. LOS ANGELES, CA 90013		PC	LACI AIR GRANT - 2019	100,000.
LA COMPOST 221 W. AVE 45 LOS ANGELES, CA 90065		PC	SPRINGBOARD	50,000.
LA FAMILY HOUSING 7843 LANKERSHIM BLVD. NORTH HOLLYWOOD, CA 91605		PC	SABBATICAL PROFESSIONAL DEVELOPMENT FUND - 2018	55,000.
LA MAS 3051 N. COOLIDGE AVE. LOS ANGELES, CA 90039		PC	SPRINGBOARD	100,000.
LEGAL AID FOUNDATION OF LOS ANGELES 1550 WEST 8TH STREET LOS ANGELES, CA 90017		PC	SABBATICAL PROFESSIONAL DEVELOPMENT FUND - 2018	55,000.
LIBERTY HILL FOUNDATION 6420 WILSHIRE BLVD., SUITE 700 LOS ANGELES, CA 90064		PC	STANTON FELLOWSHIP	38,225.
MOVE LA 525 S. HEWITT ST. LOS ANGELES, CA 90013		PC	STANTON FELLOWSHIP	50,220.
NATIONAL IMMIGRATION LAW CENTER 3435 WILSHIRE BLVD., SUITE 1600 LOS ANGELES, CA 90010		PC	STANTON FELLOWSHIP	39,415.
Total from continuation sheets				750,410.

Part XV Supplementary Information

3 Grants and Contributions Approved for Future Payment (Continuation)

Recipient Name and address (home or business)	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
POLICY LINK 1438 WEBSTER STREET, SUITE 303 OAKLAND, CA 94612		PC	STANTON FELLOWSHIP	38,807.
PREVENTION INSTITUTE 4315 LEIMERT BLVD. LOS ANGELES, CA 90008		PC	STANTON FELLOWSHIP	30,743.
ST. JOSEPH CENTER 204 HAMPTON DRIVE VENICE, CA 90291		PC	SABBATICAL PROFESSIONAL DEVELOPMENT FUND - 2018	48,000.
TEN TOES IN 24325 CRENSHAW BLVD., #238 TORRANCE, CA 90505		PC	SPRINGBOARD	35,000.
Total from continuation sheets				

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Name of the organization

DURFEE FOUNDATION

Employer identification number

95-4856207

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

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 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 1/3% 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 (entering "N/A" in column (b) instead of the contributor name and address), 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 990-PF, 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 DURFEE FOUNDATION	Employer identification number 95-4856207
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROCKEFELLER PHILANTHROPY ADVISORS 44 MONTGOMERY ST. SAN FRANCISCO, CA 94104	\$ 19,039,147.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization DURFEE FOUNDATION	Employer identification number 95-4856207
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization DURFEE FOUNDATION	Employer identification number 95-4856207
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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 info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

FORM 990-PF	OTHER INCOME		STATEMENT 1
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
STRATEGIC REAL ESTATE FUND III, LP	-1,566.	0.	
TOWNSEND BALANCED REAL ESTATE FUND, L.P.	-470.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	-2,036.	0.	

FORM 990-PF	ACCOUNTING FEES			STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	41,032.	0.		41,032.
TO FORM 990-PF, PG 1, LN 16B	41,032.	0.		41,032.

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	42,014.	42,014.		0.
PAYROLL SERVICE	2,081.	0.		2,081.
TECHNICAL SUPPORT	19,298.	0.		19,298.
WEBSITE MAINTENANCE	6,688.	0.		6,688.
TO FORM 990-PF, PG 1, LN 16C	70,081.	42,014.		28,067.

FORM 990-PF	TAXES			STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAXES	181,960.	0.		0.
FOREIGN TAXES	145.	145.		0.
TO FORM 990-PF, PG 1, LN 18	182,105.	145.		0.

FORM 990-PF

OTHER EXPENSES

STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DIRECT CHARITABLE EXPENSES	184,391.	0.		184,391.
INSURANCE	14,944.	0.		14,944.
MISCELLANEOUS	11,219.	0.		11,219.
OFFICE EXPENSE	20,728.	0.		20,728.
ONLINE APPLICATIONS	17,574.	0.		17,574.
PARKING	7,425.	0.		7,425.
POSTAGE	119.	0.		119.
PROFESSIONAL DEVELOPMENT	1,225.	0.		1,225.
TELEPHONE	3,958.	0.		3,958.
TO FORM 990-PF, PG 1, LN 23	261,583.	0.		261,583.

FORM 990-PF

OTHER INVESTMENTS

STATEMENT 6

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
DIVERSIFIED EMERGING MARKETS EQUITY FUNDS	FMV	3,624,082.	3,624,082.
FOREIGN LARGE BLEND EQUITY FUNDS	FMV	986,408.	986,408.
LARGE BLEND EQUITY FUNDS	FMV	1,148,043.	1,148,043.
LARGE GROWTH EQUITY FUNDS	FMV	8,108,465.	8,108,465.
LARGE VALUE EQUITY FUNDS	FMV	2,970,729.	2,970,729.
SMALL GROWTH EQUITY FUNDS	FMV	3,242,981.	3,242,981.
MONEY MARKET EQUITY FUNDS	FMV	13,081,225.	13,081,225.
HIGH YIELD BONDS	FMV	422,041.	422,041.
INTERMEDIATE-TERM BONDS	FMV	4,326,979.	4,326,979.
MULTI-SECTOR BONDS	FMV	2,152,938.	2,152,938.
SHORT-TERM BONDS	FMV	867,136.	867,136.
LONG-TERM BONDS	FMV	852,270.	852,270.
ALTERNATIVE INVESTMENTS	FMV	5,258,070.	5,258,070.
TOTAL TO FORM 990-PF, PART II, LINE 13		47,041,367.	47,041,367.

FORM 990-PF DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 7

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
WEBSITE	72,790.	58,636.	14,154.
COMPUTER	3,295.	384.	2,911.
LAPTOP	1,795.	209.	1,586.
LAPTOP	1,795.	209.	1,586.
FURNITURE	42,023.	0.	42,023.
LEASEHOLD IMPROVEMENTS	80,862.	0.	80,862.
TOTAL TO FM 990-PF, PART II, LN 14	202,560.	59,438.	143,122.

FORM 990-PF OTHER LIABILITIES STATEMENT 8

DESCRIPTION	BOY AMOUNT	EOY AMOUNT
DEFERRED EXCISE TAXES	0.	188,131.
DEFERRED RENT	0.	339.
TOTAL TO FORM 990-PF, PART II, LINE 22	0.	188,470.

FORM 990-PF EXPLANATION CONCERNING PART VII-A, LINE 12 STATEMENT 9
QUALIFYING DISTRIBUTION STATEMENT

EXPLANATION

THE FOUNDATION TREATED DISTRIBUTIONS TO A DONOR ADVISED FUND AS QUALIFYING DISTRIBUTIONS FOR THE CURRENT YEAR.

FORM 990-PF EXPLANATION CONCERNING PART VII-A, LINE 12 STATEMENT 10
SECTION 170(C)(2)(B) STATEMENT

EXPLANATION

DISTRIBUTIONS BY THE DONOR ADVISED FUND ARE DIRECTED TO GO TO 501(C)(3) CHARITIES TO BE USED TO ACCOMPLISH A PURPOSE DESCRIBED IN SECTION 170(C)(2)(B).

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 11

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
CAROLINE D. AVERY 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	PRESIDENT 30.00	124,309.	24,000.	0.
JONATHAN NEWKIRK 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	VICE PRESIDENT AND 2.00	TREASURER 5,000.	0.	0.
DIANA MCKEE 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	SECRETARY 2.00	5,000.	0.	0.
CHRISTOPHER AVERY 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	TRUSTEE 2.00	5,000.	0.	0.
HALINA AVERY 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	TRUSTEE 2.00	5,000.	0.	0.
MICHAEL NEWKIRK 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	TRUSTEE 2.00	5,000.	0.	0.
PAULA DANIELS 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	TRUSTEE 2.00	5,000.	0.	0.
THEODORE AVERY 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	TRUSTEE 2.00	5,000.	0.	0.
VERA DEVERA 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	TRUSTEE 2.00	5,000.	0.	0.
CLAIRE PEEPS 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	EXECUTIVE DIRECTOR 40.00	199,231.	21,707.	0.

DURFEE FOUNDATION

95-4856207

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

<u>363,540.</u>	<u>45,707.</u>	<u>0.</u>
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2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
11	WEBSITE	08/01/16	SL	3.00		16	72,790.				72,790.	34,373.		24,263.	58,636.
12	COMPUTER	06/06/18	SL	5.00		16	3,295.				3,295.			384.	384.
13	LAPTOP	06/06/18	SL	5.00		16	1,795.				1,795.			209.	209.
14	LAPTOP	06/06/18	SL	5.00		16	1,795.				1,795.			209.	209.
15	FURNITURE	12/31/18	SL	7.00		16	42,023.				42,023.			0.	
16	LEASEHOLD IMPROVEMENTS	12/31/18	SL	15.00		16	80,862.				80,862.			0.	
	* TOTAL 990-PF PG 1 DEPR						202,560.				202,560.	34,373.		25,065.	59,438.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						72,790.			0.	72,790.	34,373.			58,636.
	ACQUISITIONS						129,770.			0.	129,770.	0.			802.
	DISPOSITIONS						0.			0.	0.	0.			0.
	ENDING BALANCE						202,560.			0.	202,560.	34,373.			59,438.
	ENDING ACCUM DEPR											59,438.			
	ENDING BOOK VALUE											143,122.			

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

2018

For calendar year 2018 or other tax year beginning _____, and ending _____

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury Internal Revenue Service

Open to Public Inspection for 501(c)(3) Organizations Only

Form header section including: A Check box if address changed; B Exempt under section 501(c)(3); C Book value of all assets; D Employer identification number 95-4856207; E Unrelated business activity code; F Group exemption number; G Check organization type 501(c) corporation.

H Enter the number of the organization's unrelated trades or businesses. Describe the only (or first) unrelated trade or business here. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No. If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of CLAIRE PEEPS Telephone number 310-899-5120

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales, Cost of goods sold, Capital gain net income, etc. Total income is 0.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

Table with 4 columns: Line number, Description, (A) Income, (B) Expenses, (C) Net. Rows include Compensation of officers, directors, and trustees; Salaries and wages; Repairs and maintenance; etc. Total deductions is 0.

Part III Total Unrelated Business Taxable Income

33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	0.
34	Amounts paid for disallowed fringes	34	6,512.
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34	36	6,512.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36	38	5,512.

Part IV Tax Computation

39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	1,158.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	40	
41	Proxy tax. See instructions	41	
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income. See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	1,158.

Part V Tax and Payments

45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a	
b	Other credits (see instructions)	45b	
c	General business credit. Attach Form 3800	45c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d	
e	Total credits. Add lines 45a through 45d	45e	
46	Subtract line 45e from line 44	46	1,158.
47	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	47	
48	Total tax. Add lines 46 and 47 (see instructions)	48	1,158.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	0.
50a	Payments: A 2017 overpayment credited to 2018	50a	
b	2018 estimated tax payments	50b	
c	Tax deposited with Form 8868	50c	5,250.
d	Foreign organizations: Tax paid or withheld at source (see instructions)	50d	
e	Backup withholding (see instructions)	50e	
f	Credit for small employer health insurance premiums (attach Form 8941)	50f	
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	50g	
51	Total payments. Add lines 50a through 50g	51	5,250.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	52	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	4,092.
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax 4,092. Refunded	55	0.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here	Yes	No
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		
58	Enter the amount of tax-exempt interest received or accrued during the tax year \$		

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.

Signature of officer: _____ Date: _____ Title: **EXECUTIVE DIRECTOR**

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only

Print/Type preparer's name: **JUAN P. LOPEZ, CPA** Preparer's signature: **JUAN P. LOPEZ, CPA** Date: **11/12/19** Check if self-employed PTIN: **P01367411**

Firm's name: **LOPEZ ACCOUNTING GROUP** Firm's EIN: **81-2737245**

Firm's address: **3500 WEST OLIVE AVENUE, SUITE 680 BURBANK, CA 91505** Phone no. **818-840-7075**

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Enter filer's identifying number	
Type or print	Name of exempt organization or other filer, see instructions. DURFEE FOUNDATION	Employer identification number (EIN) or 95-4856207
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 700 S. FLOWER, NO. 560	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LOS ANGELES, CA 90017	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

CLAIRE PEEPS

- The books are in the care of ▶ **700 S. FLOWER, NO. 560 - LOS ANGELES, CA 90017**
Telephone No. ▶ **310-899-5120** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2019**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year **2018** or
▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	67,435.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	30,435.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	37,000.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Enter filer's identifying number	
Type or print	Name of exempt organization or other filer, see instructions. DURFEE FOUNDATION	Employer identification number (EIN) or 95-4856207
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 700 S. FLOWER, NO. 560	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LOS ANGELES, CA 90017	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 7

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

CLAIRE PEEPS

- The books are in the care of ▶ **700 S. FLOWER, NO. 560 - LOS ANGELES, CA 90017**
Telephone No. ▶ **310-899-5120** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2019**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year **2018** or
▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	5,250.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	5,250.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

California Exempt Organization Annual Information Return

Calendar Year 2018 or fiscal year beginning (mm/dd/yyyy) _____, and ending (mm/dd/yyyy) _____

Corporation/Organization name: **DURFEE FOUNDATION**

California corporation number: **2368140**

FEIN: **95-4856207**

Street address (suite or room): **700 S. FLOWER, NO. 560**

City: **LOS ANGELES** State: **CA** ZIP code: **90017**

Foreign country name: _____ Foreign province/state/county: _____ Foreign postal code: _____

A First Return Yes No

B Amended Return Yes No

C IRC Section 4947(a)(1) trust Yes No

D Final Information Return?
 Dissolved Surrendered (Withdrawn) Merged/Reorganized
 Enter date: (mm/dd/yyyy) _____

E Check accounting method: (1) Cash (2) Accrual (3) Other

F Federal return filed? (1) 990T (2) 990PF (3) Sch H (990) (4) Other 990 series

G Is this a group filing? See instructions Yes No

H Is this organization in a group exemption Yes No
If "Yes," what is the parent's name? _____

I Did the organization have any changes to its guidelines not reported to the FTB? See instructions Yes No

J If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions. Yes No

K Is the organization exempt under R&TC Section 23701g? Yes No
If "Yes," enter the gross receipts from nonmember sources \$ _____

L If organization is a public charity exempt under R&TC Section 23701d and meets the filing fee exception, check box. No filing fee is required

M Is the organization a Limited Liability Company? Yes No

N Did the organization file Form 100 or Form 109 to report taxable income? Yes No

O Is the organization under audit by the IRS or has the IRS audited in a prior year? Yes No

P Is federal Form 1023/1024 pending? Yes No
Date filed with IRS _____

Part I Complete Part I unless not required to file this form. See General Information B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	8,601,511	00
	2	Gross dues and assessments from members and affiliates	2		00
	3	Gross contributions, gifts, grants, and similar amounts received STMT 1	3	19,039,147	00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$50,000, see General Information B	4	27,640,658	00
	5	Cost of goods sold	5		00
	6	Cost or other basis, and sales expenses of assets sold	6	5,421,253	00
	7	Total costs. Add line 5 and line 6	7	5,421,253	00
	8	Total gross income. Subtract line 7 from line 4	8	22,219,405	00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	3,060,718	00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	19,158,687	00
Filing Fee	11	Total payments	11		00
	12	Use tax. See General Information K	12		00
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11	13		00
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14		00
	15	Filing fee \$10 or \$25. See General Information F	15		10
	16	Penalties and Interest. See General Information J	16		00
	17	Balance due. Add line 12, line 15, and line 16. Then subtract line 11 from the result	17		10

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.

Sign Here
Signature of officer: _____ Title: **EXECUTIVE DIRE** Date: _____ Telephone: _____

Paid Preparer's Use Only
Preparer's signature: **JUAN P. LOPEZ, CPA** Date: **11/12/19** Check if self-employed: PTIN: **P01367411**
Firm's name (or yours, if self-employed) and address: **LOPEZ ACCOUNTING GROUP**
3500 WEST OLIVE AVENUE, SUITE 680
BURBANK, CA 91505 Firm's FEIN: **81-2737245** Telephone: **818-840-7075**

May the FTB discuss this return with the preparer shown above? See instructions Yes No

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

828951 12-12-18

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	•	1		00	
	2	Interest	•	2	1,930	00	
	3	Dividends	•	3	540,060	00	
	4	Gross rents	•	4		00	
	5	Gross royalties	•	5		00	
	6	Gross amount received from sale of assets (See Instructions) STATEMENT 2	•	6	6,208,912	00	
	7	Other income SEE STATEMENT 3	•	7	1,850,609	00	
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	•	8	8,601,511	00	
	9	Contributions, gifts, grants, and similar amounts paid STATEMENT 10	•	9	1,779,479	00	
	10	Disbursements to or for members	•	10		00	
	11	Compensation of officers, directors, and trustees SEE STATEMENT 4	•	11	363,540	00	
	12	Other salaries and wages	•	12	88,172	00	
	Expenses and Disbursements	13	Interest	•	13	145	00
		14	Taxes	•	14	182,105	00
		15	Rents	•	15	91,837	00
		16	Depreciation and depletion (See instructions)	•	16	25,065	00
		17	Other Expenses and Disbursements SEE STATEMENT 5	•	17	530,375	00
		18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	•	18	3,060,718	00

Schedule L Balance Sheet	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
Assets				
1 Cash		1,155,319		• 268,311
2 Net accounts receivable				•
3 Net notes receivable				•
4 Inventories				•
5 Federal and state government obligations				•
6 Investments in other bonds				•
7 Investments in stock				•
8 Mortgage loans				•
9 Other investments STMT 6		31,035,254		• 47,041,367
10 a Depreciable assets	72,790		202,560	
b Less accumulated depreciation	(34,373)	38,417	(59,438)	143,122
11 Land				•
12 Other assets STMT 7		1,996,841		• 1,800,014
13 Total assets		34,225,831		49,252,814
Liabilities and net worth				
14 Accounts payable		21,278		• 37,956
15 Contributions, gifts, or grants payable		232,155		• 840,260
16 Bonds and notes payable				•
17 Mortgages payable				•
18 Other liabilities STMT 8				188,470
19 Capital stock or principal fund				•
20 Paid-in or capital surplus. Attach reconciliation				•
21 Retained earnings or income fund		33,972,398		• 48,186,128
22 Total liabilities and net worth		34,225,831		49,252,814

Schedule M-1 Reconciliation of income per books with income per return

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.

1 Net income per books	• 14,213,730	7 Income recorded on books this year not included in this return	•
2 Federal income tax	•	8 Deductions in this return not charged against book income this year	•
3 Excess of capital losses over capital gains	•	9 Total. Add line 7 and line 8	
4 Income not recorded on books this year	•	10 Net income per return.	
5 Expenses recorded on books this year not deducted in this return STMT 9	• 4,944,957	Subtract line 9 from line 6	19,158,687
6 Total. Add line 1 through line 5	19,158,687		

CA 199

CASH CONTRIBUTIONS
INCLUDED ON PART I, LINE 3

STATEMENT 1

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
ROCKEFELLER PHILANTHROPY ADVISORS	44 MONTGOMERY ST. SAN FRANCISCO, CA 94104	12/31/18	19,039,147.
TOTAL INCLUDED ON LINE 3			19,039,147.

CA 199 GROSS AMOUNT FROM SALE OF INVESTMENT PROPERTY STATEMENT 2

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
SALE OF PUBLICLY TRADED SECURITIES			PURCHASED
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE
	380,068.	0.	0.
			GROSS SALES PRICE
			370,514.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
SALE OF PUBLICLY TRADED SECURITIES			PURCHASED
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE
	5,041,185.	0.	0.
			GROSS SALES PRICE
			5,826,247.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
PARTNERSHIP PASSTHROUGH GAINS			PURCHASED
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE
	0.	0.	0.
			GROSS SALES PRICE
			5.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
PARTNERSHIP PASSTHROUGH GAINS			PURCHASED
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE
	0.	0.	0.
			GROSS SALES PRICE
			12,146.

TOTAL ON FORM 199, PG 2, LINE 6	5,421,253.	0.	0.	6,208,912.
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CA 199 OTHER INCOME STATEMENT 3

DESCRIPTION	AMOUNT
CAPITAL GAINS DIVIDENDS	1,852,645.
STRATEGIC REAL ESTATE FUND III, LP	-1,566.
TOWNSEND BALANCED REAL ESTATE FUND, L.P.	-470.
TOTAL TO FORM 199, PART II, LINE 7	1,850,609.

CA 199 COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES STATEMENT 4

NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
CAROLINE D. AVERY 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	PRESIDENT 30.00	124,309.
JONATHAN NEWKIRK 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	VICE PRESIDENT AND TREASUR 2.00	5,000.
DIANA MCKEE 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	SECRETARY 2.00	5,000.
CHRISTOPHER AVERY 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	TRUSTEE 2.00	5,000.
HALINA AVERY 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	TRUSTEE 2.00	5,000.
MICHAEL NEWKIRK 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	TRUSTEE 2.00	5,000.
PAULA DANIELS 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	TRUSTEE 2.00	5,000.
THEODORE AVERY 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	TRUSTEE 2.00	5,000.
VERA DEVERA 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	TRUSTEE 2.00	5,000.
CLAIRE PEEPS 1453 THIRD STREET PROMENADE SANTA MONICA, CA 90401	EXECUTIVE DIRECTOR 40.00	199,231.

TOTAL TO FORM 199, PART II, LINE 11

363,540.

CA 199

OTHER EXPENSES

STATEMENT 5

DESCRIPTION	AMOUNT
PENSION PLANS, EMPLOYEE BENEFITS	114,656.
ACCOUNTING FEES	41,032.
OTHER PROFESSIONAL FEES	70,081.
TRAVEL, CONFERENCES, AND MEETINGS	43,023.
DIRECT CHARITABLE EXPENSES	184,391.
INSURANCE	14,944.
MISCELLANEOUS	11,219.
OFFICE EXPENSE	20,728.
ONLINE APPLICATIONS	17,574.
PARKING	7,425.
POSTAGE	119.
PROFESSIONAL DEVELOPMENT	1,225.
TELEPHONE	3,958.
TOTAL TO FORM 199, PART II, LINE 17	530,375.

CA 199

OTHER INVESTMENTS

STATEMENT 6

DESCRIPTION	BEG. OF YEAR	END OF YEAR
DIVERSIFIED EMERGING MARKETS EQUITY FUNDS	1,137,110.	3,624,082.
FOREIGN LARGE BLEND EQUITY FUNDS	4,346,359.	986,408.
LARGE BLEND EQUITY FUNDS	1,201,228.	1,148,043.
LARGE GROWTH EQUITY FUNDS	9,753,013.	8,108,465.
LARGE VALUE EQUITY FUNDS	3,247,596.	2,970,729.
SMALL GROWTH EQUITY FUNDS	3,543,654.	3,242,981.
MONEY MARKET EQUITY FUNDS	57,535.	13,081,225.
HIGH YIELD BONDS	5,345.	422,041.
INTERMEDIATE-TERM BONDS	5,434,909.	4,326,979.
MULTI-SECTOR BONDS	1,545,474.	2,152,938.
SHORT-TERM BONDS	763,031.	867,136.
LONG-TERM BONDS	0.	852,270.
ALTERNATIVE INVESTMENTS	0.	5,258,070.
TOTAL TO FORM 199, SCHEDULE L, LINE 9	31,035,254.	47,041,367.

CA 199

OTHER ASSETS

STATEMENT 7

DESCRIPTION	BEG. OF YEAR	END OF YEAR
GRANTS RECEIVABLE	1,960,853.	1,741,930.
PREPAID EXPENSES AND DEFERRED CHARGES	35,988.	58,084.
TOTAL TO FORM 199, SCHEDULE L, LINE 12	1,996,841.	1,800,014.

CA 199	OTHER LIABILITIES	STATEMENT 8
DESCRIPTION	BEG. OF YEAR	END OF YEAR
DEFERRED EXCISE TAXES	0.	188,131.
DEFERRED RENT	0.	339.
TOTAL TO FORM 199, SCHEDULE L, LINE 18	0.	188,470.

CA 199	EXPENSES RECORDED ON BOOKS THIS YEAR NOT DEDUCTED IN THIS RETURN	STATEMENT 9
DESCRIPTION		AMOUNT
CONTRIBUTIONS AND GRANTS ACCRUAL ADJUSTMENT		608,104.
UNREALIZED LOSSES ON SECURITIES		4,336,853.
TOTAL TO FORM 199, SCHEDULE M-1, LINE 5		4,944,957.

CA 199	CASH CONTRIBUTIONS, GIFTS, GRANTS AND SIMILAR AMOUNTS PAID	STATEMENT 10
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ACTIVITY CLASSIFICATION: GRANTS

DONEES NAME AND ADDRESS	RELATIONSHIP	AMOUNT
1IN6 INC PO BOX 222033, SANTA CLARITA, CA 91322	NONE	75,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS	RELATIONSHIP	AMOUNT
AIDS WALK LOS ANGELES 3550 WILSHIRE BLVD. #890, LOS ANGELES, CA 90010	NONE	100.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

ASIAN & PACIFIC ISLANDER AMERICANS IN HISTORIC
PRESERVATION
2279 GLENDALE BLVD. #3, LOS ANGELES, CA 90039

NONE

100.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

ASIAN AMERICANS ADVANCING JUSTICE, LOS ANGELES
1145 WILSHIRE BLVD., 2ND FLOOR, LOS ANGELES, CA
91001

NONE

35,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

CALIFORNIA COMMUNITY FOUNDATION
221 S. FIGUEROA ST., SUITE 400, LOS ANGELES, CA
90012

NONE

100,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

CALIFORNIA COMMUNITY FOUNDATION
221 S. FIGUEROA ST., SUITE 400, LOS ANGELES, CA
90012

NONE

25,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

CENTER FOR COURAGE AND RENEWAL
24 ROY ST., BOX #21, SEATTLE, CA 98109

NONE

250.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

CENTER FOR GOOD FOOD PURCHASING
1953 ADDISON STREET, BERKELEY, CA 94707

NONE

800.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

CENTER FOR REPRODUCTIVE RIGHTS
199 WATER STREET, 22ND FLOOR, NEW YORK, CA 10038

NONE

100.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

CENTER FOR THE PACIFIC ASIAN FAMILY
3424 WILSHIRE BLVD. SUITE 1000, LOS ANGELES, CA
90010

NONE

50.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

COMMUNITY PARTNERS
1000 N. ALAMEDA ST., SUITE 240, LOS ANGELES, CA
90012

NONE

208.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

COMMUNITY PARTNERS
10900 MULHALL ST., EL MONTE, CA 91731

NONE

100.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

COMMUNITY PARTNERS
1000 N. ALAMEDA ST., SUITE 240, LOS ANGELES, CA
90012

NONE

14,502.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

COMMUNITY PARTNERS
1000 N. ALAMEDA ST., SUITE 240, LOS ANGELES, CA
90012

NONE

15,651.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

COMMUNITY PARTNERS
1000 N. ALAMEDA ST., SUITE 240, LOS ANGELES, CA
90012

NONE

19,838.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

COMMUNITY PARTNERS
1000 N. ALAMEDA ST., SUITE 240, LOS ANGELES, CA
90012

NONE

16,838.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

CROWDEN MUSIC CENTER
1475 ROSE STREET, BERKLEY, CA 94702

NONE

125.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

EARTHWATCH INSTITUTE
1380 SOLDIERS FIELD ROAD, BOSTON, MA 02135

NONE

72,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

EARTHWATCH INSTITUTE
1380 SOLDIERS FIELD ROAD, BOSTON, MA 02135

NONE

60,155.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

EARTHWATCH INSTITUTE
1380 SOLDIERS FIELD ROAD, BOSTON, MA 02135

NONE

30,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

EARTHWATCH INSTITUTE
1380 SOLDIERS FIELD ROAD, BOSTON, MA 02135

NONE

400,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

EPIP/TIDES CENTER
PO BOX 29907, SAN FRANCISCO, CA 94129

NONE

2,500.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

FIRST PLACE FOR YOUTH
426 17TH STREET, SUITE 100, OAKLAND, CA 94612

NONE

100.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

FOOD FORWARD
7412 FULTON AVE. #3, NORTH HOLLYWOOD, CA 91605

NONE

50,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

GRAND PERFORMANCES
350 S. GRAND AVENUE STE. A-4, LOS ANGELES, CA
90071

NONE

50.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

HEART OF LOS ANGELES
2701 WILSHIRE BLVD. #100, LOS ANGELES, CA 90057

NONE

5,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

INNERCITY STRUGGLE
530 SOUTH BOYLE AVENUE, LOS ANGELES, CA 90033

NONE

5,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

LA CLEANTECH INCUBATOR
525 S. HEWITT ST., LOS ANGELES, CA 90013

NONE

100,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

LA COMPOST
221 W. AVE 45, LOS ANGELES, CA 90065

NONE

50,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

LA FAMILY HOUSING
7843 LANKERSHIM BLVD., NORTH HOLLYWOOD, CA 91605

NONE

5,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

LA MAS
3051 N. COOLIDGE AVE., LOS ANGELES, CA 90039

NONE

50,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

LEGAL AID FOUNDATION OF LOS ANGELES
1550 WEST 8TH STREET, LOS ANGELES, CA 90017

NONE

5,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

LIBERTY HILL FOUNDATION
6420 WILSHIRE BLVD., SUITE 700, LOS ANGELES, CA
90064

NONE

9,355.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

LIBERTY HILL FOUNDATION
6420 WILSHIRE BLVD., SUITE 700, LOS ANGELES, CA
90064

NONE

17,355.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

LIBERTY HILL FOUNDATION
6420 WILSHIRE BLVD., SUITE 700, LOS ANGELES, CA
90064

NONE

15,355.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

LIBERTY HILL FOUNDATION
6420 WILSHIRE BLVD., SUITE 700, LOS ANGELES, CA
90064

NONE

8,355.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

LIBERTY HILL FOUNDATION
6420 WILSHIRE BLVD., SUITE 700, LOS ANGELES, CA
90064

NONE

11,355.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

LOST ANGELS CHILDREN'S PROJECT
45715 23RD ST. WEST, SUITE 13, LANCASTER, CA
93536

NONE

35,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

MENTAL HEALTH ADVOCACY SERVICES, INC.
3255 WILSHIRE BLVD., #902, LOS ANGELES, CA 90010

NONE

10,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

MINNESOTA LANDSCAPE ARBORETUM
3675 ARBORETUM DRIVE, CHASKA, MN 55318

NONE

125.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

MOVE LA
525 S. HEWITT ST., LOS ANGELES, CA 90013

NONE

6,816.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

MOVE LA
525 S. HEWITT ST., LOS ANGELES, CA 90013

NONE

6,816.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

MOVE LA
525 S. HEWITT ST., LOS ANGELES, CA 90013

NONE

18,266.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

MOVE LA
525 S. HEWITT ST., LOS ANGELES, CA 90013

NONE

11,066.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

MOVE LA
525 S. HEWITT ST., LOS ANGELES, CA 90013

NONE

6,816.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

NATIONAL IMMIGRATION LAW CENTER
3435 WILSHIRE BLVD., SUITE 1600, LOS ANGELES, CA
90010

NONE

14,417.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

NATIONAL IMMIGRATION LAW CENTER
3435 WILSHIRE BLVD., SUITE 1600, LOS ANGELES, CA
90010

NONE

11,117.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

NATIONAL IMMIGRATION LAW CENTER
3435 WILSHIRE BLVD., SUITE 1600, LOS ANGELES, CA
90010

NONE

12,617.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

NATIONAL IMMIGRATION LAW CENTER
3435 WILSHIRE BLVD., SUITE 1600, LOS ANGELES, CA
90010

NONE

8,917.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

NATIONAL IMMIGRATION LAW CENTER
3435 WILSHIRE BLVD., SUITE 1600, LOS ANGELES, CA
90010

NONE

13,517.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

PHILANTHROPY NEW YORK
1500 BROADWAY, 7TH FLOOR, NEW YORK, NY 10036

NONE

25,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

PILIPINO WORKERS CENTER OF SOUTHERN CALIFORNIA
153 GLENDALE BLVD., 2ND FLOOR, LOS ANGELES, CA
90026

NONE

5,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

PILIPINO WORKERS CENTER OF SOUTHERN CALIFORNIA
153 GLENDALE BLVD., 2ND FLOOR, LOS ANGELES, CA
90026

NONE

5,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

PILIPINO WORKERS CENTER OF SOUTHERN CALIFORNIA
153 GLENDALE BLVD., 2ND FLOOR, LOS ANGELES, CA
90026

NONE

50,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

PLANNED PARENTHOOD
400 W. 30TH STREET, LOS ANGELES, CA 90007

NONE

100.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

POLICY LINK
1438 WEBSTER STREET, SUITE 303, OAKLAND, CA 94612

NONE

6,819.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

POLICY LINK
1438 WEBSTER STREET, SUITE 303, OAKLAND, CA 94612

NONE

6,719.

ORGANIZATIONAL STATUS: PC

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
POLICY LINK 1438 WEBSTER STREET, SUITE 303, OAKLAND, CA 94612	NONE	17,502.

ORGANIZATIONAL STATUS: PC

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
PREVENTION INSTITUTE 4315 LEIMERT BLVD., LOS ANGELES, CA 90008	NONE	8,970.

ORGANIZATIONAL STATUS: PC

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
PREVENTION INSTITUTE 4315 LEIMERT BLVD., LOS ANGELES, CA 90008	NONE	14,222.

ORGANIZATIONAL STATUS: PC

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
PREVENTION INSTITUTE 4315 LEIMERT BLVD., LOS ANGELES, CA 90008	NONE	11,811.

ORGANIZATIONAL STATUS: PC

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
PREVENTION INSTITUTE 4315 LEIMERT BLVD., LOS ANGELES, CA 90008	NONE	12,932.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

PREVENTION INSTITUTE
4315 LEIMERT BLVD., LOS ANGELES, CA 90008

NONE

21,322.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

RIVERSIDE LEGAL AID
4129 MAIN STREET SUITE 101, RIVERSIDE, CA 92501

NONE

1,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

SOUTHERN CALIFORNIA LIBRARY
6120 VERMONT AVENUE, LOS ANGELES, CA 90044

NONE

250.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

ST. JOSEPH CENTER
204 HAMPTON DRIVE, VENICE, CA 90291

NONE

5,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

ST. JOSEPH CENTER
204 HAMPTON DRIVE, VENICE, CA 90291

NONE

7,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

TEN TOES IN
24325 CRENSHAW BLVD., #238, TORRANCE, CA 90505

NONE

35,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

THE MUSEUM OF JURASSIC TECHNOLOGY INC
9341 VENICE BLVD., CULVER CITY, CA 90232

NONE

250.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

THIRD SECTOR NEW ENGLAND
89 SOUTH STREET, SUITE 700, BOSTON, MA 02111

NONE

70,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

THIRD SECTOR NEW ENGLAND
89 SOUTH STREET, SUITE 700, BOSTON, MA 02111

NONE

5,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

THIRD SECTOR NEW ENGLAND
89 SOUTH STREET, SUITE 700, BOSTON, MA 02111

NONE

13,500.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

THIRD SECTOR NEW ENGLAND
89 SOUTH STREET, SUITE 700, BOSTON, MA 02111

NONE

100,000.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

TROUT UNLIMITED
2642 FULTON STREET, DENVER, CO 80238

NONE

250.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

WALKER METHODIST FOUNDATION
3737 BRYANT AVE. SOUTH, MINNEAPOLIS, MN 55409

NONE

100.

ORGANIZATIONAL STATUS: PC

DONEES NAME AND ADDRESS

RELATIONSHIP

AMOUNT

WILDWOOD ELEMENTARY SCHOOL
12201 WASHINGTON PLACE, LOS ANGELES, CA 90066

NONE

1,000.

ORGANIZATIONAL STATUS: PC

TOTAL FOR THIS ACTIVITY 1,779,479.

TOTAL INCLUDED ON FORM 199, PART II, LINE 9

1,779,479.

**Corporation Depreciation
and Amortization**

Attach to Form 100 or Form 100W.

FORM 199

FEIN 95-4856207

Corporation name

California corporation number

DURFEE FOUNDATION

2368140

Part I Election To Expense Certain Property Under IRC Section 179

1	Maximum deduction under IRC Section 179 for California	1	\$25,000
2	Total cost of IRC Section 179 property placed in service	2	
3	Threshold cost of IRC Section 179 property before reduction in limitation	3	\$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property (elected IRC Section 179 cost)	7	
8	Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from prior taxable years	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2019. Add line 9 and line 10, less line 12	13	

Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

(a) Description property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation Method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
14							
SEE STATEMENT	11	202,560.	34,373.				
15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed \$2,000. See instructions for line 14, column (h)					15	25,065

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g); or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h), or Depreciation (if no election is made), enter the amount from line 15, column (g)	16	25,065
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	25,065
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	0

Part IV Amortization

(a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instructions)	(f) Period or percentage	(g) Amortization for this year	
19							
20	Total. Add the amounts in column (g)					20	
21	Total amortization claimed for federal purposes from federal Form 4562, line 44					21	
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 2, line 12					22	

CA 3885

DEPRECIATION

STATEMENT 11

ASSET NO./ DESCRIPTION	DATE IN SERVICE	COST OR BASIS	PRIOR DEPR	METHOD	LIFE	DEPRE- CIATION	BONUS
11 WEBSITE	08/01/16	72,790.	34,373.	SL	3.00	24,263.	
12 COMPUTER	06/06/18	3,295.		SL	5.00	384.	
13 LAPTOP	06/06/18	1,795.		SL	5.00	209.	
14 LAPTOP	06/06/18	1,795.		SL	5.00	209.	
15 FURNITURE	12/31/18	42,023.		SL	7.00	0.	
16 LEASEHOLD IMPROVEMENTS	12/31/18	80,862.		SL	15.00	0.	
TOTAL TO FORM 3885		202,560.	34,373.			25,065.	

Voucher at bottom of page.

DO NOT MAIL A PAPER COPY OF THE CORPORATE OR EXEMPT ORGANIZATION TAX RETURN WITH THE PAYMENT VOUCHER.
If the amount of payment is zero, do not mail this voucher.

WHERE TO FILE: Using black or blue ink, make check or money order payable to the "Franchise Tax Board." Write the corporation number, FEIN, CA SOS file number and "2018 FTB 3586" on the check or money order. Detach voucher below. Enclose, but **do not** staple, payment with voucher and mail to:
**FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0531**

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

WHEN TO FILE:
Corporations - File and Pay by the 15th day of the 4th month following the close of the taxable year.
S corporations - File and Pay by the 15th day of the 3rd month following the close of the taxable year.
Exempt organizations - File and Pay by the 15th day of the 5th month following the close of the taxable year.

When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.

ONLINE SERVICES: Corporations can make payments online using Web Pay for Businesses. Corporations can make an immediate payment or schedule payments up to a year in advance. Go to ftb.ca.gov/pay for more information.

839035 12-12-18

--- DETACH HERE ----- IF NO PAYMENT IS DUE, DO NOT MAIL THIS VOUCHER ----- DETACH HERE ---

CAUTION: You may be required to pay electronically, see instructions.

TAXABLE YEAR **2018** **Payment Voucher for Corporations and Exempt Organizations e-filed Returns**

CALIFORNIA FORM
3586 (e-file)

0000000 DURF 95-4856207 2368140 18 FORM 3
TYB 01-01-2018 TYE 12-31-2018
DURFEE FOUNDATION

700 S FLOWER NO 560
LOS ANGELES CA 90017

(310) 899-5120

Amount of Payment 10.

TAXABLE YEAR
2018

California e-file Return Authorization for Exempt Organizations

FORM
8453-EO

Exempt Organization name	Identifying number
DURFEE FOUNDATION	95-4856207

Part I Electronic Return Information (whole dollars only)

1 Total gross receipts (Form 199, line 4)	1	27,640,658
2 Total gross income (Form 199, line 8)	2	22,219,405
3 Total expenses and disbursements (Form 199, line 9)	3	3,060,718

Part II Settle Your Account Electronically for Taxable Year 2018

4 <input type="checkbox"/> Electronic funds withdrawal	4a Amount	4b Withdrawal date (mm/dd/yyyy)
---	------------------	--

Part III Banking Information (Have you verified the exempt organization's banking information?)

5 Routing number _____	7 Type of account: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
6 Account number _____	

Part IV Declaration of Officer

I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2018 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. **If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay.**

Sign Here		_____ Date		_____ Title
------------------	--	---------------	--	----------------

Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2018 Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for **four** years from the due date of the return or **four** years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

ERO Must Sign	ERO's signature	Date	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's PTIN P01367411
	Firm's name (or yours if self-employed) and address				FEIN 81-2737245
					ZIP code 91505

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid Preparer Must Sign	Paid preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Paid preparer's PTIN
	Firm's name (or yours if self-employed) and address			FEIN
				ZIP code

MAIL TO:
 Registry of Charitable Trusts
 P.O. Box 903447
 Sacramento, CA 94203-4470
 (916) 210-6400

WEB SITE ADDRESS:
www.ag.ca.gov/charities/

**ANNUAL
 REGISTRATION RENEWAL FEE REPORT
 TO ATTORNEY GENERAL OF CALIFORNIA**

Section 12586 and 12587, California Government Code
 11 Cal. Code Regs. section 301-307, 311 and 312

Failure to submit this report annually no later than the 15th day of the 5th month after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties as defined in Government Code section 12586.1. IRS extensions will be honored.

State Charity Registration Number: CT 123130 DURFEE FOUNDATION <small>Name of Organization</small> 700 S. FLOWER, NO. 560 <small>Address (Number and Street)</small> LOS ANGELES, CA 90017 <small>City or Town, State and ZIP Code</small>	Check if: <input type="checkbox"/> Change of address <input type="checkbox"/> Amended report Corporate or Organization No. <u>2368140</u> Federal Employer I.D. No. <u>95-4856207</u>
--	---

ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312)
 Make Check Payable to Attorney General's Registry of Charitable Trusts

Gross Receipts	Fee	Gross Annual Revenue	Fee	Gross Annual Revenue	Fee
Less than \$25,000	0	Between \$100,001 and \$250,000	\$50	Between \$1,000,001 and \$10 million	\$150
Between \$25,000 and \$100,000	\$25	Between \$250,001 and \$1 million	\$75	Between \$10,000,001 and \$50 million	\$225
				Greater than \$50 million	\$300

PART A - ACTIVITIES

For your most recent full accounting period (beginning 01/01/2018 ending 12/31/2018) list:
 Gross annual revenue \$ 22,219,405 Total assets \$ 49,252,814

PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: If you answer "yes" to any of the questions below, you must attach a separate page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?		X
2. During this reporting period, were there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		X
3. During this reporting period, did non-program expenditures exceed 50% of gross revenue?		X
4. During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy.		X
5. During this reporting period, were the services of a commercial fundraiser or fundraising counsel for charitable purposes used? If "yes," provide an attachment listing the name, address, and telephone number of the service provider.		X
6. During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number.		X
7. During this reporting period, did the organization hold a raffle for charitable purposes? If "yes," provide an attachment indicating the number of raffles and the date(s) they occurred.		X
8. Does the organization conduct a vehicle donation program? If "yes," provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fundraiser for charitable purposes.		X
9. Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period?	X	

Organization's area code and telephone number 310-899-5120

 Organization's e-mail address ADMIN@DURFEE.ORG

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete.

CLAIRE PEEPS
EXECUTIVE DIRECTOR

Signature of authorized officer
Printed Name
Title
Date