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CLIENT'S COPY

OLIVA, GODDARD & WRIGHT
CERTIFIED PUBLIC ACCOUNTANTS
9333 GENESEE AVENUE, SUITE 110
SAN DIEGO, CA 92121
(858) 554-0800

NOVEMBER 8, 2017

THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION
11236 EL CAMINO REAL
SAN DIEGO, CA 92130

DEAR CHRIS:

ENCLOSED ARE THE ORIGINAL AND ONE COPY OF THE 2016 EXEMPT
ORGANIZATION RETURNS, AS FOLLOWS...

2016 FORM 990-PF

2016 CALIFORNIA FORM 199

2016 CALIFORNIA FORM RRF-1

EACH ORIGINAL SHOULD BE DATED, SIGNED AND FILED IN ACCORDANCE
WITH THE FILING INSTRUCTIONS. THE COPY SHOULD BE RETAINED
FOR YOUR FILES.

VERY TRULY YOURS,

OLIVA, GODDARD & WRIGHT
CERTIFIED PUBLIC ACCOUNTANTS

Filing Instructions

Prepared for:

THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION
11236 EL CAMINO REAL
SAN DIEGO, CA 92130

Prepared by:

OLIVA, GODDARD & WRIGHT, CPAS
9333 GENESEE AVE, STE 110
SAN DIEGO, CA 92121

2016 FORM 990-PF

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. RETURN FORM 8879-EO TO US BY NOVEMBER 15, 2017.

FORM 990-PF HAS AN OVERPAYMENT OF \$2,148. THE ENTIRE OVERPAYMENT HAS BEEN APPLIED TO THE ESTIMATED TAX PAYMENTS.

2016 CALIFORNIA FORM 199

YOU HAVE A BALANCE DUE OF\$ 10.00

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.

SEPARATELY MAIL CALIFORNIA FORM FTB 3586 WITH A CHECK OR MONEY ORDER FOR \$10.00, PAYABLE TO FRANCHISE TAX BOARD ON OR BEFORE NOVEMBER 15, 2017.

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

Filing Instructions

Prepared for:

THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION
11236 EL CAMINO REAL
SAN DIEGO, CA 92130

Prepared by:

OLIVA, GODDARD & WRIGHT, CPAS
9333 GENESEE AVE, STE 110
SAN DIEGO, CA 92121

2016 CALIFORNIA FORM RRF-1

YOU HAVE A BALANCE DUE OF\$ 150.00

ENCLOSE A CHECK OR MONEY ORDER FOR \$150.00, PAYABLE TO ATTORNEY GENERAL
REGISTRY OF CHARITABLE TRUSTS.

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

PLEASE MAIL ON OR BEFORE NOVEMBER 15, 2017.

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

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2016, or fiscal year beginning _____, 2016, and ending _____, 20____

2016

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**

▶ **Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.**

Name of exempt organization

**THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION**

Employer identification number

33-0833801

Name and title of officer

**CHRISTOPHER WEIL
PRESIDENT**

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 1 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>1,438.</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 2016 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 OLIVA, GODDARD & WRIGHT, CPAS to enter my PIN 33801
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2016 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 2016 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.

33767805201
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2016 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 ▶ 11/08/17

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

Form **990-W**

**Estimated Tax on Unrelated Business Taxable
Income for Tax-Exempt Organizations**

OMB No. 1545-0976

(Worksheet)
Department of the Treasury
Internal Revenue Service

(and on Investment Income for Private Foundations) **FORM 990-PF**

2017

Keep for your records. Do not send to the Internal Revenue Service.

1	Unrelated business taxable income expected in the tax year	1	
2	Tax on the amount on line 1. See instructions for tax computation	2	
3	Alternative minimum tax. See instructions	3	
4	Total. Add lines 2 and 3	4	
5	Estimated tax credits. See instructions	5	
6	Subtract line 5 from line 4	6	
7	Other taxes. See instructions	7	
8	Total. Add lines 6 and 7	8	
9	Credit for federal tax paid on fuels. See instructions	9	
10a	Subtract line 9 from line 8. Note: If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions	10a	
b	Enter the tax shown on the 2016 return. See instructions. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b	1,438.
c	2017 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c	10c	1,600.

		(a)	(b)	(c)	(d)	
11	Installment due dates. See instructions	11	05/15/17	06/15/17	09/15/17	12/15/17
12	Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization."	12	400.	400.	400.	400.
13	2016 Overpayment. See instructions	13				
14	Payment due (Subtract line 13 from line 12)	14				

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2017)

ESTIMATED TAX 1,600.
OVERPAYMENT APPLIED 2,148.
AMOUNT DUE 0.

Return of Private Foundation

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

2016

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.
▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For calendar year 2016 or tax year beginning _____, and ending _____

Name of foundation THE PATRICIA AND CHRISTOPHER WEIL FAMILY FOUNDATION		A Employer identification number 33-0833801
Number and street (or P.O. box number if mail is not delivered to street address) 11236 EL CAMINO REAL	Room/suite	B Telephone number 858-724-6040
City or town, state or province, country, and ZIP or foreign postal code SAN DIEGO, CA 92130		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) ▶ \$ 4,112,044.	J Accounting method: <input checked="" type="checkbox"/> Cash <input 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	1,165,948.		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				
	4 Dividends and interest from securities	68,579.	68,579.		STATEMENT 1
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	107,101.			
	b Gross sales price for all assets on line 6a	1,575,335.			
	7 Capital gain net income (from Part IV, line 2)		107,101.		
	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					
12 Total. Add lines 1 through 11	1,341,628.	175,680.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees	25,063.	25,063.		0.
	c Other professional fees				
	17 Interest				
	18 Taxes	1,743.	1,743.		0.
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses	5,027.	5,027.		0.
	24 Total operating and administrative expenses. Add lines 13 through 23	31,833.	31,833.		0.
	25 Contributions, gifts, grants paid	588,188.			588,188.
26 Total expenses and disbursements. Add lines 24 and 25	620,021.	31,833.		588,188.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	721,607.				
b Net investment income (if negative, enter -0-)		143,847.			
c Adjusted net income (if negative, enter -0-)			N/A		

**THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION**

Form 990-PF (2016)

33-0833801

Page 2

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			
	2 Savings and temporary cash investments	34,431.	693,523.	693,523.
	3 Accounts receivable ▶ Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶ Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶ Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges		2,148.	2,148.
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 5	3,417,111.	3,226,989.	3,168,874.
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment: basis ▶ Less: accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other STMT 6	0.	247,499.	247,499.
	14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation ▶			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	3,451,542.	4,170,159.	4,112,044.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶ _____)			
23 Total liabilities (add lines 17 through 22)	0.	0.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0.	0.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	3,451,542.	4,170,159.	
30 Total net assets or fund balances	3,451,542.	4,170,159.		
31 Total liabilities and net assets/fund balances	3,451,542.	4,170,159.		

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	3,451,542.
2 Enter amount from Part I, line 27a	2	721,607.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	4,173,149.
5 Decreases not included in line 2 (itemize) ▶ FEDERAL TAX	5	2,990.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	4,170,159.

Form 990-PF (2016)

THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION

Form 990-PF (2016)

33-0833801 Page 3

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a FIDELITY #1818	P	04/23/13	10/03/16
b FIDELITY #7850	P		
c FIDELITY #7850	P		
d CAPITAL GAINS DIVIDENDS			
e			

(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 3,970.		4,300.	-330.
b 146,209.		146,196.	13.
c 1,385,029.		1,317,738.	67,291.
d 40,127.			40,127.
e			

(i) F.M.V. 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))
a			-330.
b			13.
c			67,291.
d			40,127.
e			

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	107,101.
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 does not 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))
2015	469,648.	3,429,801.	.136932
2014	511,992.	3,667,482.	.139603
2013	401,179.	3,211,920.	.124903
2012	346,438.	3,037,382.	.114058
2011	410,592.	2,782,118.	.147583

2 Total of line 1, column (d)	2	.663079
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.132616
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	3,154,059.
5 Multiply line 4 by line 3	5	418,279.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	1,438.
7 Add lines 5 and 6	7	419,717.
8 Enter qualifying distributions from Part XII, line 4	8	588,188.

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.

THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION

Form 990-PF (2016)

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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	1,438.
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	1,438.
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	1,438.
6 Credits/Payments:			
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a	3,600.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	3,600.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	14.	
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	2,148.	
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax <input checked="" type="checkbox"/> 2,148. Refunded <input checked="" 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 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 General Instruction T.		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 General Instruction G? 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 2016 or the taxable year beginning in 2016 (see 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

Form 990-PF (2016)

THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION

Form 990-PF (2016)

33-0833801

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Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	X	
Website address ► WWW.WEILFAMILYFOUNDATION.ORG		
14 The books are in care of ► CHRISTOPHER WEIL Telephone no. ► 858-724-6040		
Located at ► 11236 EL CAMINO REAL, SAN DIEGO, CA ZIP+4 ► 92130		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/>		
and enter the amount of tax-exempt interest received or accrued during the year 15 N/A		
16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►		

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A		
Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If "Yes," list the years ►		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016.) N/A		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?		X

Form 990-PF (2016)

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

5a During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? Yes No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) Yes No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Yes No **N/A**
Organizations relying on a current notice regarding disaster assistance check here

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No **N/A**
If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No **N/A**

5b		
6b		X
7b		

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

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

(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 7		0.	0.	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

THE PATRICIA AND CHRISTOPHER WEIL
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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 N/A	
2	
3	
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.

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THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION

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	3,202,090.
b	Average of monthly cash balances	1b	
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	3,202,090.
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	3,202,090.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	48,031.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,154,059.
6	Minimum investment return. Enter 5% of line 5	6	157,703.

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	157,703.
2a	Tax on investment income for 2016 from Part VI, line 5	2a	1,438.
b	Income tax for 2016. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	1,438.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	156,265.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	156,265.
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	156,265.

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	588,188.
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	588,188.
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	1,438.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	586,750.

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.

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FAMILY FOUNDATION

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				156,265.
2 Undistributed income, if any, as of the end of 2016:				
a Enter amount for 2015 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011	277,518.			
b From 2012	196,835.			
c From 2013	245,365.			
d From 2014	332,546.			
e From 2015	305,234.			
f Total of lines 3a through e	1,357,498.			
4 Qualifying distributions for 2016 from Part XII, line 4: ▶ \$	588,188.			
a Applied to 2015, 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 2016 distributable amount				156,265.
e Remaining amount distributed out of corpus	431,923.			
5 Excess distributions carryover applied to 2016 (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	1,789,421.			
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 2015. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7	277,518.			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	1,511,903.			
10 Analysis of line 9:				
a Excess from 2012	196,835.			
b Excess from 2013	245,365.			
c Excess from 2014	332,546.			
d Excess from 2015	305,234.			
e Excess from 2016	431,923.			

**THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION**

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 2016, 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)

	Tax year				(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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).)

SEE STATEMENT 8

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. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

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

c Any submission deadlines:

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

THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION

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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				
ART POWER UCSD 9500 GILLMAN DRIVE MC 0077 LA JOLLA, CA 92093	NONE	EXEMPT	GENERAL FUND	10,000.
BARRIO LOGAN COLLEGE INSTITUTE 1625 NEWTON STREET SAN DIEGO, CA 92113	NONE	EXEMPT	GENERAL FUND	2,500.
CENTER FOR COMMUNITY SOLUTIONS 3657 MONROE STREET CARLSBAD, CA 92008	NONE	EXEMPT	GENERAL FUND	17,500.
CHALLENGED ATHLETES FOUNDATION 9591 WAPLES STREET SAN DIEGO, CA 92121	NONE	EXEMPT	GENERAL FUND	500.
DEL MAR HEIGHTS PTA 1875 CONNECTICUT AVENUE NW #600 WASHINGTON, DC 20009	NONE	EXEMPT	GENERAL FUND	500.
Total	SEE CONTINUATION SHEET(S)			588,188.
b Approved for future payment				
NONE				
Total				0.

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THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION

33-0833801

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
DOCTORS WITHOUT BORDERS P.O. BOX 5030 HAGERSTOWN, MD 21741	NONE	EXEMPT	GENERAL FUND	5,000.
ENVIRONMENTAL DEFENSE FUND P.O. BOX 5055 HAGERSTOWN, MD 21741-5055	NONE	EXEMPT	GENERAL FUND	3,100.
FLIGHT TEST HISTORICAL FOUNDATION P.O. BOX 57 EDWARDS, CA 93523	NONE	EXEMPT	GENERAL FUND	4,000.
GOMPERS CHARTER MIDDLE SCHOOL 1005 47TH STREET SAN DIEGO, CA 92102	NONE	EXEMPT	GENERAL FUND	500.
HOME START INC 5005 TEXAS STREET #203 SAN DIEGO, CA 92108	NONE	EXEMPT	GENERAL FUND	3,000.
INEWSOURCE 5500 CAMPANILE DRIVE, PSFA 361C SAN DIEGO, CA 92182	NONE	EXEMPT	GENERAL FUND	3,000.
JUST IN TIME FOR FOSTER YOUTH P.O. BOX 81292 SAN DIEGO, CA 92138	NONE	EXEMPT	GENERAL FUND	5,000.
KPBS 5200 CAMANILE DRIVE SAN DIEGO, CA 92182	NONE	EXEMPT	GENERAL FUND	500.
LA JOLLA SYMPHONY & CHORUS 9500 GILLMAN DRIVE, UCSD #0361 LA JOLLA, CA 92093	NONE	EXEMPT	GENERAL FUND	2,000.
MAINLY MOZART, INC. 2802 JUAN STREET #29 SAN DIEGO, CA 92110-2763	NONE	EXEMPT	GENERAL FUND	26,950.
Total from continuation sheets				557,188.

THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION

33-0833801

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
MARYMOUNT HIGH SCHOOL 10643 SUNSET BLVD. LOS ANGELES, CA 90077	NONE	EXEMPT	GENERAL FUND	250.
NATIONAL CONFLICT RESOLUTION CENTER 625 BROADWAY, SUITE 1221 SAN DIEGO, CA 92101	NONE	EXEMPT	GENERAL FUND	8,750.
PLAYWRIGHTS PROJECT 3675 RUFFIN ROAD, STE. #330 SAN DIEGO, CA 92123	NONE	EXEMPT	GENERAL FUND	10,000.
PREUSS SCHOOL 8950 VILLA LA JOLLA DRIVE #A124 LA JOLLA, CA 92037	NONE	EXEMPT	GENERAL FUND	32,200.
PROJECT CONCERN 5151 MURPHY CANYON RD #320 SAN DIEGO, CA 92123	NONE	EXEMPT	GENERAL FUND	10,000.
SAN DIEGO GRANT MAKERS 4270 EXECUTIVE SQUARE #200 LA JOLLA, CA 92037	NONE	EXEMPT	GENERAL FUND	1,500.
SAN DIEGO REPERTORY THEATRE 79 HORTON PLAZA SAN DIEGO, CA 92101	NONE	EXEMPT	GENERAL FUND	116,668.
SAN DIEGO RIVER VALLEY CONSERVANCY PO BOX 89 DEL MAR, CA 92014	NONE	EXEMPT	GENERAL FUND	100.
THE CARTER CENTER 453 FREEDOM PARKWAY ATLANTA, GA 30307	NONE	EXEMPT	GENERAL FUND	1,200.
THE SAN DIEGO FOUNDATION 2508 HISTORIC DECATUR ROAD #20 SAN DIEGO, CA 92106	NONE	EXEMPT	SCHOLARSHIPS	228,870.
Total from continuation sheets				

THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION

33-0833801

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
TORREY PINES ASSOCIATION P.O. BOX 2414 DEL MAR, CA 92014	NONE	EXEMPT	GENERAL FUND	500.
UCSD FOUNDATION 9500 GILLMAN DRIVE MC 0536 LA JOLLA, CA 92037	NONE	EXEMPT	GENERAL FUND	5,600.
UNIVERSITY OF REDLANDS P.O. BOX 3080 REDLANDS, CA 92373	NONE	EXEMPT	GENERAL FUND	10,800.
UNIVERSITY OF SAN DIEGO FOUNDATION 9500 GILLMAN DRIVE LA JOLLA, CA 92093	NONE	EXEMPT	GENERAL FUND	41,000.
VOICE OF SAN DIEGO 110 WEST A STREET #650 SAN DIEGO, CA 92101	NONE	EXEMPT	GENERAL FUND	10,000.
WORDS ALIVE 5111 SANTA FE STREET SUITE 219 SAN DIEGO, CA 92109	NONE	EXEMPT	GENERAL FUND	3,300.
SCHOOL OF FIELD STUDIES 100 CUMMINGS CENTER BEVERLY, MA 01915	NONE	EXEMPT	GENERAL FUND	4,000.
BORREGO SPRINGS HIGH SCHOOL 1315 PALM CANYON DRIVE BORREGO SPRINGS, CA 92004	NONE	EXEMPT	COUNSELOR GRANT	15,000.
CASAS DE LUZ SOLANA BEACH SOLANA BEACH, CA 92075	NONE	EXEMPT	GENERAL FUND	2,000.
LEAGUE OF WOMEN VOTERS OF THE US 1730 M STREET NW #1000 WASHINGTON, DC 20036	NONE	EXEMPT	GENERAL FUND	500.
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.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Name of the organization

THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION

Employer identification number

33-0833801

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, 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).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization THE PATRICIA AND CHRISTOPHER WEIL FAMILY FOUNDATION	Employer identification number 33-0833801
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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	CHRISTOPHER & PATRICIA WEIL FAMILY TRUST 11236 EL CAMINO REAL #200 SAN DIEGO, CA 92130	\$ 370,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	CHRISTOPHER & PATRICIA WEIL 2013 CHARITABLE REMAINDER UNITRUST 11236 EL CAMINO REAL #200 SAN DIEGO, CA 92130	\$ 795,948.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" 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 THE PATRICIA AND CHRISTOPHER WEIL FAMILY FOUNDATION	Employer identification number 33-0833801
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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
2	CASH, SECURITIES & INVESTMENT PARTNERSHIP INTEREST	\$ 795,948.	12/22/16
	<hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/>	\$ _____	_____

Name of organization THE PATRICIA AND CHRISTOPHER WEIL FAMILY FOUNDATION	Employer identification number 33-0833801
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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

Underpayment of Estimated Tax by Corporations

Department of the Treasury
Internal Revenue Service

▶ Attach to the corporation's tax return. **FORM 990-PF**

2016

▶ Information about Form 2220 and its separate instructions is at www.irs.gov/form2220.

Name THE PATRICIA AND CHRISTOPHER WEIL FAMILY FOUNDATION	Employer identification number 33-0833801
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Note: Generally, the corporation isn't required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38 on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment			
1 Total tax (see instructions)		1	1,438.
2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a		
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b		
c Credit for federal tax paid on fuels (see instructions)	2c		
d Total. Add lines 2a through 2c		2d	
3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation doesn't owe the penalty		3	1,438.
4 Enter the tax shown on the corporation's 2015 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5		4	3,538.
5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3		5	1,438.

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it doesn't owe a penalty. See instructions.

6 The corporation is using the adjusted seasonal installment method.

7 The corporation is using the annualized income installment method.

8 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment					
		(a)	(b)	(c)	(d)
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	05/15/16	06/15/16	09/15/16	12/15/16
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column.	10	360.	359.	360.	359.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	11				3,600.
Complete lines 12 through 18 of one column before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column	12				
13 Add lines 11 and 12	13				3,600.
14 Add amounts on lines 16 and 17 of the preceding column	14		360.	719.	1,079.
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	0.	0.	0.	2,521.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		360.	719.	
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17	360.	359.	360.	
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18				

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

LHA For Paperwork Reduction Act Notice, see separate instructions. Form 2220 (2016)

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. <i>(C Corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.)</i> See instructions	19			
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2016 and before 7/1/2016	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21}}{366} \times 4\%$ (0.04) ...	22 \$	\$	\$	\$
23 Number of days on line 20 after 06/30/2016 and before 10/1/2016	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23}}{366} \times 4\%$ (0.04) ...	24 \$	\$	\$	\$
25 Number of days on line 20 after 9/30/2016 and before 1/1/2017	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25}}{366} \times 4\%$ (0.04) ...	26 \$	\$	\$	\$
27 Number of days on line 20 after 12/31/2016 and before 4/1/2017	27	SEE ATTACHED WORKSHEET		
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27}}{365} \times 4\%$ (0.04) ...	28 \$	\$	\$	\$
29 Number of days on line 20 after 3/31/2017 and before 7/1/2017	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29}}{365} \times \%$	30 \$	\$	\$	\$
31 Number of days on line 20 after 6/30/2017 and before 10/1/2017	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31}}{365} \times \%$	32 \$	\$	\$	\$
33 Number of days on line 20 after 9/30/2017 and before 1/1/2018	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33}}{365} \times \%$	34 \$	\$	\$	\$
35 Number of days on line 20 after 12/31/2017 and before 3/16/2018	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35}}{365} \times \%$	36 \$	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37 \$	\$	\$	\$
38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 33; or the comparable line for other income tax returns	38			\$ 14.

* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES				STATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
FIDELITY #1818	24,182.	0.	24,182.	24,182.		
FIDELITY #7850	84,524.	40,127.	44,397.	44,397.		
TO PART I, LINE 4	108,706.	40,127.	68,579.	68,579.		

FORM 990-PF	ACCOUNTING FEES				STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
ACCOUNTING FEES	25,063.	25,063.			0.	
TO FORM 990-PF, PG 1, LN 16B	25,063.	25,063.			0.	

FORM 990-PF	TAXES				STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
FOREIGN TAX	603.	603.			0.	
STATE TAX	85.	85.			0.	
TAX & LICENSES	1,055.	1,055.			0.	
TO FORM 990-PF, PG 1, LN 18	1,743.	1,743.			0.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ADMINISTRATIVE EXPENSES	1,600.	1,600.			0.
INVESTMENT MANAGEMENT FEES	3,427.	3,427.			0.
TOTAL TO FORM 990-PF, PG 1, LN 23	5,027.	5,027.			0.

FORM 990-PF	CORPORATE STOCK		STATEMENT	5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
EQUITIES		3,226,989.	3,168,874.	
TOTAL TO FORM 990-PF, PART II, LINE 10B		3,226,989.	3,168,874.	

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
CIC OPPORTUNITIES FUND I LLC	COST	247,499.	247,499.	
TOTAL TO FORM 990-PF, PART II, LINE 13		247,499.	247,499.	

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS STATEMENT 7

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
CHRISTOPHER WEIL 11236 EL CAMINO REAL SAN DIEGO, CA 92130	PRESIDENT 0.00	0.	0.	0.
PATRICIA WEIL 11236 EL CAMINO REAL SAN DIEGO, CA 92130	SECRETARY/TREASURER 0.00	0.	0.	0.
KIT-VICTORIA WELLS 11236 EL CAMINO REAL SAN DIEGO, CA 92130	DIRECTOR 0.00	0.	0.	0.
MATTHEW WEIL 11236 EL CAMINO REAL SAN DIEGO, CA 92130	DIRECTOR 0.00	0.	0.	0.
CAITLIN WEIL 11236 EL CAMINO REAL SAN DIEGO, CA 92130	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

FORM 990-PF PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 8

NAME OF MANAGER
CHRISTOPHER WEIL
PATRICIA WEIL

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.**

▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868 .**

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/efile, click on Charities & Non-Profits, and click on 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 File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. THE PATRICIA AND CHRISTOPHER WEIL FAMILY FOUNDATION	Employer identification number (EIN) or 33-0833801
	Number, street, and room or suite no. If a P.O. box, see instructions. 11236 EL CAMINO REAL	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SAN DIEGO, CA 92130	

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

CHRISTOPHER WEIL

• The books are in the care of ▶ **11236 EL CAMINO REAL - SAN DIEGO, CA 92130**
Telephone No. ▶ **858-724-6040** 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, 2017**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ calendar year **2016** 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	\$	0.
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	\$	0.

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 2016 or fiscal year beginning (mm/dd/yyyy) _____, and ending (mm/dd/yyyy) _____.

Corporation/Organization name
**THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION**

California corporation number
2041526

Additional information. See instructions.
FEIN
33-0833801

Street address (suite or room)
11236 EL CAMINO REAL

PMB no.

City
SAN DIEGO

State
CA

ZIP code
92130

Foreign country name

Foreign province/state/country

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) 990-PF (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 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 a 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 Instructions B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	1,643,914.00
	2	Gross dues and assessments from members and affiliates	2	00
	3	Gross contributions, gifts, grants, and similar amounts received	3	1,165,948.00
	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 Instruction B	4	2,809,862.00
	5	Cost of goods sold	5	00
	6	Cost or other basis, and sales expenses of assets sold	6	1,468,234.00
	7	Total costs. Add line 5 and line 6	7	1,468,234.00
	8	Total gross income. Subtract line 7 from line 4	8	1,341,628.00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	620,021.00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	721,607.00
Filing Fee	11	Total payments	11	00
	12	Use tax. See General Instruction K	12	00
	13	Payment 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 Instruction F	15	10.00
	16	Penalties and Interest. See General Instruction J	16	00
	17	Balance due. Add line 12, line 15, and line 16. Then subtract line 11 from the result	17	10.00

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 **PRESIDENT** Title Date _____

Preparer's signature **11/08/17** Date Check if self-employed

Paid Preparer's Use Only

Firm's name (or yours, if self-employed) and address **OLIVA, GODDARD & WRIGHT, CPAS
9333 GENESEE AVE, STE 110
SAN DIEGO, CA 92121**

Telephone **P00730188
33-0578542
(858) 554-0800**

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

THE PATRICIA AND CHRISTOPHER WEIL
FAMILY FOUNDATION

33-0833801

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.

628951 11-30-16

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	•	1	00	
	2	Interest	•	2	00	
	3	Dividends	•	3	68,579.00	
	4	Gross rents	•	4	00	
	5	Gross royalties	•	5	00	
	6	Gross amount received from sale of assets (See Instructions)	STATEMENT 3	•	6	1,535,208.00
	7	Other income	SEE STATEMENT 4	•	7	40,127.00
	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	1,643,914.00
	9	Contributions, gifts, grants, and similar amounts paid	STATEMENT 5	•	9	588,188.00
	10	Disbursements to or for members		•	10	00
	11	Compensation of officers, directors, and trustees	SEE STATEMENT 6	•	11	0.00
	12	Other salaries and wages		•	12	00
	13	Interest		•	13	00
	14	Taxes		•	14	1,743.00
	15	Rents		•	15	00
	16	Depreciation and depletion (See instructions)		•	16	00
	17	Other Expenses and Disbursements	SEE STATEMENT 7	•	17	30,090.00
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9		•	18	620,021.00

Schedule L Balance Sheet		Beginning of taxable year		End of taxable year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash		34,431.		693,523.
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		3,417,111.		3,226,989.
8	Mortgage loans				
9	Other investments				247,499.
10	a Depreciable assets				
	b Less accumulated depreciation	()		()	
11	Land				
12	Other assets				2,148.
13	Total assets		3,451,542.		4,170,159.
Liabilities and net worth					
14	Accounts payable				
15	Contributions, gifts, or grants payable				
16	Bonds and notes payable				
17	Mortgages payable				
18	Other liabilities				
19	Capital stock or principal fund				
20	Paid-in or capital surplus. Attach reconciliation				
21	Retained earnings or income fund		3,451,542.		4,170,159.
22	Total liabilities and net worth		3,451,542.		4,170,159.

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	•	721,607.
2	Federal income tax	•	
3	Excess of capital losses over capital gains	•	
4	Income not recorded on books this year	•	
5	Expenses recorded on books this year not deducted in this return	•	
6	Total. Add line 1 through line 5		721,607.
7	Income recorded on books this year not included in this return.	•	
8	Deductions in this return not charged against book income this year	•	
9	Total. Add line 7 and line 8		
10	Net income per return. Subtract line 9 from line 6		721,607.

FORM 199

CASH CONTRIBUTIONS
INCLUDED ON PART I, LINE 3

STATEMENT 1

<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>	<u>DATE OF GIFT</u>	<u>AMOUNT</u>
CHRISTOPHER & PATRICIA WEIL FAMILY TRUST	11236 EL CAMINO REAL #200 SAN DIEGO, CA 92130	12/31/16	370,000.
TOTAL INCLUDED ON LINE 3			370,000.

FORM 199

NONCASH CONTRIBUTIONS
INCLUDED ON PART I, LINE 3

STATEMENT 2

CONTRIBUTOR'S NAME

CONTRIBUTOR'S ADDRESS

CHRISTOPHER & PATRICIA WEIL 2013 CHARITABLE REMAINDER UNITRUST 11236 EL CAMINO REAL #200 SAN DIEGO, CA 92130

PROPERTY DESCRIPTION

DATE OF GIFT

TOTAL AMOUNT

FMV OF GIFT

CASH, SECURITIES & INVESTMENT PARTNERSHIP INTEREST	12/22/16	795,948.	795,948.
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TOTAL INCLUDED ON LINE 3

795,948.

FORM 199 GROSS AMOUNT FROM SALE OF INVESTMENT PROPERTY STATEMENT 3

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
FIDELITY #1818	04/23/13	10/03/16	PURCHASED	4,300.	0.	0.	3,970.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
FIDELITY #7850			PURCHASED	146,196.	0.	0.	146,209.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
FIDELITY #7850			PURCHASED	1,317,738.	0.	0.	1,385,029.

TOTAL ON FORM 199, PG 2, LINE 6				1,468,234.	0.	0.	1,535,208.
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FORM 199 OTHER INCOME STATEMENT 4

DESCRIPTION	AMOUNT
CAPITAL GAINS DIVIDENDS	40,127.
TOTAL TO FORM 199, PART II, LINE 7	40,127.

FORM 199 CASH CONTRIBUTIONS, GIFTS, GRANTS AND SIMILAR AMOUNTS PAID STATEMENT 5

ACTIVITY CLASSIFICATION:

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
CENTER FOR COMMUNITY SOLUTIONS 3657 MONROE STREET, CARLSBAD, CA 92008	NONE	17,500.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
FLIGHT TEST HISTORICAL FOUNDATION P.O. BOX 57, EDWARDS, CA 93523	NONE	4,000.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
GOMPERS CHARTER MIDDLE SCHOOL 1005 47TH STREET, SAN DIEGO, CA 92102	NONE	500.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
KPBS 5200 CAMANILE DRIVE, SAN DIEGO, CA 92182	NONE	500.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
MAINLY MOZART, INC. 2802 JUAN STREET #29, SAN DIEGO, CA 92110-2763	NONE	26,950.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
MARYMOUNT HIGH SCHOOL 10643 SUNSET BLVD., LOS ANGELES, CA 90077	NONE	250.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
NATIONAL CONFLICT RESOLUTION CENTER 625 BROADWAY, SUITE 1221, SAN DIEGO, CA 92101	NONE	8,750.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
PROJECT CONCERN 5151 MURPHY CANYON RD #320, SAN DIEGO, CA 92123	NONE	10,000.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
SAN DIEGO GRANT MAKERS 4270 EXECUTIVE SQUARE #200, LA JOLLA, CA 92037	NONE	1,500.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
SAN DIEGO REP 79 HORTON PLAZA, SAN DIEGO, CA 92101	NONE	116,668.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
SAN DIEGO RIVER VALLEY CONSERVANCY PO BOX 89, DEL MAR, CA 92014	NONE	100.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
THE SAN DIEGO FOUNDATION 2508 HISTORIC DECATUR ROAD #20, SAN DIEGO, CA 92106	NONE	228,870.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
UCSD FOUNDATION 9500 GILLMAN DRIVE MC 0536, LA JOLLA, CA 92037	NONE	5,600.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
PREUSS SCHOOL 8950 VILLA LA JOLLA DRIVE #A124, LA JOLLA, CA 92037	NONE	32,200.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
THE CARTER CENTER 453 FREEDOM PARKWAY, ATLANTA, GA 30307	NONE	1,200.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
ART POWER UCSD 9500 GILLMAN DRIVE MC 0077, LA JOLLA, CA 92093	NONE	10,000.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
DOCTORS WITHOUT BORDERS P.O. BOX 5030, HAGERSTOWN, MD 21741	NONE	5,000.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
UNIVERSITY OF REDLANDS P.O. BOX 3080, REDLANDS, CA 92373	NONE	10,800.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
UNIVERSITY OF SAN DIEGO 9500 GILLMAN DRIVE, LA JOLLA, CA 92093	NONE	41,000.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
BARRIO LOGAN COLLEGE INSTITUTE 1625 NEWTON STREET, SAN DIEGO, CA 92113	NONE	2,500.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
CHALLENGED ATHLETES FOUNDATION 9591 WAPLES STREET, SAN DIEGO, CA 92121	NONE	500.
ORGANIZATIONAL STATUS: EXEMPT		

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
DEL MAR HEIGHTS PTA 1875 CONNECTICUT AVENUE NW #600, WASHINGTON, DC 20009	NONE	500.
ORGANIZATIONAL STATUS: EXEMPT		

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
ENVIRONMENTAL DEFENSE FUND P.O. BOX 5055, HAGERSTOWN, MD 21741-5055	NONE	3,100.
ORGANIZATIONAL STATUS: EXEMPT		

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
WORDS ALIVE 5111 SANTA FE STREET SUITE 219, SAN DIEGO, CA 92109	NONE	3,300.
ORGANIZATIONAL STATUS: EXEMPT		

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
INEWSOURCE 5500 CAMPANILE DRIVE, PSFA 361C, SAN DIEGO, CA 92182	NONE	3,000.
ORGANIZATIONAL STATUS: EXEMPT		

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
JUST IN TIME FOR FOSTER YOUTH P.O. BOX 81292, SAN DIEGO, CA 92138	NONE	5,000.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
LA JOLLA SYMPHONY & CHORUS 9500 GILLMAN DRIVE, UCSD #0361, LA JOLLA, CA 92093	NONE	2,000.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
PLAYWRIGHTS PROJECT 3675 RUFFIN ROAD, STE. #330, SAN DIEGO, CA 92123	NONE	10,000.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
TORREY PINES ASSOCIATION P.O. BOX 2414, DEL MAR, CA 92014	NONE	500.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
HOME START INC 5005 TEXAS STREET #203, SAN DIEGO, CA 92108	NONE	3,000.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
VOICE OF SAN DIEGO 110 WEST A STREET #650, SAN DIEGO, CA 92101	NONE	10,000.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
SCHOOL OF FIELD STUDIES 100 CUMMINGS CENTER, BEVERLY, MA 01915	NONE	4,000.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
BORREGO SPRINGS HIGH SCHOOL 1315 PALM CANYON DRIVE, BORREGO SPRINGS, CA 92004	NONE	15,000.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
CASAS DE LUZ SOLANA BEACH, SOLANA BEACH, CA 92075	NONE	2,000.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
LEAGUE OF WOMEN VOTERS OF THE US 1730 M STREET NW #1000, WASHINGTON, DC 20036	NONE	500.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
NATURAL RESOURCES DEFENSE COUNCIL 40 WEST 20TH STREET, NEW YORK, NY 10011	NONE	100.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
EPILEPSY FOUNDATION 5777 W. CENTURY BLVD #820, LOS ANGELES, CA 90045	NONE	1,000.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
SAN DIEGO BOTANIC GARDEN PO BOX 230005, ENCINITAS, CA 92023	NONE	150.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
UNION OF CONCERNED CITIZENS PO BOX 4123, WOBURN, MA 01888	NONE	50.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
NEW YORK CITY BALLET 20 LINCOLN CENTER PLAZA, NEW YORK, NY 10023	NONE	100.

ORGANIZATIONAL STATUS: EXEMPT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
TAYLOR TRUDEAU CYCLE FOR LIFE 7600 DOUBLETREE RANCH RD #100, SCOTTSDALE, AZ 85258	NONE	500.

ORGANIZATIONAL STATUS: EXEMPT

TOTAL FOR THIS ACTIVITY	588,188.
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TOTAL INCLUDED ON FORM 199, PART II, LINE 9	588,188.
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FORM 199 COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES STATEMENT 6

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HRS WORKED/WK</u>	<u>COMPENSATION</u>
CHRISTOPHER WEIL 11236 EL CAMINO REAL SAN DIEGO, CA 92130	PRESIDENT 0.00	0.
PATRICIA WEIL 11236 EL CAMINO REAL SAN DIEGO, CA 92130	SECRETARY/TREASURER 0.00	0.
KIT-VICTORIA WELLS 11236 EL CAMINO REAL SAN DIEGO, CA 92130	DIRECTOR 0.00	0.
MATTHEW WEIL 11236 EL CAMINO REAL SAN DIEGO, CA 92130	DIRECTOR 0.00	0.
CAITLIN WEIL 11236 EL CAMINO REAL SAN DIEGO, CA 92130	DIRECTOR 0.00	0.

TOTAL TO FORM 199, PART II, LINE 11	0.
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FORM 199	OTHER EXPENSES	STATEMENT	7
DESCRIPTION		AMOUNT	
ACCOUNTING FEES			25,063.
ADMINISTRATIVE EXPENSES			1,600.
INVESTMENT MANAGEMENT FEES			3,427.
TOTAL TO FORM 199, PART II, LINE 17			30,090.

FORM 199	INVESTMENTS IN STOCK	STATEMENT	8
DESCRIPTION		BEG. OF YEAR	END OF YEAR
EQUITIES		3,417,111.	3,226,989.
TOTAL TO FORM 199, SCHEDULE L, LINE 7		3,417,111.	3,226,989.

FORM 199	OTHER INVESTMENTS	STATEMENT	9
DESCRIPTION		BEG. OF YEAR	END OF YEAR
CIC OPPORTUNITIES FUND I LLC		0.	247,499.
TOTAL TO FORM 199, SCHEDULE L, LINE 9		0.	247,499.

FORM 199	OTHER ASSETS	STATEMENT	10
DESCRIPTION		BEG. OF YEAR	END OF YEAR
PREPAID EXPENSES AND DEFERRED CHARGES		0.	2,148.
TOTAL TO FORM 199, SCHEDULE L, LINE 12		0.	2,148.

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 or FEIN and "2016 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.

Due to the federal Emancipation Day holiday observed on April 17, 2017, tax returns filed and payments mailed or submitted on April 18, 2017, will be considered timely.

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

639035 12-08-16

--- 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 **2016** **Payment Voucher for Corporations and Exempt Organizations e-filed Returns**

CALIFORNIA FORM
3586 (e-file)

0000000 PATR 33-0833801 2041526 16 FORM 3
TYB 01-01-2016 TYE 12-31-2016
THE PATRICIA AND CHRISTOPHER WEIL FAMILY FOUNDATION

11236 EL CAMINO REAL
SAN DIEGO CA 92130

(858) 724-6040

Amount of Payment 10.

TAXABLE YEAR
2016

California e-file Return Authorization for Exempt Organizations

FORM
8453-EO

Exempt Organization name THE PATRICIA AND CHRISTOPHER WEIL FAMILY FOUNDATION	Identifying number 33-0833801
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Part I Electronic Return Information (whole dollars only)

1 Total gross receipts (Form 199, line 4)	1	<u>2,809,862.00</u>
2 Total gross income (Form 199, line 8)	2	<u>1,341,628.00</u>
3 Total expenses and disbursements (Form 199, line 9)	3	<u>620,021.00</u>

Part II Settle Your Account Electronically for Taxable Year 2016

4 <input type="checkbox"/> Electronic funds withdrawal	4a Amount	4b Withdrawal date (mm/dd/yyyy)
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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 2016 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 _____ **PRESIDENT**
Signature of officer 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, 2016 e-file 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 type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's PTIN
	Firm's name (or yours if self-employed) and address	OLIVA, GODDARD & WRIGHT, CPAS			FEIN 33-0578542
		9333 GENESEE AVE, STE 110			ZIP code 92121
		SAN DIEGO, CA			

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	OLIVA, GODDARD & WRIGHT, CPAS			FEIN 33-0578542
		9333 GENESEE AVE, STE 110			ZIP code 92121
		SAN DIEGO, CA			

MAIL TO:
 Registry of Charitable Trusts
 P.O. Box 903447
 Sacramento, CA 94203-4470
 Telephone: (916) 445-2021

WEB SITE ADDRESS:
<http://ag.ca.gov/charities/>

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

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

Failure to submit this report annually no later than four months and fifteen days 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 113801 THE PATRICIA AND CHRISTOPHER WEIL FAMILY FOUNDATION <small>Name of Organization</small> 11236 EL CAMINO REAL <small>Address (Number and Street)</small> SAN DIEGO, CA 92130 <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>2041526</u> Federal Employer I.D. No. <u>33-0833801</u>
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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 Annual Revenue	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 01/01/2016 ending 12/31/2016) list:
 Gross annual revenue \$ 1,341,628. Total assets \$ 4,112,044.

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 sheet 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, was 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 revenues?		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 858-724-6040

Organization's e-mail address _____

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

CHRISTOPHER WEIL

PRESIDENT

Signature of authorized officer

Printed Name

Title

Date