Public Disclosure Copy

Patrick P Lee Foundation, Inc.

Form 990-PF

Year End: December 31, 2023

Form **990-PF**

Department of the Treasury Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2024 Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047 2023 Open to Public Inspection

For calendar y	year 2023 or tax year beginning		, and ending		
Name of foundation A Employer identification number					number
PATRICK P. LEE FOUNDATION				45-3845576	
	reet (or P.O. box number if mail is not delivered to street as MAIN STREET	ddress)	Room/suite 303	$\begin{array}{c} \textbf{B} \text{Telephone number} \\ \textbf{716-844-31} \end{array}$	0.0
	state or province, country, and ZIP or foreign po AMSVILLE, NY 14221	Istal code		C If exemption application is pe	ending, check here
G Check all th	hat apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here
	Final return	Amended return		0	- H 050/
	Address change	Name change		2. Foreign organizations me check here and attach co	mputation
H Check type	e of organization: \mathbf{X} Section 501(c)(3) ex	empt private foundation		E If private foundation stat	tus was terminated
		Other taxable private foundat		under section 507(b)(1)	(A), check here
	value of all assets at end of year J Accountin	-	Accrual	F If the foundation is in a	
•	II, col. (c), line 16)	her (specify)	-)	under section 507(b)(1)	(B), check here
\$	41,778,087. (Part I, colum		S.)		(4)
Part I An (The nec	alysis of Revenue and Expenses he total of amounts in columns (b), (c), and (d) may not cessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Con	tributions, gifts, grants, etc., received	800,000.		N/A	
2 Chec	ck if the foundation is not required to attach Sch. B rest on savings and temporary	100 510	105 001		
3 cash	n investments	196,740.	195,981.		STATEMENT 1
	idends and interest from securities	650,385.	650,385.		STATEMENT 2
5a Gros	ss rents				
	rental income or (loss) -70 , 426 .	201 600			STATEMENT 3
Gros	gain or (loss) from sale of assets not on line 10 ss sales price for all ets on line 6a 6 , 343 , 898 .	281,600.			
b Gros b asse 7 Capi	ital gain net income (from Part IV, line 2)		281,600.		
8 Net	short-term capital gain		201,000.		
	ome modifications				
Gros	allowances				
	s: Cost of goods sold				
	ss profit or (loss)				
	er income	1,103,627.	1,284,638.		STATEMENT 4
	al. Add lines 1 through 11	3,032,352.	2,412,604.		
13 Com	npensation of officers, directors, trustees, etc.	157,805.	15,070.		142,735.
	er employee salaries and wages	146,369.	25,922.		120,447.
15 Pena	ision plans, employee benefits	35,929.	1,796.		34,133.
S 16a Lega	al fees STMT 5	4,376.	0.		4,376.
b Acc	counting fees STMT 6	18,985.	949.		18,036.
	er professional fees STMT 7	726,506.	724,042.		2,464.
	es STMT 8	49,739.	49,739.		
 16a Lega b Acconstruction c Othe c Othe 17 Inte 18 Taxe 19 Dep 0cc 0cc 0cc 0cc 17 Inte 18 Taxe 19 Dep 19 Dep 10 Dep 10 Dep 11 Taxe 12 Taxe 12 Taxe 12 Taxe 	es S.T.M.T. 8	95,784.	<u> </u>		26,542.
iii 19 Dep	preciation and depletion	<u>13,677.</u> 32,940.	1,647.		31,293.
	supancy	24,033.	3,605.		20,428.
21 Trav 22 Prin	vel, conferences, and meetings	<u>2</u> 1 ,055.	5,005.		20,320.
10 23 Othe	nting and publications er expenses STMT 9	119,349.	71,192.		48,157.
	al operating and administrative		, _ , _ , _ ,		,,
exp	enses. Add lines 13 through 23	1,425,492.	930,963.		448,611.
0 25 Con	ntributions, gifts, grants paid	2,378,179.			2,227,408.
	al expenses and disbursements.				
	l lines 24 and 25	3,803,671.	930,963.		2,676,019.
27 Sub	otract line 26 from line 12:				
a Exce	ess of revenue over expenses and disbursements	-771,319.			
b Net	investment income (if negative, enter -0-)		1,481,641.		
	usted net income (if negative, enter -0-)			N/A	
LHA For Pa	aperwork Reduction Act Notice, see instruction	S. 323501 12-20-23			Form 990-PF (2023)

Form **990-PF** (2023)

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Form 990-PF (2023) PATRICK P. LEE FOUNDATION 45-					3845576 Page 2
	art	Balance Sheets Attached schedules and amounts in the description Beginning of year			f year
•	αιι	column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
		Savings and temporary cash investments	930,639.	390,061.	390,061.
		Accounts receivable			
		Less: allowance for doubtful accounts	54,538.		
	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			
Assets	٩	Prepaid expenses and deferred charges			
Ase		Investments IIC and state government obligations			
-		Investments - corporate stock			
		Investments - corporate bonds			
		Investments - land, buildings, and equipment: basis			
	10	Less: accumulated depreciation			
	12	Investments - mortgage loans	20 271 700	41,371,466.	41,371,466.
	13	Investments - other STMT 10	30,214,109.	41,371,400.	41,371,400.
	14	Land, buildings, and equipment: basis <u>110, 413.</u>	20 270	16 560	16 560
		Less: accumulated depreciation STMT 11 93,853.	28,379.	16,560.	16,560.
		Other assets (describe)			
	16	Total assets (to be completed by all filers - see the	20 200 245	41 550 005	
		instructions. Also, see page 1, item I)	39,288,345.	41,778,087.	41,778,087.
		Accounts payable and accrued expenses			
		Grants payable	526,429.	722,596.	
es		Deferred revenue			
Liabilitie		Loans from officers, directors, trustees, and other disqualified persons			
iab		Mortgages and other notes payable			
	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	526,429.	722,596.	
		Foundations that follow FASB ASC 958, check here			
ŝ		and complete lines 24, 25, 29, and 30.			
ő	24	Net assets without donor restrictions			
Fund Balances	25	Net assets with donor restrictions			
Б В		Foundations that do not follow FASB ASC 958, check here 🔣			
5		and complete lines 26 through 30.			
P.	26	Capital stock, trust principal, or current funds	256,653.	256,653.	
	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds	38,505,263.	40,798,838.	
μĂ	29	Total net assets or fund balances	38,761,916.	41,055,491.	
ž					
	30	Total liabilities and net assets/fund balances	39,288,345.	41,778,087.	
Ρ	art	III Analysis of Changes in Net Assets or Fund Ba	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	29		
1				1	38,761,916.
2 Enter amount from Part I, line 27a2-771,319.3 Other increases not included in line 2 (itemize) UNREALIZED GAIN ON INVESTMENTS33,064,894.					
		lines 1, 2, and 3		4	41,055,491.
				- T	, ,

5 Decreases not included in line 2 (itemize)
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29

5 0. 6 41,055,491. Form **990-PF** (2023)

(a) Lut and describe the kind(s) of property sold (for example, real estate, 2-stroy brick warehouse; or common stock, 200 site, kUC Co.) (b) Data sould (f) Data	Form 990-PF (2023) PATRICK P. LEE FOUL			45-384	15576 Page 3
1s XI CAP ITAL LOSS P c SRA PRIVATE EQUITY PORTFOLIO I (E&F) SPC P d	•		(h) Haw as a wine d		
1s XI CAP ITAL LOSS P c SRA PRIVATE EQUITY PORTFOLIO I (E&F) SPC P d			P - Purchase D - Donation		
c SRA PRIVATE EQUITY PORTFOLIO I (E&F) SPC P d d d d d d d e (f) Gars sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis (h) Sale or other bane band or other band ba sale or other bane band basis (1a K1 CAPITAL GAIN				
d (c) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale (h) Gain or (loss) (c) plus (f) minus (g)) a 421,578. 421,578. 421,578. b 5,922,320. 6,052,681. -130,361. c 9,617. -9,617. -9,617. d (i) Adjusted basis as of 12/31/69 (i) Adjusted basis as of 12/31/69 (ii) Adjusted basis over col. (i), if any (ii) Gains (Col. (ii) gain minus col. (ii), but not less than -0-) or Lösses (mol. (hi) a -130,361. -130,361. -130,361. c -130,361. -130,361. -9,617. d -130,361. -9,617. -9,617. d -130,361. -9,617. -9,617. d -130,361. -9,617. -130,361. c -130,361. -9,617. -130,361. c -130,361. -9,617. -9,617. d -130,361. -9,617. -9,617. d -130,361. -130,361. -130,361. c -130,361. -130,361.			P		
e (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale (h) Gain or (loss) a 4 21, 578. 4 4 21, 578. 4 9, 617. -130, 361. b 5, 922, 320. 6, 052, 681. -130, 361. c 9, 617. -9, 617. -9, 617. d 0 0 (i) Adjusted basis as or 12/31/69 (i) Adjusted basis over col. (i), if any (i) Gains (Col. (i) gain minus col. (k), but offers than -9) or Losses (from col. (h)) a 0 0 (i) Adjusted basis as or 12/31/69 (i) Adjusted basis over col. (j), if any (i) Gains (Col. (h) gain minus col. (k), but offers than -9) or Losses (from col. (h)) a -130, 361. -9, 617. -9, 617. d -130, 361. -130, 361. -130, 361. c -130, 361. -9, 617. -9, 617. d -9, 617. -9, 617. -9, 617. d -130, 361. -130, 361. -130, 361. s V -130, 361. -9, 617. d -130, 361. -130, 361. -130, 361. c -2 Captal gain net income or (net capital los.) (f train, also enter in Part I, line 7 <td><u>c SRA PRIVATE EQUITY PORTFOLIO</u></td> <td>(E&F) SPC</td> <td>P</td> <td></td> <td></td>	<u>c SRA PRIVATE EQUITY PORTFOLIO</u>	(E&F) SPC	P		
(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cast or other basis plus expense of sale (h) Gain or (loss) ((e) plus (f) minus (g)) a 421,578. 421,578. b 5,922,320. 6,052,681. -130,361. c 9,617. -9,617. d 9,617. -9,617. e 0 (f) Adjusted basis as of 12/31/69 (f) Adjusted basis (h) Excess of col. (i) complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (f) Gains (Col. (h) gain minus col. (k), but not test share -0) or Losses (from col. (h) a -130,361. -130,361. -9,617. c -130,361. -9,617. -9,617. d -130,361. -130,361. -9,617. c -130,361. -9,617. -130,361. c -130,361. -9,617. -9,617. d -79,617. -130,361. -9,617. d -130,361. -9,617. -9,617. d -130,361. -9,617. -9,617. d -130,361. -9,617. -9,617. d 10,00000000000000000000000000000000000	_d				
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Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (in)) a (i) Adjusted basis over col. (i), if any (i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (in)) a 421,578. b -130,361. c -130,361. d -9,617. d -2 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. yart, line 8. 1 Part V Excess of on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(a)(2), check here income or (attack copy of letter if necessary - see instructions) 1a Exempt operating foundations described in section 4940(a)(2), check here income or a subtract line 4 from line 27b. Exempt foreign organizations, enter -0- 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0- 3 200,5955. 4 duiting a romewers taw payments and 2020 overpayment credited to 2023 6a 16,430 6a 0 7 444,930 8 Exempt operating organizations - tax withheld at source dimi	d				
(i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) over col. (j), if any col. (k), but not less than -0-) or Losses (from col. (k)) a 421, 578. b -130, 361. c -9, 617. d -29, 617. d -29, 617. d -20, 617. gain asis enter in Part I, line 8, column (c). See instructions, If (loss), enter -0- in Part I, line 8 N/A Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions) 1 Exempt operating foundations described in section 4940(0)(2), check her and metr *1/A* on line 1. Date of ruling or determination letter: (attach copy of letter if necessary - see instructions) 1 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 3 20, 595. 4 0. 5 20, 595. 4 0. 5 Tax	e				
(i) FMV as of 12/31/69 (i) FMV as of 12/31/69 (ii) FMV as of 12/31/69 (iii) FMV as of 12/31/69 a a 421,578. b -130,361. c -9,617. d -9,617. d -9,617. d -9,617. d -9,617. d -9,617. e -130,361. c -9,617. d -9,617. d -9,617. d -9,617. e -130,361. c -9,617. d -9,617. d -9,617. d -9,617. d -130,361. e -130,361. c -22,617. dian,also enter in Part I, line 7. 2 Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: -0 Add ines 1 ad 2 -0.0 2 ava uder section 511 (Complete only for assets showing gain in column (h) and owned by	y the foundation on 12/31/69.			
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c -9,617. d -9,617. e -9,617. 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 If (loss), enter -0- in Part I, line 7 2 281,600. 3 N/A -9,617. -9,617. -9,617. 4 -9,617. -9,617. -9,617. 5 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7. 2 281,600. 3 N/A -9,617. -9,617. -9,617. -9,617. 4 -9,617. -9,617. -9,617. -9,617. 3 Capital gain net income or (net capital gain or (loss) as defined in section 1940(a), check here	a				421,578.
c -9,617. d -9,617. e -9,617. 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 If (loss), enter -0- in Part I, line 7 2 281,600. 3 N/A -9,617. -9,617. -9,617. 4 -9,617. -9,617. -9,617. 5 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7. 2 281,600. 3 N/A -9,617. -9,617. -9,617. -9,617. 4 -9,617. -9,617. -9,617. -9,617. 3 Capital gain net income or (net capital gain or (loss) as defined in section 1940(a), check here	b				-130,361.
e If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 1 2 281,600. Part V Excise Tax Based on Investment Income (Section 4940(d)(2), deck here and etermination letter: Date of ruling or determination letter: (attach copy of letter if necessary - see instructions) 1 20,595. b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) 1 20,595. 2 0. 3 20,595. 4 Subtite A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 2 0. 5 Cacitis/Payments: a 2023 estimated tax payments and 2022 overpayment credited to 2023 6a 16,430. 6b 0. 6 0. 6c 28,500. 6c 28,500. 6c 28,500. 8 0. 7 7 44,930. 8 0. 9 0 24,335. 1 24,335.	C				-9,617.
2 Capital gain net income or (net capital loss)	d				
2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 2 281,600. 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). See instructions. If (loss), enter -0- in Part I, line 8 1 N/A Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions) 1 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. 20,595. b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) 1 20,595. 4 Ad lines 1 and 2 0. 3 20,595. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0- 5 20,595. 5 Tax based on investment income. Subtract line 3. If zero or less, enter -0- 5 20,595. 6 D 0. 6 0. 7 Total credits and payments. 6 0. 7 44,930. 8 Enter any panelty for underpayment of estimated tax. Check here if Form 2220 is attached 8 0. 9 Total credits and payments. Add lines 5 and 8 is more than line 7, enter amount owed 9 0 0 24,335.	e				
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): 1 N/A Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1. 1 20, 595. 1 All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) 1 20, 595. 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 2 0. 3 20, 595. 3 20, 595. 4 Miles 1 and 2 0. 3 20, 595. 5 20, 595. 3 20, 595. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 3 20, 595. 5 20, 595. 5 20, 595. 5 20, 595. 6 Credits/Payments: 6a 16, 430. 6b 0. 6 0. 6a 0. 6a 0. 6a 0. 7 7 44, 930. 6a 0. 6a 0. 0. 8 0.<	2 Capital gain net income or (net capital loss)	ter in Part I, line 7 -0- in Part I, line 7	2		281,600.
If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in 3 N/A Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions) 1 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. 1 20, 595. 1a Exempt operating foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) 1 20, 595. 2 0. 3 20, 595. 3 20, 595. 4 Add lines 1 and 2 3 20, 595. 4 0. 5 20, 595. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0- 5 20, 595. 5 Credits/Payments: a 2023 estimated tax payments and 2022 overpayment credited to 2023 6a 16, 430. 6b 0. 6 a 0. 0. 6a 0. 7 44, 930. 8 0. 7 total credits na payments. Add lines 6 at through 6d 7 44, 930. 8 0. 9 0 24, 335. 8 0. 1 24, 335. 11 0. 0 24, 335. 11 0. <t< td=""><td></td><td></td><td></td><td></td><td></td></t<>					
Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary - see instructions) b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) 1 20, 595. c Add lines 1 and 2 2 0. 3 20, 595. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 4 0. 5 20, 595. 4 0. 5 20, 595. 6 a 16, 430. 5 20, 595. 5 20, 595. 7 203 estimated tax payments and 2022 overpayment credited to 2023 6a 16, 430. 5 20, 595. 8 0. 6b 0. 6c 28, 5000. 6d 0. 8 0. 6d 0. 6d 0. 9 0 0 24, 335. 9 10 24, 335.				•-	
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary - see instructions) 1 20,595. b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) 2 0. 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 3 20,595. 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 20,595. 6 Credits/Payments: a 22,595. 5 a 2023 estimated tax payments and 2022 overpayment credited to 2023 6a 16,430. 5 6 0. 6c 28,500. 6 0. 7 Total credits and payments. Add lines 6a through 6d 7 44,930. 8 0. 8 0. 9 10 24,335. 8 10 24,335. 10 0.24,335. 11 0. 0. 11 <td< td=""><td></td><td></td><td></td><td></td><td></td></td<>					
Date of ruling or determination letter:				- see instructio	ons)
b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) 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-) 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Credits/Payments: a 2023 estimated tax payments and 2022 overpayment credited to 2023 6a 16, 430. 6b 0. 6c 28, 500. 6d 0. 7 Total credits and payments. Add lines 6a through 6d 7 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 24, 335. 11 11 0.					
4% (0.04) of Part I, line 12, col. (b) 2 0. 2 0. 3 20,595. 3 20,595. 3 20,595. 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 20,595. 6 Credits/Payments: a 16,430. 6 0. 6 0. 6 0. 6 0. 6 28,500. 6 7 Total credits and payments. Add lines 6a through 6d 7 44,930. 8 0. 8 0. 0. 9 10 24,335. 8 10 24,335. 8 11 0.				1	20,595.
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 3 200,595. 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 20,595. 6 Credits/Payments: a 16,430. 6 0. 6 16,430. 6 0. 6 28,500. 6 7 Total credits and payments. Add lines 6 a through 6d 7 44,930. 8 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overpaid 10 24,335. 11 0.					
3 Add lines 1 and 2 3 20,595. 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 20,595. 6 Credits/Payments: a 2023 estimated tax payments and 2022 overpayment credited to 2023 6a 16,430. b Exempt foreign organizations - tax withheld at source 6b 0. 0. 6 C 28,500. 6d 0. 7 Total credits and payments. Add lines 6a through 6d 7 44,930. 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overpaid 10 24,335. 11 Enter the amount of line 10 to be: Credited to 2024 estimated tax 24,335.	4% (0.04) of Part I, line 12, col. (b)				
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 20,595. 6 Credits/Payments: a 2023 estimated tax payments and 2022 overpayment credited to 2023 6a 16,430. 5 20,595. b Exempt foreign organizations - tax withheld at source 6b 0. 6c 28,500. 6d 0. c Tax paid with application for extension of time to file (Form 8868) 6d 0. 6d 0. 6d 0. 6d 0. 6d 0.	2 Tax under section 511 (domestic section 4947(a)(1) trusts and ta	xable foundations only; others, en	ter -0-)		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 20,595. 6 Credits/Payments: a 2023 estimated tax payments and 2022 overpayment credited to 2023 6a 16,430. b Exempt foreign organizations - tax withheld at source 6b 0. 6c 28,500. c Tax paid with application for extension of time to file (Form 8868) 6d 0. 6d 0. 7 Total credits and payments. Add lines 6a through 6d 7 44,930. 8 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 9 10 24,335. 11 Enter the amount of line 10 to be: Credited to 2024 estimated tax 24,335. Refunded 11 0.					
6 Credits/Payments: a 2023 estimated tax payments and 2022 overpayment credited to 2023 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 10 24,335. 11 Enter the amount of line 10 to be: Credited to 2024 estimated tax	4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and ta	axable foundations only; others, er	nter -0-)	4	
a 2023 estimated tax payments and 2022 overpayment credited to 2023 6a 16,430. b Exempt foreign organizations - tax withheld at source 6b 0. c Tax paid with application for extension of time to file (Form 8868) 6c 28,500. d Backup withholding erroneously withheld 6d 0. 7 Total credits and payments. Add lines 6a through 6d 7 44,930. 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 9 10 24,335. 10 24,335. 11 Enter the amount of line 10 to be: Credited to 2024 estimated tax 24,335. 11	5 Tax based on investment income. Subtract line 4 from line 3. If	zero or less, enter -0-		5	20,595.
b Exempt foreign organizations - tax withheld at source 6b 0. c Tax paid with application for extension of time to file (Form 8868) 6c 28,500. d Backup withholding erroneously withheld 6d 0. 7 Total credits and payments. Add lines 6a through 6d 7 44,930. 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 9 10 24,335. 10 24,335. 11 Enter the amount of line 10 to be: Credited to 2024 estimated tax 24,335. 11	-	1 1			
c Tax paid with application for extension of time to file (Form 8868) 6c 28,500. d Backup withholding erroneously withhold 6d 0. 7 Total credits and payments. Add lines 6a through 6d 7 44,930. 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 9 10 24,335. 10 24,335. 11 Enter the amount of line 10 to be: Credited to 2024 estimated tax 24,335. 11					
d Backup withholding erroneously withheld 6d 0. 7 Total credits and payments. Add lines 6a through 6d 7 44,930. 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 9 10 0 24,335. 10 24,335. 11 Enter the amount of line 10 to be: Credited to 2024 estimated tax 24,335. 11					
7 Total credits and payments. Add lines 6a through 6d 7 44,930. 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 24,335. 11 Enter the amount of line 10 to be: Credited to 2024 estimated tax 24,335. Refunded 11					
 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 0 9 24,335. 11 Enter the amount of line 10 to be: Credited to 2024 estimated tax 24,335. Refunded 11 0. 					44.000
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 24,335. 11 Enter the amount of line 10 to be: Credited to 2024 estimated tax 24,335. Refunded 11					
10Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid1024,335.11Enter the amount of line 10 to be: Credited to 2024 estimated tax24,335.Refunded110.					0.
11Enter the amount of line 10 to be: Credited to 2024 estimated tax24,335.Refunded110.					
		.			
	11 Enter the amount of line 10 to be: Credited to 2024 estimated tax	<u>, 24</u>	335 Refund	led 11	0.

Form **990-PF** (2023)

Form 990-PF (2023) PATRICK P. LEE FOUNDATION Part VI-A Statements Regarding Activities

45-3845576	Page 4
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		1		
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		X
	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.			
C	Did the foundation file Form 1120-POL for this year?	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ 0 • (2) On foundation managers. \$ 0 •			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
•	managers. $\$$ 0 .			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		x
2	If "Yes," attach a detailed description of the activities.	-		
•	, · · · · · · · · · · · · · · · · · · ·			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			v
_	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	37	X X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X	<u> </u>
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Х	<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
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?	6	Х	
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 XIV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	NY			
h	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	8b	Х	
٥	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
3	year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII	9		x
10		10		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		<u>^</u>
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		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	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address PATRICKPLEEFOUNDATION.ORG			
14	The books are in care of PATRICK P. LEE FOUNDATION Telephone no. 716-84		100	
	Located at 5166 MAIN STREET, 303, WILLIAMSVILLE, NY	221		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			
	and enter the amount of tax-exempt interest received or accrued during the year 15	N	/A	
16	At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
		rm 990)-PF	(2023)

Form 990-PF (2023) PATRICK P. LEE FOUNDATION	45-384	5576		Page 5
Part VI-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?		1a(1)		X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
a disqualified person?		1a(2)		X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		1a(3)	Х	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		1a(4)	Х	
(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)?		1a(5)		X
(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.)		1a(6)		X
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		1b		X
c Organizations relying on a current notice regarding disaster assistance, check here				
d 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 2023?		1d		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	on			
defined in section 4942(j)(3) or 4942(j)(5)):				
a At the end of tax year 2023, did the foundation have any undistributed income (Part XII, lines				
6d and 6e) for tax year(s) beginning before 2023?		2a		X
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 income				
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and att	•-			
statement - see instructions.)	N/A	2b		
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?		3a		X
b If "Yes," did it have excess business holdings in 2023 as a result of (1) any purchase by the foundation or disqualified persons				
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to				
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720				
Schedule C, to determine if the foundation had excess business holdings in 2023.)	N/A	3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purp				37
had not been removed from jeopardy before the first day of the tax year beginning in 2023?		4b		X

Form **990-PF** (2023)

Form 990-PF (2023) PATRICK P. LEE FOUNDATION 45-384	5576	F	Page 6
Part VI-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:		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	5a(1)		<u> </u>
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,			
any voter registration drive?	5a(2)		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?	5a(3)		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section			
4945(d)(4)(A)? See instructions	5a(4)		<u> </u>
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for			
the prevention of cruelty to children or animals?	5a(5)		X
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	5b		
c Organizations relying on a current notice regarding disaster assistance, check here			
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained			
expenditure responsibility for the grant? N/A	5d	_	
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			37
a personal benefit contract?	6a		<u>X</u>
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		X
If "Yes" to 6b, file Form 8870.	7.		х
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	7a		
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A .	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			x
excess parachute payment(s) during the year? Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly	8		Δ

Paid Employees, and Contractors

(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 12		157,805.	19,702.	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none, e	enter "NONE."	(d) Contributions to	

(a) Name and address of each employee paid more than \$50,000	(b) The, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	account, other allowances
NONE				
Total number of other employees paid over \$50,000				0

Form **990-PF** (2023)

Page **7**

orm 990-PF	(2023)	
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F

23) PATRICK P. LEE FOUNDATION Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Part VII

3 Five highest-paid independent contractors for professional services. If none, enter	ər "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		0
Total number of others receiving over \$50,000 for professional services	<u></u>	
	intigal information such as the	
List the foundation's four largest direct charitable activities during the tax year. Include relevant stati number of organizations and other beneficiaries served, conferences convened, research papers pro		Expenses
$\frac{1}{1 \text{ N/A}}$		
		-
		-
2		
3		
4		
		_
Part VIII-B Summary of Program-Related Investments	n lines 1 and 0	Amount
Describe the two largest program-related investments made by the foundation during the tax year of		Amount
1		-
		-
2		
2		-
All other program-related investments. See instructions.		
3 NONE		
		0.
Total. Add lines 1 through 3	<u></u>	0.

Form 990-PF (2023)

Form	990-PF	(2023)
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P	Art IX Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undatior	ns, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	18,251,565.
	Average of monthly cash balances	1b	941,891.
	Fair market value of all other assets (see instructions)	1c	23,394,759.
	Total (add lines 1a, b, and c)	1d	42,588,215.
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	42,588,215.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	638,823.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	41,949,392.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	2,097,470.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations	and certa	lin
	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part IX, line 6	1	2,097,470.
2a	Tax on investment income for 2023 from Part V, line 5 2a 20, 595.	-	
D	Income fax for 2023. (This does not include the fax from Part V.)		
		2c	<u> 104,177.</u> <u> 1,993,293.</u>
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	<u> </u>
4	Recoveries of amounts treated as qualifying distributions	4	45,396.
5	Add lines 3 and 4	5	2,038,689.
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 XII, line 1	7	2,038,689.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а		1a	2,676,019.
b	Program-related investments - total from Part VIII-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:		
а		3a	
b	• • • • • • • • • • • • • • • • • • • •	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	<u>2,676,019</u> .

Form **990-PF** (2023)

Form 990-PF (2023)

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
1 Distributable amount for 2023 from Part X,				
line 7				2,038,689.
2 Undistributed income, if any, as of the end of 2023:			192,690.	
a Enter amount for 2022 only b Total for prior years:			192,090.	
		0.		
3 Excess distributions carryover, if any, to 2023:		••		
a From 2018				
b From 2019				
c From 2020				
d From 2021				
e From 2022				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2023 from				
Part XI, line 4: \$ 2,676,019.				
a Applied to 2022, but not more than line 2a			192,690.	
b Applied to undistributed income of prior		^		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	0.			2,038,689.
d Applied to 2023 distributable amount	444,640.			2,030,009.
e Remaining amount distributed out of corpus	444,040.			
5 Excess distributions carryover applied to 2023 (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:	444,640.			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 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 2022. Subtract line				
4a from line 2a. Taxable amount - see instr			Ο.	
f Undistributed income for 2023. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2024				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 2018	0.			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2024. Subtract lines 7 and 8 from line 6a	444,640.			
10 Analysis of line 9:				
a Excess from 2019				
b Excess from 2020				
c Excess from 2021				
d Excess from 2022				
e Excess from 2023 444,640.				
323581 12-20-23				Form 990-PF (2023)
		20		

29

	P. LEE FOUR				455/6 Page 10
Part XIII Private Operating Fo	oundations (see ins	tructions and Part VI-	A, question 9)	N/A	
1 a If the foundation has received a ruling of	determination letter that	it is a private operating			
foundation, and the ruling is effective for	2023, enter the date of th	ne ruling			
b Check box to indicate whether the found	ation is a private operatin	g foundation described i	n section	4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2023	(b) 2022	(c) 2021	(d) 2020	(e) Total
investment return from Part IX for					
each year listed					
b 85% (0.85) of line 2a					
c Qualifying distributions from Part XI,					
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 IX, 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		- Hele			<u> </u>
Part XIV Supplementary Info at any time during t			r the foundati	on nad \$5,000 or mo	re in assets
at any time during ti	ie year-see instru	icuons.j			

1 Information Regarding Foundation Managers:

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

NONE

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

NONE

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

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

SEE STATEMENT 13

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:

323601 12-20-23

Form **990-PF** (2023)

31 2023.05000 PATRICK P. LEE FOUNDATION 2746.0_1

323611 12-20-23

Form **990-PF** (2023)

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year				
ACCESSIBLE ACADEMICS PO BOX 590 BUFFALO, NY 14226		PUBLIC CHARITY	HONORARIUM ROBERT LETESTE	250.
ALFRED STATE COLLEGE DEVELOPMENT FUND 10 UPPER COLLEGE DRIVE ALFRED, NY 14802		PUBLIC CHARITY	STEM SCHOLARSHIP PROGRAM	12,000.
ALFRED STATE COLLEGE DEVELOPMENT FUND 10 UPPER COLLEGE DRIVE ALFRED, NY 14802		PUBLIC CHARITY	STEM SCHOLARSHIP PROGRAM	12,000.
BESTSELF BEHAVIORAL HEALTH 255 DELAWARE AVE, SUITE 300 BUFFALO, NY 14202		PUBLIC CHARITY	CLINICAL INTERNSHIP	148,342.
BESTSELF BEHAVIORAL HEALTH 255 DELAWARE AVE, SUITE 300 BUFFALO, NY 14202			CLINICAL INTERNSHIP	1,658.
	ONTINUATION SHEE	<u> T(S)</u>		2,227,410.
 Approved for future payment ROCHESTER INSTITUTE OF TECHNOLOGY 116 LOMB MEMORIAL DRIVE ROCHESTER, NY 14623 	NONE	PUBLIC CHARITY	COMPUTER SCIENCE SCHOLARSHIP PROGRAM	100,000.
SAINT LOUIS UNIVERSITY 1 N GRAND BLVD. ST. LOUIS, MO 63103	NONE	PUBLIC CHARITY	COMPUTER SCIENCE SCHOLARSHIP PROGRAM	100,000.
SYRACUSE UNIVERSITY 900 SOUTH CROUSE AVENUE SYRACUSE, NY 13244	NONE		COMPUTER SCIENCE SCHOLARSHIP PROGRAM	100,000.
Total SEE CO	ONTINUATION SHEE	T(S)		550,000. orm 990-PF (2023

 Form 990-PF (2023)
 PATRICK P. LEE FOUNDATION

 Part XIV
 Supplementary Information (continued)

Form 990-PF (2023)

Part XV-A

Analysis of Income-Producing Activities

	-				
Enter gross amounts unless otherwise indicated.		d business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	
a					
b					
C					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash			1 4	100 740	
investments			14	<u>196,740.</u> 650,385.	
4 Dividends and interest from securities			14	650,385.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property			16	-70,426.	
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	281,600.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a <u>OTHER K-1 INVESTMENT</u>					
b INCOME			01	1,103,627.	
C					
d					
e					
2 Subtotal. Add columns (b), (d), and (e)		0.		2,161,926.	0.
3 Total. Add line 12, columns (b), (d), and (e)					2,161,926.
See worksheet in line 13 instructions to verify calculations.)					
Part XV-B Relationship of Activities to Line No. Explain below how each activity for which income activity		-		_	ishment of
the foundation's exempt purposes (other than b			CONTINUE		

		3845576	Pa	ige 13
Pai	T XVI Information Regarding Transfers to and Transactions and Relationships With Nonc Exempt Organizations	haritable		
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)		Yes	No
	(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
а	Transfers from the reporting foundation to a noncharitable exempt organization of:			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
	Other transactions:			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization			X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees			X
	(6) Performance of services or membership or fundraising solicitations			X
	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1.0		X

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

		<u>, </u>								
(a) Line no		(b) Amount involved	(c) Name of	noncharitable	exemp	t organization	(d) Descriptio	n of transfers, transactio	ns, and sharing arrai	ngements
				N/A						
	_									
							_			
	-									
in s	ection	idation directly or indirec 501(c) (other than sectio implete the following sch	n 501(c)(3)) or in sec						🗌 Yes	X No
		(a) Name of org	ganization		(b) Ty	vpe of organization		(c) Description of r	elationship	
		N/A								
Sign Here		r penalties of perjury, I declare elief, it is true, correct, and co						has any knowledge. VE	May the IRS directurn with the shown below?	scuss this preparer See instr.
	Sign	ature of officer or trustee			[Date	Title			
		Print/Type preparer's na	ime	Preparer's si	gnature	•	Date	Check if self- employed	PTIN	
Paid		JON K. PELL	ISH	JON K.	PEI	LISH	11/12/24		P006258	301
Prepa Use C	rer					KERSHNE		Firm's EIN 16	-1468002	2
	-	Firm's address 45	BRYANT WO	ODS NOF	RTH					
			ERST, NY					Phone no. 71	6-630-24	100

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the Ye			1	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
CANISIUS COLLEGE		PUBLIC CHARITY	MENTAL HEALTH	
2001 MAIN ST			SCHOLARSHIP PROGRAM	
BUFFALO, NY 14208				25,000
CANISIUS COLLEGE		PUBLIC CHARITY		
2001 MAIN ST			SCHOLARSHIP PROGRAM	
BUFFALO, NY 14208				25,000
CATHOLIC CHARITIES OF BUFFALO		PUBLIC CHARITY		
741 DELAWARE AVE			WORKFORCE INITIATIVE	
BUFFALO, NY 14209				47,397
CHRISTIAN COUNSELING MINISTRIES OF		PUBLIC CHARITY	STRATEGIC TRAINING AND	
WNY			RETENTION INITIATIVE	
9070 MAIN ST				
CLARENCE , NY 14301				28,330
COMPEER ROCHESTER		PUBLIC CHARITY	MENTAL HEALTH	
259 MONROE AVE			WORKFORCE INITIATIVE	
ROCHESTER, NY 14607				16,000
CRISIS SERVICES		PUBLIC CHARITY	STAFF WELLNESS	
100 RIVER ROCK RD, STE 300				20.000
BUFFALO, NY 14207				20,000
			VENODIAL DONAETON	
CUSTER FIRE DEPARTMENT 511 3RD AVE		PUBLIC CHARITY	MEMORIAL DONATION	
CUSTER, MT 59024				250
DAEMEN UNIVERSITY		PUBLIC CHARITY	MENTAL HEALTH PROGRAM	
4380 MAIN ST				
AMHERST, NY 14226				25,000
DAEMEN UNIVERSITY		PUBLIC CHARITY	MENTAL HEALTH PROGRAM	
4380 MAIN ST				
AMHERST, NY 14226				25,000
ECMC FOUNDATION		PUBLIC CHARITY	CREATING INNOVATION	
462 GRIDER ST.			OUTPATIENT BEHAVIORAL	
BUFFALO, NY 14215			HEALTH PROGRAMS	51,600

3 Grants and Contributions Paid During the Ye	ar (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
ECMC FOUNDATION		PUBLIC CHARITY	TRAUMA CENTER AND	
462 GRIDER ST.			EMERGENCY DEPARTMENT	25.00
BUFFALO, NY 14215				25,00
ECMC FOUNDATION		PUBLIC CHARITY	TRAUMA CENTER AND	
462 GRIDER ST.			EMERGENCY DEPARTMENT	
BUFFALO, NY 14215				90,05
ECMC FOUNDATION		PUBLIC CHARITY	TRAUMA CENTER AND	
462 GRIDER ST.			EMERGENCY DEPARTMENT	0.50
BUFFALO, NY 14215				8,53
ENVISION WELLNESS WNY		DIBLTC CHARTTY	RECRUIT TRAIN RETAIN	
1591 KENMORE AVE		FUBLIC CHARITI	COUNSELERS FOR SPMI	
KENMORE, NY 14217				75,00
ERIE COMMUNITY COLLEGE		PUBLIC CHARITY	STEM SCHOLARSHIP	
121 ELLICOTT STREET, ROOM 110			PROGRAM	
BUFFALO, NY 14203				24,00
ERIE COMMUNITY COLLEGE		PUBLIC CHARITY	STEM SCHOLARSHIP	
121 ELLICOTT STREET, ROOM 110 BUFFALO, NY 14203			PROGRAM	30,00
FAMILY & CHILDRENS SERVICES OF ITHACA		PUBLIC CHARITY	MENTAL HEALTH	
L27 W STATE ST			WORKFORCE INITIATIVE	
THACA, NY 14850				85,00
FIRSTMARK SERVICES PO BOX 2977		PUBLIC CHARITY	DLS AWARD	
DMAHA, NY 68103				5,89
,				
FIRSTMARK SERVICES		PUBLIC CHARITY	DLS AWARD	
PO BOX 2977				
DMAHA, NY 68103				3,00
INTERNATIONAL DOCUMENTARY ASSOCIATION		PUBLIC CHARITY		
3600 WILSHIRE BLVD, SUITE 18			"COMMITTED"	150 00
LOS ANGELES, CA 90010 Total from continuation sheets			1	150,00

Part XIV Supplementary Information	P. LEE FOUNDAT	1011	45-384	10
3 Grants and Contributions Paid During the Yea	ar (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
JERICHO ROAD COMMUNITY HEALTH CTR 184 BARTON ST BUFFALO, NY 14213		PUBLIC CHARITY	BEHAVIORAL HEALTH INTERNSHIP PILOT PROGRAM	75,000
JEWISH FAMILY SERVICE OF BUFFALO 70 BARKER ST BUFFALO, NY 14209		PUBLIC CHARITY	MENTAL HEALTH WORKFORCE INITIATIVE	86,812
MONROE COMMUNICTY COLLEGE ASSOCIATION 1000 E. HENRIETTA ROAD ROCHESTER, NY 14623		PUBLIC CHARITY	STEM SCHOLARSHIP PROGRAM	9,000
MONROE COMMUNICTY COLLEGE ASSOCIATION 1000 E. HENRIETTA ROAD ROCHESTER, NY 14623		PUBLIC CHARITY	STEM SCHOLARSHIP PROGRAM	9,000
NIAGARA COUNTY COMMUNITY COLLEGE 3111 SAUNDERS SETTLEMENT SANBURN, NY 14132		PUBLIC CHARITY	STEM SCHOLARSHIP PROGRAM	9,872
NORTHLAND WORKFORCE TRAINING CENTER 683 NORTHLAND AVE BUFFALO, NY 14211		PUBLIC CHARITY	HONORARIUM STEPHEN TUCKER	250
OCEAN REEF COMMUNITY FOUNDATION 35 OCEAN REEF DRIVE, SUITE 148 KEY LARGO, FL 33037		PUBLIC CHARITY	DISCRETIONARY GRANTS	100,000
OLV CHARITIES 780 RIDGE RD LACKAWANNDA, NY 14218		PUBLIC CHARITY	MENTAL HEALTH WORKFORCE INITIATIVE	34,397
RENSSELAER POLYTECHNIC INSTITUTE 110 EIGHTH STREET TROY, NY 12180		PUBLIC CHARITY	ENGINEERING SCHOLARSHIP PROGRAM	25,000
RENSSELAER POLYTECHNIC INSTITUTE 110 EIGHTH STREET TROY, NY 12180		PUBLIC CHARITY	ENGINEERING SCHOLARSHIP PROGRAM	25,000

15121112 795314 2746.0

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
ROCHESTER INSTITUTE OF TECHNOLOGY		PUBLIC CHARITY	ENGINEERING	
116 LOMB MEMORIAL DRIVE			SCHOLARSHIP PROGRAM	
ROCHESTER, NY 14623				62,67
ROCHESTER INSTITUTE OF TECHNOLOGY		PUBLIC CHARITY	ENGINEERING	
116 LOMB MEMORIAL DRIVE			SCHOLARSHIP PROGRAM	
ROCHESTER, NY 14623				62,55
SAINT LOUIS UNIVERSITY		PUBLIC CHARITY	ENGINEERING	
1 N GRAND BLVD.			SCHOLARSHIP PROGRAM	
ST. LOUIS, MO 63103				2,26
SAINT LOUIS UNIVERSITY		PUBLIC CHARITY	ENGINEERING	
1 N GRAND BLVD.			SCHOLARSHIP PROGRAM	
ST. LOUIS, MO 63103				32,69
SPCA SERVING ERIE COUNTY		PUBLIC CHARITY	MEMORIAL DONATION	
300 HARLEM RD				
WEST SENECA, NY 14224				25
SYRACUSE UNIVERSITY	NONE	PUBLIC CHARITY	ENGINEERING	
900 SOUTH CROUSE AVENUE			SCHOLARSHIP PROGRAM	
SYRACUSE, NY 13244				25,02
SYRACUSE UNIVERSITY	NONE	PUBLIC CHARITY	ENGINEERING	
900 SOUTH CROUSE AVENUE			SCHOLARSHIP PROGRAM	
SYRACUSE, NY 13244				24,97
JB FOUNDATION	NONE	PUBLIC CHARITY		
PO BOX 900 BILFFALO NY 14226			SCHOLARSHIP PROGRAM	70 26
BUFFALO, NY 14226				72,36
UB FOUNDATION	NONE	PUBLIC CHARITY	MENTAL HEALTH	
PO BOX 900			SCHOLARSHIP PROGRAM	
BUFFALO, NY 14226				1,38
UB FOUNDATION	NONE	PUBLIC CHARITY		
PO BOX 900 BUFFALO, NY 14226			SCHOLARSHIP PROGRAM	186,23
Total from continuation sheets		1		100,23

15121112 795314 2746.0

PO BOX 900 BUPFALO, NY 14226 CHARITY FOCUS 5, UNIVERSITY OF ROCHESTER NONE FUBLIC CHARITY ENGINEERING SCHOLARSHIP PROGRAM 62, UNIVERSITY OF ROCHESTER NONE FUBLIC CHARITY ENGINEERING SCHOLARSHIP PROGRAM 62, UNIVERSITY OF ROCHESTER NONE FUBLIC CHARITY CLINICAL HIGH RISK ROCHESTER, NY 14627 62, UNIVERSITY OF ROCHESTER NONE FUBLIC CHARITY CLINICAL HIGH RISK ROCHESTER, NY 14627 11, INIVERSITY OF ROCHESTER NONE FUBLIC CHARITY CLINICAL HIGH RISK ROCHESTER, NY 14627 11, INIVERSITY OF ROCHESTER NONE FUBLIC CHARITY CLINICAL HIGH RISK ROCHESTER, NY 14627 11, INIVERSITY OF ROCHESTER NONE FUBLIC CHARITY CLINICAL HIGH RISK ROCHESTER, NY 14627 11, INIVERSITY OF ROCHESTER SCHOOL OF NONE FUBLIC CHARITY FURICAL HIGH RISK ROCHESTER, NY 14627 174, INIVERSITY OF ROCHESTER SCHOOL OF NONE FUBLIC CHARITY FURCHARTIC NURSE RACTIONER SCHOLARSHIP FOR AND A ROCHESTER, NY 14627 174, INIVERSITY OF ROCHESTER SCHOOL OF NONE FUBLIC CHARITY DIS DOCTORAL FSYCHOLOGY INTERNING OF EDUCATION NONE FUBLIC CHARITY DIS DOCTORAL FSYCHOLOGY INTERNING OF EDUCATION NONE FUBLIC CHARITY DIS DOCTORAL FSYCHOLOGY INTERNING OF EDUCATION NONE FUBLIC CHARITY DIS ANARD 22, IS DEFARTMENT OF EDUCATION NONE FUBLIC CHARITY DIS ANARD 25, IS DEFARTMENT OF EDUCATION NONE FUBLIC CHARITY DIS ANARD 25, IS DEFARTMENT OF EDUCATION NONE FUBLIC CHARITY DIS ANARD 25, IS DEFARTMENT OF EDUCATION NONE FUBLIC CHARITY DIS ANARD 25, IS DEFARTMENT OF EDUCATION NONE FUBLIC CHARITY DIS ANARD 25, IS DEFARTMENT OF EDUCATION NONE FUBLIC CHARITY DIS ANARD 25, IS DEFARTMENT OF EDUCATION NONE FUBLIC CHARITY DIS ANARD 25, IS DEFARTMENT OF EDUCATION NONE FUBLIC CHARITY DIS ANARD 25, IS DEFARTMENT OF EDUCATION NONE FUBLIC CHARITY DIS ANARD 25, IS DEFARTMENT OF EDUCATION NONE FUBLIC CHARITY DIS ANARD 25, IS DEFARTMENT OF EDUCATION NONE FUBLIC CHARITY DIS ANARD 25, IS DEFARTMENT OF EDUCATION NONE FUBLIC CHARITY DIS ANARD 25, IS DEFARTMENT OF EDUCATION NONE FUBLIC CHARITY DIS ANARD 25, IS DEFARTMENT OF EDUCATION NONE FUBLIC CHARITY DIS ANARD 25, IS DEFARTMENT OF ED	3 Grants and Contributions Paid During the Y	ear (Continuation)			
Name and address (nome of business) or substantial contributor recipient Description NTVERSITY AT BUFFALO FOUNDATION NOVE NONE FUELIC CHARITY KENTAL HEALTH SCHOLARSHIP FROGRAM (PSYCHIATRY FOCUS) 5, NTVERSITY OF ROCHESTER NOVE NONE FUELIC CHARITY ENGINEERING SCHOLARSHIP FROGRAM (PSYCHIATRY FOCUS) 5, NTVERSITY OF ROCHESTER NOVE NONE FUELIC CHARITY ENGINEERING SCHOLARSHIP FROGRAM (SCHORTER, NY 14627 62, NTVERSITY OF ROCHESTER NOVE NONE FUELIC CHARITY ENGINEERING SCHOLARSHIP FROGRAM (SCHORTER, NY 14627 62, NTVERSITY OF ROCHESTER NOVE NONE FUELIC CHARITY ENGINEERING SCHOLARSHIP FROGRAM (SCHORTER, NY 14627 62, NTVERSITY OF ROCHESTER NOVE NONE FUELIC CHARITY ENGINEERING CHARITY 62, NTVERSITY OF ROCHESTER NOVE NONE FUELIC CHARITY FLINICAL HIGH RISK FROGRAM 2, NTVERSITY OF ROCHESTER NOVE NONE FUELIC CHARITY FLINICAL HIGH RISK FROGRAM 2, NIVERSITY OF ROCHESTER SCHOOL OF NOVE NONE FUELIC CHARITY FSUCHIATRIC NURSE FRACTIONER SCHOLARSHIP 2, NIVERSITY PSYCHIATRIC FRACTICE, INC. NONE		show any relationship to		Purpose of grant or	Amount
NO BOX 900 SCHOLARSHLP FROGRAM (PETCHIATERY FOCUS) 5, NIVERSITY OF ROCHESTER NONE NONE PUBLIC CHARITY ENGINEERING SCHOLARSHLP FROGRAM 62, NIVERSITY OF ROCHESTER NUVERSITY OF ROCHESTER NONE NONE FUBLIC CHARITY ENGINEERING SCHOLARSHLP FROGRAM 62, NIVERSITY OF ROCHESTER NONE NONE FUBLIC CHARITY ENGINEERING SCHOLARSHLP FROGRAM 62, NIVERSITY OF ROCHESTER NONE NONE FUBLIC CHARITY ELINICAL HIGH RISK FROGRAM 62, NIVERSITY OF ROCHESTER NONE NONE FUBLIC CHARITY CLINICAL HIGH RISK FROGRAM 62, NIVERSITY OF ROCHESTER NONE NONE FUBLIC CHARITY CLINICAL HIGH RISK FROGRAM 62, NIVERSITY OF ROCHESTER SCHOLARSTR NY 14627 NONE FUBLIC CHARITY CLINICAL HIGH RISK FROGRAM 2, NIVERSITY OF ROCHESTER SCHOOL OF NONE NONE FUBLIC CHARITY FSCHLARTIC NURSE FRACTIONER SCHOLARSHLP 174, NIVERSITY PSYCHLATRIC PRACTICE, INC. 162 GRIDER ST, 11TH FLOOR NONE FUBLIC CHARITY JLS AWARD 92, SIS DEPARTMENT OF EDUCATION NONE NONE FUBLIC CHARITY DLS AWARD 25, SIS DEPARTMENT OF EDUCATION NONE NONE FUBLIC CHARITY DLS AWARD 25, SIS DEPARTMENT OF EDUCATION NONE NONE FUBLIC CHARITY DLS AWARD<	Name and address (home or business)	or substantial contributor		Contribution	
NO BOX 900 SCHOLARSHIP PROGRAM (PETCHIATERY FOCUS) 5, NUVERSITY OF ROCHESTER NONE NONE FUBLIC CHARITY ENGINEERING SCHOLARSHIP PROGRAM 62, NUVERSITY OF ROCHESTER NONE NONE FUBLIC CHARITY ENGINEERING SCHOLARSHIP PROGRAM 62, NUVERSITY OF ROCHESTER NONE NONE FUBLIC CHARITY ENGINEERING SCHOLARSHIP PROGRAM 62, NUVERSITY OF ROCHESTER NONE NONE FUBLIC CHARITY ELINICAL HIGH RISK PROGRAM 62, NUVERSITY OF ROCHESTER NONE NONE FUBLIC CHARITY ELINICAL HIGH RISK PROGRAM 62, NUVERSITY OF ROCHESTER SOU EAST RIVER ROAD NONE FUBLIC CHARITY ELINICAL HIGH RISK PROGRAM 7, NUVERSITY OF ROCHESTER SOUCHESTER, NY 14627 NONE FUBLIC CHARITY FURICAL HIGH RISK PROGRAM 7, NUVERSITY OF ROCHESTER SCHOOL OF NURSING NONE FUBLIC CHARITY FURCHATRIC NURSE PRACTIONER SCHOLARSHIP 7, NUVERSITY PSYCHIATRIC PRACTICE, INC. 162 GRIDER ST, 11TH FLOOR SUFFAD, NY 14227 NONE FUBLIC CHARITY JLS AWARD 92, SD EFARTMENT OF EDUCATION NONE NONE FUBLIC CHARITY DLS AWARD 25, SD EFARTMENT OF EDUCATION NONE NONE FUBLIC CHARITY DLS AWARD 25, SD EFARTMENT OF EDUCATION NONE NONE FUBLIC CHARITY DLS AWA					
BUFFALO, NY 14226 (FSYCHIATRY FOCUS) 5, INIVERSITY OF ROCHESTER NONE PUBLIC CHARITY ENGINEERING SCHOLARSHIP PROGRAM ACCHESTER, NY 14627 INIVERSITY OF ROCHESTER NONE PUBLIC CHARITY ENGINEERING SCHOLARSHIP PROGRAM ACCHESTER, NY 14627 INIVERSITY OF ROCHESTER NONE PUBLIC CHARITY ELINICAL HIGH RISK FROGRAM NONE PUBLIC CHARITY CLINICAL HIGH RISK FROGRAM II, INIVERSITY OF ROCHESTER NONE PUBLIC CHARITY CLINICAL HIGH RISK FROGRAM NONE PUBLIC CHARITY ELINICAL HIGH RISK FROGRAM II, INIVERSITY OF ROCHESTER NONE PUBLIC CHARITY CLINICAL HIGH RISK FROGRAM NONE PUBLIC CHARITY CLINICAL HIGH RISK FROGRAM II, INIVERSITY OF ROCHESTER SCHOOL OF NONE PUBLIC CHARITY ENCHARTIC NURSE FRACTIONER SCHOLARSHIP INIVERSITY OF ROCHESTER SCHOOL OF NONE PUBLIC CHARITY DISCHARTIC NURSE FRACTIONER SCHOLARSHIP INIVERSITY OF ROCHESTER SCHOOL OF NONE PUBLIC CHARITY DISCHARTIC NURSE FRACTIONER SCHOLARSHIP INIVERSITY OF ROCHESTER SCHOOL OF NONE PUBLIC CHARITY DISCHARTIC NURSE FRACTIONER SCHOLARSHIP INIVERSITY FSYCHIATRIC FRACTICE, INC. HONE PUBLIC CHARITY DISCHARTY INTERNSHIP 92, IS DEPARTMENT OF EDUCATION FO BOX 2837 IS DEPARTMENT OF EDUCATION NONE PUBLIC CHARITY DISCHARTY IS DEPARTMENT OF EDUCATION IS DEPARTMENT	UNIVERSITY AT BUFFALO FOUNDATION	NONE	PUBLIC CHARITY	MENTAL HEALTH	
UNIVERSITY OF ROCHESTER 300 EAST RIVER ROAD ROCHESTER, NY 14627 UNIVERSITY OF ROCHESTER SCHOOL OF NONE PUBLIC CHARITY PUBLIC CHARITY PUBLIC CHARITY PUBLIC CHARITY DIS DOCTORAL PSYCHIATRIC PRACTICE, INC. A62 GRIDER ST, 11TH FLOOR BUFFALO, NY 14215 UNIVERSITY OF ROUCATION NONE PUBLIC CHARITY DIS DEFARTMENT OF EDUCATION NONE PUBLIC CHARITY DIS AWARD PUBLIC CHARITY DIS AWARD	PO BOX 900				
300 EAST RIVER ROAD SCHOLARSHIP PROGRAM 62, NONE FUELIC CHARITY ENGINEERING 62, UNIVERSITY OF ROCHESTER NONE FUELIC CHARITY ENGINEERING 62, UNIVERSITY OF ROCHESTER NONE FUELIC CHARITY ENGINEERING 62, UNIVERSITY OF ROCHESTER NONE FUELIC CHARITY CLINICAL HIGH RISK 62, UNIVERSITY OF ROCHESTER NONE FUELIC CHARITY CLINICAL HIGH RISK 62, UNIVERSITY OF ROCHESTER NONE FUELIC CHARITY CLINICAL HIGH RISK 62, UNIVERSITY OF ROCHESTER NONE FUELIC CHARITY CLINICAL HIGH RISK 62, UNIVERSITY OF ROCHESTER NONE FUELIC CHARITY CLINICAL HIGH RISK 62, UNIVERSITY OF ROCHESTER NONE FUELIC CHARITY CLINICAL HIGH RISK 62, 100 EAST RIVER ROAD NONE FUELIC CHARITY FSYCHIATRIC NURSE 7, 101 EXENTING NONE FUELIC CHARITY FSYCHIATRIC NURSE 7, 101 EXENTITY FSYCHIATRIC PRACTICE, INC. NONE FUELIC CHARITY FS DOCTORAL PSYCHOLOGY 103 EAST RIVER ROAD NONE FUELIC CHARITY FS DOCTORAL PSYCHOLOGY 174, 101 EXENTITY FSYCHIATRIC PRACTICE, INC. NONE	BUFFALO, NY 14226			(PSYCHIATRY FOCUS)	5,76
300 EAST RIVER ROAD SCHOLARSHIP PROGRAM 62, NONE PUBLIC CHARITY ENGINEERING 62, UNIVERSITY OF ROCHESTER NONE PUBLIC CHARITY ENGINEERING 62, UNIVERSITY OF ROCHESTER NONE PUBLIC CHARITY ENGINEERING 62, UNIVERSITY OF ROCHESTER NONE PUBLIC CHARITY CLINICAL HIGH RISK 62, UNIVERSITY OF ROCHESTER NONE PUBLIC CHARITY CLINICAL HIGH RISK 62, UNIVERSITY OF ROCHESTER NONE PUBLIC CHARITY CLINICAL HIGH RISK 62, UNIVERSITY OF ROCHESTER NONE PUBLIC CHARITY CLINICAL HIGH RISK 62, UNIVERSITY OF ROCHESTER NONE PUBLIC CHARITY CLINICAL HIGH RISK 62, UNIVERSITY OF ROCHESTER NONE PUBLIC CHARITY CLINICAL HIGH RISK 62, 100 EAST RIVER ROAD NONE PUBLIC CHARITY FORGRAM 2, 101VERSITY OF ROCHESTER SCHOOL OF NONE PUBLIC CHARITY FSUCHTARTIC NURSE 100 EAST RIVER ROAD NONE PUBLIC CHARITY FSUCHTARTIC NURSE 101VERSITY FSYCHIATRIC PRACTICE, INC. NONE PUBLIC CHARITY JB DOCTORAL PSYCHOLOGY 105 DEPARTMENT OF EDUCATION NONE PUBLIC CHARITY DIS AWARD 25, </td <td>INTVERSITY OF BOCHESTER</td> <td>NONE</td> <td>PUBLIC CHARTTY</td> <td>ENGINEERING</td> <td></td>	INTVERSITY OF BOCHESTER	NONE	PUBLIC CHARTTY	ENGINEERING	
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PO BOX 2837	TONILIND, ON JIZUO				25,97
PO BOX 2837	US DEPARTMENT OF EDUCATION	NONE	PUBLIC CHARITY	DLS AWARD	
PORTLAND, OR 97208 11,					
	PORTLAND, OR 97208				11,18

Part XIV Supplementary Information				
3 Grants and Contributions Approved for Future	re Payment (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
UNIVERSITY OF ROCHESTER	NONE	PUBLIC CHARITY	COMPUTER SCIENCE	
300 EAST RIVER ROAD			SCHOLARSHIP PROGRAM	100.000
ROCHESTER, NY 14627				100,000.
COMPEER BUFFALO	NONE	PUBLIC CHARITY	MENTAL HEALTH	
1179 KENMORE AVE		[WORKFORCE INITIATIVE	
BUFFALO, NY 14217				150,000.
Total from continuation sheets	•	•	•	250,000.

Schedule B

(Form 9	990)
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Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

Schedule of Contributors

OMB No. 1545-0047

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. 2023

Employer identification number

45-38455	76
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PATRICK P. LEE FOUNDATION	
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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	X 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

X 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), Part II, line 13, 16a, or 16b, and that received from any one
contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h;
or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

45-3845576

PATRICK P. LEE FOUNDATION

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (d) (c) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 1 X Person Payroll 800,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash \$ (Complete Part II for noncash contributions.) (c) (d) (a) (b) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

323452 12-26-23

Schedule B (Fo	orm 990) (2023)
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Name of organization

Page 3

Employer identification number

45-3845576

PATRICK P. LEE FOUNDATION

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

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Name of or	rganization			Employer identification number		
ϷϫͲϗϫ	CK P. LEE FOUNDATION			45-3845576		
Part III	Exclusively religious, charitable, etc., contribut) through (e) and the following line er	ntry. For organizations	nat total more than \$1,000 for the year		
	completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	charitable, etc., contributions of \$1,000 or	r less for the year. (Enter this info. o	once.) \$		
(a) No.						
`from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
		(e) Transfer of g				
-	Transferee's name, address, a	and ZIP + 4	Relationship of tra	nsferor to transferee		
(a) No. from	(b) Purpose of sift	(c) Lice of gift	(d) Dos	printion of how gift is hold		
Part I	(b) Purpose of gift	(c) Use of gift		cription of how gift is held		
-		(e) Transfer of g				
	Turneformele norme editione					
-	Transferee's name, address, a		Relationship of tra	nsferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
<u> </u>						
-		e) Transfer of g	ift			
-	Transferee's name, address, a	and ZIP + 4	Relationship of tra	nsferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
	(e) Transfer of gift					
-	Transferee's name, address, a	and ZIP + 4	Relationship of tra	nsferor to transferee		
	- <u></u>					
		[

323454 12-26-23

Schedule B (Form 990) (2023)

FORM 990-PF INTERE	ST ON SAVING	S AND TEMPOR	ARY CASH IN	IVESTMENTS	STATEMENT 1
SOURCE		(A) REVENUE PER BOOK	-	(B) IVESTMENT ICOME	(C) ADJUSTED NET INCOME
K-1 INTEREST		196,7	40.	195,981.	
TOTAL TO PART I, LI	NE 3	196,7	40.	195,981.	
FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUF	RITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST MENT INCOM	
FIDELITY ACCOUNT #4140 K-1 DIVIDEND	473,095.	0.	473,095.	473,095	5.
INCOME STATE STREET	176,876.	0.	176,876.	176,876	5.
BALANCED RESERVES	414.	0.	414.	414	1.
TO PART I, LINE 4	650,385.	0.	650,385.	650,385	5.
FORM 990-PF	R	ENTAL EXPENS	ES		STATEMENT 3

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
NET RENTAL LOSS FROM K-1 INVESTMENT - SUBTOTA		70,426.	70,426.
TOTAL RENTAL EXPENSES			70,426.
NET RENTAL INCOME TO FORM 990-PF, P	PART I, LINE 5B		-70,426.

PATRICK P. LEE FOUNDATION

45-3845576

FORM 990-PF	OTHER	INCOME		STATEMENT 4		
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME		
OTHER K-1 INVESTMENT INCOME	-	1,103,627.	1,284,638.			
TOTAL TO FORM 990-PF, PART I,	- LINE 11 =	1,103,627.	1,284,638.			
FORM 990-PF	LEGA	AL FEES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- 5 MENT INCOME		(D) CHARITABLI E PURPOSES		

LEGAL FEES	4,376.	0.	4,376.
TO FM 990-PF, PG 1, LN 16A	4,376.	0.	4,376.

FORM 990-PF	ACCOUNTI	TATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	18,985.	949.		18,036.
 TO FORM 990-PF, PG 1, LN 16B	18,985.	949.		18,036.

FORM 990-PF	OTHER PROFES	SIONAL FEES	STATEMENT 7			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
INVESTMENT FEES PAYROLL PROCESSING FEES	723,901. 1,480.	723,901. 141.		0. 1,339.		
RECRUTING/JOB PLACEMENT FEES	1,125.	0.		1,125.		
TO FORM 990-PF, PG 1, LN 160	726,506.	724,042.		2,464.		

FORM 990-PF	ТАХ	ES	STATEMENT 8			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
FOREIGN TAXES	21,286.	21,286.		0.		
PROPERTY TAXES	3,739.	187.		3,552.		
PAYROLL TAXES	24,588.	2,348.		22,240.		
NYS FILING FEE	750.	0.		750.		
NYS CT-13 AND FEDERAL						
EXCISE TAXES	32,491.	250.		0.		
STATE TAXES FROM K-1	12,930.	12,930.		0.		
TO FORM 990-PF, PG 1, LN 18	95,784.	37,001.		26,542.		

FORM 990-PF	OTHER E	XPENSES	S	STATEMENT 9			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES			
EQUIPMENT REPAIR &							
MAINTENANCE	7,378.	369.		7,009.			
MISCELLANEOUS EXPENSE	1,874.	0.		1,874.			
MARKETING & PUBLIC RELATIONS	16,849.	0.		16,849.			
POSTAGE, MAILING SERVICE	693.	0.		693.			
SUPPLIES	1,364.	68.		1,296.			
INSURANCE - LIABILITY	6,578.	329.		6,249.			
PROFESSIONAL DEVELOPMENT	6,741.	0.		6,741.			
COMPUTER EXPENSE	7,446.	0.		7,446.			
NET RENTAL LOSS FROM K-1							
INVESTMENTS	70,426.	70,426.		0.			
TO FORM 990-PF, PG 1, LN 23	119,349.	71,192.		48,157.			

FORM 990-PF

OTHER INVESTMENTS

STATEMENT 10

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
AG REALTY FUND IX (A) LP	FMV	137,147.	137,147.
AG REALTY FUND IX LP	FMV	375,739.	375,739.
CAPE ANN GLOBAL	FMV	1,852,649.	1,852,649.
COLCHESTER INVESTMENTS	FMV	1,224,035.	1,224,035.
DAVIDSON KEMPNER INSTITUTIONAL	FMV		
PARTNERS L.P.		3,575,971.	3,575,971.
FIDELITY INVESTMENTS	FMV	19,596,041.	19,596,041.
SUMMIT ROCK: PRIVATE EQUITY	FMV	317,061.	317,061.
JUNTO OFFSHORE FUND	FMV	353,509.	353,509.
LAKEWOOD CAPITAL OFFSHORE FUND	FMV	1,232,617.	1,232,617.
LEE PRIVATE CHARITABLE CAPITAL	FMV	8,741,314.	8,741,314.
LONE CASCADE	FMV	1,082,245.	1,082,245.
MATRIX CAPITAL	FMV	1,097,260.	1,097,260.
OLD KINGS CAPITAL	FMV	960,735.	960,735.
TIGER GLOBAL	FMV	397,964.	397,964.
SILVER POINT SPECIALTY III	FMV	152,560.	152,560.
BLUE OWL DIVERSIFIED LEARNING	FMV	274,619.	274,619.
TOTAL TO FORM 990-PF, PART II, LINE 13	3	41,371,466.	41,371,466.

FORM 990-PF DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 11

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
OFFICE FURNITURE	37,717.	37,717.	0.
OFFICE FURNITURE	2,113.	2,113.	0.
OFFICE FURNITURE	1,272.	1,272.	0.
COPY MACHINE	5,342.	5,342.	0.
OFFICE FURNITURE	30,000.	20,750.	9,250.
NEW PHONE SYSTEM	2,895.	2,895.	0.
DELL DESKTOP	1,019.	816.	203.
POWEREDGE R440 FILE SERVER	3,002.	3,002.	0.
WEBSITE	5,950.	5,950.	0.
OWL (50%)	535.	430.	105.
HVAC REPAIR	1,905.	742.	1,163.
MEMORY FOX	1,620.	1,125.	495.
SERVER SWITCH	180.	115.	65.
FOUNDANT LICENSE FRO GRANT			
SOFTWARE	11,500.	10,063.	1,437.
ALLAIRE NEW LAPTOP	2,630.	1,023.	1,607.
MONITOR	449.	162.	287.
JANE NEW LAPTOP	908.	277.	631.
ESET 3 YEAR LICENSE	950.	0.	950.
TOTAL TO FM 990-PF, PART II, LN 14	109,987.	93,794.	16,193.

FORM 990-PF		OF OFFICERS, DI FOUNDATION MANAG	STATEMENT 12			
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE	
PATRICK P. LEE 5166 MAIN STREET, WILLIAMSVILLE, NY		CHAIRMAN 5.00	0.	0.	0.	
JANE MOGAVERO 5166 MAIN STREET, WILLIAMSVILLE, NY	SUITE 303 14221	EXECUTIVE DIREC 40.00		19,702.	0.	
LEE WORTHAM 5166 MAIN STREET, WILLIAMSVILLE, NY		VICE CHAIRMAN 2.00	0.	0.	0.	
BARBARA RHEE 5166 MAIN STREET, WILLIAMSVILLE, NY		SECRETARY 2.00	0.	0.	0.	
JOHN RHEE 5166 MAIN STREET, WILLIAMSVILLE, NY		DIRECTOR 2.00	0.	0.	0.	
MICHELE LEE 5166 MAIN STREET, WILLIAMSVILLE, NY		DIRECTOR 2.00	0.	0.	0.	
CYNTHIA LEE 5166 MAIN STREET, WILLIAMSVILLE, NY		DIRECTOR 2.00	0.	0.	0.	
ARTHUR MICHALEK 5166 MAIN STREET, WILLIAMSVILLE, NY	SUITE 303 14221	TREASURER 2.00	0.	0.	0.	
JON PELLISH 5166 MAIN STREET, WILLIAMSVILLE, NY		DIRECTOR 2.00	0.	0.	0.	
SUZANNE STERN 5166 MAIN STREET, WILLIAMSVILLE, NY		DIRECTOR 2.00	0.	0.	0.	

15121112 795314 2746.0

PATRICK P. LEE FOUNDATION			45-	3845576
AMY CASE 5166 MAIN STREET, SUITE 303 WILLIAMSVILLE, NY 14221	DIRECTOR 2.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VII	157,805.	19,702.	0.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XIV, LINES 2A THROUGH 2D

STATEMENT 13

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

PATRICK P. LEE FOUNDATION 5166 MAIN STREET, SUITE 303 WILLIAMSVILLE, NY 14221

TELEPHONE NUMBER

716-844-3100

FORM AND CONTENT OF APPLICATIONS

PATRICK P. LEE FOUNDATION (THE FOUNDATION) PROACTIVELY IDENTIFIES NONPROFIT ORGANIZATIONS WORKING IN ITS FOCUS AREAS OF EDUCATION AND MENTAL HEALTH. NONPROFITS MAY ALSO PROVIDE INFORMATION ON PROGRAMS ALIGNED WITH THE FOUNDATION'S STATED GOALS IN EACH FOCUS AREA. THE MAJORITY OF GRANTS ARE INITIATED BY THE FOUNDATION THROUGH DIRECT CONTACT OR REQUESTS FOR PROPOSALS. AS PART OF ITS SCHOLARSHIP PROGRAM, THE FOUNDATION PROVIDES EDUCATION GRANTS TO SELECT LEE SCHOLARS THROUGH ITS DISTINGUISHED LEE SCHOLAR AWARD.

ANY SUBMISSION DEADLINES

THE FOUNDATION BOARD MEETS QUARTERLY TO APPROVE GRANT AWARDS.

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE LEE FOUNDATION IS A PRIVATE FOUNDATION DEDICATED TO EDUCATION AND MENTAL HEALTH.

2023 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

FORM 99	90-PF PAGE 1							990-P	F						
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
12	OFFICE FURNITURE	12/19/08	SL	10.00		16	37,717.				37,717.	37,717.		٥.	37,717.
25	OFFICE FURNITURE	01/27/09	SL	10.00		16	2,113.				2,113.	2,113.		0.	2,113.
26	OFFICE FURNITURE	09/21/09	SL	10.00		16	1,272.				1,272.	1,272.		0.	1,272.
39	COPY MACHINE	04/24/13	SL	5.00		16	5,342.				5,342.	5,342.		0.	5,342.
84	OFFICE FURNITURE	02/10/17	SL	10.00		16	30,000.				30,000.	17,750.		3,000.	20,750.
85	NEW PHONE SYSTEM	02/27/17	SL	5.00		16	2,895.				2,895.	2,895.		0.	2,895.
109	DELL DESKTOP	12/20/19	SL	5.00		16	1,019.				1,019.	612.		204.	816.
111	POWEREDGE R440 FILE SERVER	12/22/20	SL	3.00		16	3,002.				3,002.	2,002.		1,000.	3,002.
112	WEBSITE	08/24/20	SL	3.00		16	5,950.				5,950.	4,627.		1,323.	5,950.
113	OWL (50%)	07/26/21	SL	3.00		16	535.				535.	252.		178.	430.
114	HVAC REPAIR	08/20/21	SL	6.00		16	1,905.				1,905.	424.		318.	742.
115	MEMORY FOX	11/23/21	SL	3.00		16	1,620.				1,620.	585.		540.	1,125.
121	SERVER SWITCH	01/13/22	SL	3.00		16	180.				180.	55.		60.	115.
122	FOUNDANT LICENSE FRO GRANT SOFTWARE	03/07/22	SL	2.00		16	11,500.				11,500.	4,313.		5,750.	10,063.
123	ALLAIRE NEW LAPTOP	10/14/22	SL	3.00		16	2,630.				2,630.	146.		877.	1,023.
124	MONITOR	11/18/22	SL	3.00		16	449.				449.	12.		150.	162.
125	JANE NEW LAPTOP	01/20/23		3.00		16	908.				908.			277.	277.
	ESET 3 YEAR LICENSE	12/19/23		3.00		16	950.				950.			0.	·

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2023 DEPRECIATION AND AMORTIZATION REPORT

F

FORM 9	90-PF PAGE 1	-						990-P	F	-	-		-	-	
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	* TOTAL 990-PF PG 1 DEPR						109,987.				109,987.	80,117.		13,677.	93,794.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						108,129.			0.	108,129.	80,117.			93,517.
	ACQUISITIONS						1,858.			0.	1,858.	٥.			277.
	DISPOSITIONS/RETIRED						0.			0.	0.	0.			0.
	ENDING BALANCE						109,987.			0.	109,987.	80,117.			93,794.
	ENDING ACCUM DEPR											93,794.			
	ENDING BOOK VALUE											16,193.			

328111 04-01-23

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

	990-T	I E	EXTENDED TO NOVEMBER 15, Exempt Organization Business Inco	OMB No. 1545-0047				
Form •	550-1		(and proxy tax under section 603					
	For calendar year 2023 or other tax year beginning, and ending			ending		2023		
Departm Internal	The service Go to www.irs.gov/Form990T for instructions and the latest information.							
A	Check box if		Name of organization (Check box if name changed and see instr	- ,,,,,	· · ·	501(c)(3) Organizations Only bloyer identification number		
	address changed.		······································	,				
	mpt under section		45-3845576					
	501(c)(3) or Type 51.6.6 MATN CONDETER 200.2							
	408(e) 220(e)		5166 MAIN STREET, 303		-			
	408A 530(a) City or town, state or province, country, and ZIP or foreign postal code 529(a) 529A WILLIAMSVILLE, NY 14221							
	()	C Boo		,778,087.		an amended return.		
G Ch	neck organization	type [X 501(c) corporation 501(c) trust 401(a) trust	Other trust	State	college/university		
			6417(d)(1)(A) Applicable entity					
	neck if filing only to		Credit from Form 8941 Refund shown on Form			unt from Form 3800		
			ation filing a consolidated return with a 501(c)(2) titleholding cor ed Schedules A (Form 990-T)			<u> </u>		
			e corporation a subsidiary in an affiliated group or a parent-subsi			Yes X No		
			d identifying number of the parent corporation					
	ne books are in car		PATRICK P. LEE FOUNDATION	Telephone number 7	16-	844-3100		
Parl			d Business Taxable Income			200 010		
1			ess taxable income computed from all unrelated trades or busine		1	399,010.		
2 3					2	399,010.		
4	Charitable contril	- butions	(see instructions for limitation rules)		4	0.		
5			taxable income before net operating losses. Subtract line 4 from		5	399,010.		
6	Deduction for net	t operat	ing loss. See instructions		6			
7	Total of unrelated	d busine	ess taxable income before specific deduction and section 199A	deduction.		200 010		
-	Subtract line 6 fro		5		7	<u>399,010.</u> 1,000.		
8 9			8 9	1,000.				
9 10			10	1,000.				
11								
Parl	t II Tax Com	putati	on					
1								
2	Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on							
~			2					
3 4			3					
5	Alternative minim	5						
6			6					
_7	7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies							
Parl								
1a			rations attach Form 1118; trusts attach Form 1116)	1a 45	-			
b c					1			
d		1d	1					
е	d Credit for prior-year minimum tax (attach Form 8801 or 8827) e Total credits. Add lines 1a through 1d							
2								
3a	Amount due from	3a 3b	-					
b	Amount due from	-						
c d								
e e	Other amounts d							
f								
4	4 Total tax. Add lines 2 and 3f (see instructions). Check if includes tax previously deferred under							
	section 1294. Enter tax amount here							
5								
LHA	LHA For Paperwork Reduction Act Notice, see instructions. 323701 11-20-23 Form 990-1 (2023)							

Form 9	<u>90-T (2023)</u>					Page 2		
Part	III Tax and Payments (continued)							
6 a	Payments: Preceding year's overpayment credited to the current year	6a						
b	Current year's estimated tax payments. Check if section 643(g) election							
	applies	6b						
с	Tax deposited with Form 8868 6c 11,100.							
d	Foreign organizations: Tax paid or withheld at source (see instructions)							
е	Backup withholding (see instructions)							
f	Credit for small employer health insurance premiums (attach Form 8941)							
g	Elective payment election amount from Form 3800	6g						
h	Payment from Form 2439	6h						
i	Credit from Form 4136							
j	Other (see instructions)							
7	Total payments. Add lines 6a through 6j		·····	7	11,1			
8				8)95.		
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed			9	73,5	577.		
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid 10							
11	Image: Text and the amount of line 10 you want: Credited to 2024 estimated tax Refunded 11							
Part	IV Statements Regarding Certain Activities and Other Informa	tion (se	e instructions)					
1	At any time during the 2023 calendar year, did the organization have an interest in c	or a signat	ure or other authority		Yes	No		
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the	-						
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country							
	here					X		
2	During the tax year, did the organization receive a distribution from, or was it the gra	antor of, o	r transferor to, a			X		
	foreign trust?							
	If "Yes," see instructions for other forms the organization may have to file.							
3	Enter the amount of tax-exempt interest received or accrued during the tax year \$							
4	Enter available pre-2018 NOL carryovers here \$ Do not include any post-2017 NOL carryover							
	shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.							
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce							
	the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.							
	Business Activity Code	Ava	ailable post-2017 NOL	carryover				
		\$						
		\$						
	\$							
		\$						
6 a	Reserved for future use							
b	Reserved for future use							
Part	V Supplemental Information							

Provide any additional information. See instructions.

Sign	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.									
Here			EXECUTIVE DIRECTOR			May the IRS discuss this return with the preparer shown below (see				
	Signature of officer	Date	Title		instr		ictions)? X Y	res No		
	Print/Type preparer's name	Preparer's signature		Date	Check	if	PTIN			
Paid					self-employe	d				
Preparer	JON K. PELLISH	JON K. PELL	ISH	11/12/24			P00625	5801		
Use Only		AVIS BESAW &	KERSHNI	ER LLP	Firm's EIN		16-146	58002		
000 0111	45 BRYANT									
	Firm's address AMHERST, NY 14228				Phone no.	71	6-630-2	2400		
-								00 T (

323711 11-20-23

45-3845576

FORM 990-T	LAT	E PAYMENT IN	TERE;	ST		ST	ATEMENT 14
DESCRIPTION	DATE	AMOUNT	BAL	ANCE	RATI	E DAYS	5 INTEREST
EXTENSION PAYMENT TAX DUE DATE FILED	05/15/24 05/15/24 11/10/24	-11,100. 83,582.		-11,100. 72,482. 75,374.		00 179	2,892
TOTAL LATE PAYMENT]	INTEREST						2,892
FORM 990-T	LATE	PAYMENT PEN	ALTY			ST	ATEMENT 1
DESCRIPTION	DATE	DATE AMOUNT		BALANCE		MONTHS	PENALTY
TAX DUE DATE FILED	05/15/24 11/10/24	-		2. 72,48 72,48		6	2,174
TOTAL LATE PAYMENT H	PENALTY						2,174
FORM 990-T	INTERES	F AND PENALT	IES			ST	ATEMENT 16
TAX FROM FORM 990-1 UNDERPAYMENT PENA LATE PAYMENT INTE LATE PAYMENT PENA	LTY REST						72,482 1,095 2,892 2,174

TOTAL AMOUNT DUE	78,643.

SCHEDULE A (Form 990-T)

Department of the Treasury

Ε

Unrelated Business Taxable Income From an Unrelated Trade or Business

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

ot enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

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

1

Inte	rnal Revenue Service	Done
A	Name of the organization	n

В	Employer identification number
	45 5045570

PATRICK P. LEE FOUNDATION

Describe the unrelated trade or business

900003 Unrelated business activity code (see instructions) С

UNRELATED BUSINESS TAXABLE INCOME FROM PASSTH

D Sequence:

1

of

Pa	rt I Unrelated Trade or Business Income		(A) Ind	come		(B) Expen	ses	(C) Net
1a	Gross receipts or sales							
b	Less returns and allowances c Balance	1c						
2	Cost of goods sold (Part III, line 8)	2						
3	Gross profit. Subtract line 2 from line 1c	3						
4a	Capital gain net income (attach Schedule D (Form 1041 or Form							
	1120)). See instructions	4a			0.			
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b						
с	Capital loss deduction for trusts	4c						
5	Income (loss) from a partnership or an S corporation (attach							
	statement) STATEMENT 17	5	39	9,01	0.			399,010.
6	Rent income (Part IV)	6						
7	Unrelated debt-financed income (Part V)	7						
8	Interest, annuities, royalties, and rents from a controlled							
	organization (Part VI)	8						
9	Investment income of section 501(c)(7), (9), or (17)							
	organizations (Part VII)	9						
10	Exploited exempt activity income (Part VIII)	10						
11	Advertising income (Part IX)	11						
12	Other income (see instructions; attach statement)	12						
13	Total. Combine lines 3 through 12	13	39	9,01	0.			399,010.
Pa	rt II Deductions Not Taken Elsewhere. See instruct directly connected with the unrelated business in		or limitatio	ons or	n ded	uctions. De	duction	ns must be
1	Compensation of officers, directors, and trustees (Part X)						. 1	
2	Salaries and wages						2	
3	Repairs and maintenance							
4	Bad debts							
5	Interest (attach statement). See instructions						. 5	
6	Taxes and licenses							
7	Depreciation (attach Form 4562). See instructions			7				
8	Less depreciation claimed in Part III and elsewhere on return						8b	
9	Depletion						9	
10	Contributions to deferred compensation plans						. 10	
11	Employee benefit programs							
12	Excess exempt expenses (Part VIII)						. 12	
13	Excess readership costs (Part IX)							
14	Other deductions (attach statement)					14		

15	Total deductions. Add lines 1 through 14	15	0.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13,		
	column (C)	16	399,010.
17	Deduction for net operating loss. See instructions	17	0.
18	Unrelated business taxable income. Subtract line 17 from line 16	18	399,010.
or	Paperwork Reduction Act Notice, see instructions.	Schedu	le A (Form 990-T) 2023

15121112 795314 2746.0

Sched	ule A (Form 990-T) 2023				Page 2
Part		hod of inventory valuation	n		·
1	Inventory at beginning of year			1	
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter	,			
9 Part	Do the rules of section 263A (with respect to property IV Rent Income (From Real Property and				Yes No
1	Description of property (property street address, city, s				
•	A				
	в 🗌				
	c 🗌				
	D				
		A	В	С	D
2	Rent received or accrued		_		
a	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
-	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
с	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c, columns a Deductions directly connected with the income in lines 2a and 2b (attach statement)		nd on Part I, line 6, colu	ımn (A)	0.
3 4 <u>5</u> Part 1	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of A B	inter here and on Part I, li ee instructions)	ne 6, column (B)		0.
4 5 Part	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of A B C C	inter here and on Part I, li ee instructions)	ne 6, column (B)		
4 5 Part	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of A B	inter here and on Part I, li ee instructions) city, state, ZIP code). Che	ne 6, column (B) eck if a dual-use. See in	structions.	
4 5 Part	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of A B C C	inter here and on Part I, li ee instructions)	ne 6, column (B)		0.
4 <u>5</u> Part 1	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of A B C Gross income from or allocable to debt-financed	inter here and on Part I, li ee instructions) city, state, ZIP code). Che	ne 6, column (B) eck if a dual-use. See in	structions.	0.
4 <u>5</u> Part 1	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E V Unrelated Debt-Financed Income (s Description of debt-financed property (street address, or A B	inter here and on Part I, li ee instructions) city, state, ZIP code). Che	ne 6, column (B) eck if a dual-use. See in	structions.	0.
4 5 Part 1	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of A B C Gross income from or allocable to debt-financed property	inter here and on Part I, li ee instructions) city, state, ZIP code). Che	ne 6, column (B) eck if a dual-use. See in	structions.	0.
4 5 Part 1	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of A	inter here and on Part I, li ee instructions) city, state, ZIP code). Che	ne 6, column (B) eck if a dual-use. See in	structions.	0.
4 <u>5</u> Part 1 2 3	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of A B C C G Gross income from or allocable to debt-financed property Gross directly connected with or allocable to debt-financed property Straight line depreciation (attach statement)	inter here and on Part I, li ee instructions) city, state, ZIP code). Che	ne 6, column (B) eck if a dual-use. See in	structions.	0.
4 <u>5</u> <u>Part</u> 1 2 3 a	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of A	inter here and on Part I, li ee instructions) city, state, ZIP code). Che	ne 6, column (B) eck if a dual-use. See in	structions.	0.
4 5 Part 1 2 3 a b	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of A	inter here and on Part I, Ii ee instructions) city, state, ZIP code). Che	ne 6, column (B) eck if a dual-use. See in	structions.	0.
4 5 Part 1 2 3 a b	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of A	inter here and on Part I, Ii ee instructions) city, state, ZIP code). Che	ne 6, column (B) eck if a dual-use. See in	structions.	0.
4 5 Part 1 2 3 a b c	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of A	A	ne 6, column (B) eck if a dual-use. See in	structions.	0.
4 5 Part 1 2 3 a b c	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of A	A	ne 6, column (B) eck if a dual-use. See in	structions.	0.
4 5 Part 1 2 3 a b c 4	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of B C C C C C C C C C C C C C C C C C C	A	ne 6, column (B) eck if a dual-use. See in	structions.	0.
4 5 Part 1 2 3 a b c 4	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of A	A	ne 6, column (B) eck if a dual-use. See in	structions.	0.
4 5 Part 1 2 3 a b c 4 5	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of A	A A A A A A A A A A A A A A A A A A A	B B	c	0.
4 5 Part 1 2 3 a b c 4 5 6	Deductions directly connected with the income in lines 2a and 2b (attach statement)	A A A A A A A A A A A A A A A A A A A	B B %	c %	0.
4 5 Part 1 2 3 a b c 4 5 6 7 8	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E V Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of B B	A A A A A A A A A A A A A A A A A A A	B B %	c %	0.
4 5 Part 1 2 3 a b c 4 5 4 5 6 7 8 9	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of A	Inter here and on Part I, Ii Inter here and on Part I, Ii Inter here and on Part I, Ii Inter here and on Part Int	ne 6, column (B) eck if a dual-use. See in B B I, line 7, column (A)	c	0. 0. 0.
4 5 Part 1 2 3 a b c 4 5 6 7 8	Deductions directly connected with the income in lines 2a and 2b (attach statement) Total deductions. Add line 4, columns A through D. E V Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of B B	A A A A A A A A A A A A A A A A A A A	ne 6, column (B) eck if a dual-use. See in B B I, line 7, column (A)	C C (B)	0. 0. 0.

2023.05000 PATRICK P. LEE FOUNDATION 2746.0_1

												1
Schedu	ule A (Form 990-T) 2023 VI Interest, Annu	uition Dovalt	ion and D	onto Ero	m Contro		raonization		·	. ,		Page 3
Part	VI Interest, Annu		ies, and R		n Contro		-	,	e instruct	,		
	1. Name of controlled 2		Employer			Exempt Control al of specified		ganization		6. Deductio	ons directly	
	organization	_	entification		ne (loss)		nents made	that is	included	in the	connect	
	e ga za en		number		tructions)				olling orga gross inc		income in	
(1)									gross inc			
(2)												
(3)												
(4)												
			No	onexempt C	Controlled O	ganizati	ons			-		
7	. Taxable Income	8. Net ur	nrelated	9. To	otal of specif	ied	10. Part o			11.	Deductions	directly
		income	, ,	pa	yments mad	е	that is inc				connected	
		(see instr	uctions)				gross income			income in column 10		umn 10
<u>(1)</u>												
(2)												
(3)												
<u>(4)</u>							A al al a a h			A -1		
							Add colum Enter here				d columns 6 er here and	
							line 8, c	olumn	(A).	1	ine 8, colurr	ın (B).
Totals									0.			0.
Part	VII Investment I	ncome of a	Section 50	1(c)(7), (9), or (17)	Orgar	hization (s	ee inst	ructions)			-
		cription of incom			2. Amou		3. Deductio	ons	4. Set-	asides	5. Total	deductions
					incon	ne	directly conne (attach stater		(attach st	ateme		et-asides ols 3 and 4)
							(attaon otator	inoine,			`	· · · ·
<u>(1)</u>												
<u>(2)</u>												
(<u>3</u>)												
(4)					Add amou	unts in					Add a	mounts in
					column 2							n 5. Enter
					here and or line 9, colu							d on Part I, column (B).
Totals						0.						0.
Part	VIII Exploited E	xempt Activ	ity Income	, Other T	han Adve	ertising	g Income	see ins	structions)			
1	Description of exploite	ed activity:	-						,			
2	Gross unrelated busine	ess income from	n trade or busi	iness. Entei	r here and o	n Part I,	line 10, colum	n (A)		2		
3	Expenses directly con	nected with proc	duction of unr	elated busi	ness income	e. Enter l	here and on Pa	art I,				
	line 10, column (B)									3		
4	Net income (loss) from	unrelated trade	or business.	Subtract lir	ne 3 from line	e 2. If a g	gain, complete					
										4		
5	Gross income from ac									5		
6	Expenses attributable									6		
7	Excess exempt expense											
	4. Enter here and on P	Part II, line 12								7		

Schedule A (Form 990-T) 2023

323731 01-19-24

	ule A (Form 990-T) 2023				Page 4
Part	v				
1	Name(s) of periodical(s). Check box if reportin	ig two or more periodicals on a c	consolidated basis	i.	
	в 🗌				
	c				
	• P				
Enter a	amounts for each periodical listed above in the	corresponding column.			
		A	В	С	D
2	Gross advertising income				
	Add columns A through D. Enter here and on	Part I, line 11, column (A)			0.
а					
3	Direct advertising costs by periodical				
а	Add columns A through D. Enter here and on	Part I, line 11, column (B)			0.
		[]			
4	Advertising gain (loss). Subtract line 3 from lin	ne			
	2. For any column in line 4 showing a gain,				
	complete lines 5 through 8. For any column in				
	line 4 showing a loss or zero, do not complete lines 5 through 7, and enter -0- on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than				
	line 5, subtract line 6 from line 5. If line 5 is les	ss			
	than line 6, enter -0-				
8	Excess readership costs allowed as a				
	deduction. For each column showing a gain o				
	line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the gr				0
Part	Part II, line 13 X Compensation of Officers, Dir	actors and Trustees	· · · · · · · · · · · · · · · · · · ·		0.
ταιι			e instructions)	3. Percentage	4. Compensation
	1. Name	2. Title		of time devoted	attributable to
	I. Name	2. 1110		to business	unrelated business
(1)				%	
(2)				%	
(3)				%	
(4)				%	
	Enter here and on Part II, line 1				0.
Part	XI Supplemental Information (se	e instructions)			

323732 01-19-24

1

FORM 990-T (A)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 17
DESCRIPTION		NET INCOME OR (LOSS)
AG REALTY FUND I	X, LP – ORDINARY BUSINESS INCOME (LOSS) X (A) LP – ORDINARY BUSINESS INCOME (LOSS) ITABLE CAPITAL LLC – ORDINARY BUSINESS	-25,849. -11,148.
INCOME (LOSS)	TIADLE CALITAL LLC ONDINANI DODINEDD	436,007.
TOTAL INCLUDED O	N SCHEDULE A, PART I, LINE 5	399,010.
FORM 990-T D	ESCRIPTION OF ORGANIZATION'S UNRELATED	STATEMENT 18

BUSINESS ACTIVITY

UNRELATED	BUSINESS	TAXABLE	INCOME	FROM	PASSTHROUGH	INVESTMENTS	

TO FORM 990-T, SCHEDULE A, LINE E

SCHEDULE A

Department of the Treasury Internal Revenue Service

Name

Capital Gains and Losses Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T. Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

2023

Yes X No

Employer identification number

45-3845576

L

PATRICK P. LEE FOUNDATION

Did the corporation dispose of any	(1, 1, 2, 2, 3, 4, 2, 3, 3, 4, 4, 4, 5, 3, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4,	and a second second base of a second second second second	1	

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gai	ins and Losses - Ass	ets Held One Year o	or Less		
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s) 89	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Part I, line 2, column	(g)	result with column (g)
 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 					
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked					
4 Short-term capital gain from installment sales				4	
5 Short-term capital gain or (loss) from like-king				5	
6 Unused capital loss carryover (attach computa				6	()
7 Net short-term capital gain or (loss). Combin			One Veer	7	
Part II Long-Term Capital Gai	ns and Losses - Ass	ets reid More Than			(1) 0 : (1)
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on					
Form(s) 8949 with Box F checked					-43,487.
11 Enter gain from Form 4797, line 7 or 9				11	
12 Long-term capital gain from installment sales	from Form 6252, line 26 or 3	7		12	
13 Long-term capital gain or (loss) from like-king	d exchanges from Form 8824			13	
14 Capital gain distributions				14	
15 Net long-term capital gain or (loss). Combine		nh		15	-43,487.
Part III Summary of Parts I and					
16 Enter excess of net short-term capital gain (lin				16	
17 Net capital gain. Enter excess of net long-term				17	-
18 Add lines 16 and 17. Enter here and on Form		plicable line on other returns		18	0.
Note: If losses exceed gains, see Capital Los	ses in the instructions.				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2023

321051 12-26-23

Form 8949 (2023)				Attachm	nent Sequend	ce No. 12A	Page 2	
Name(s) shown on return. Name and	d SSN or taxpaye	er identification n	o. not required if			Social secur	rity number or entification no.	
PATRICK P. LEE	FOUNDAT	ION				45-3	845576	
Before you check Box D, E, or F belo statement will have the same informa broker and may even tell you which I	ow, see whether y ation as Form 10		Form(s) 1099-B o show whether you	or substitute statem Ir basis (usually you	ent(s) from yo r cost) was re	our broker. A su eported to the IF	bstitute IS by your	
Part II Long-Term. Transaction	ons involving capita	al assets you held n	nore than 1 year are	e generally long-term (s	ee instructions	s). For short-term t	ransactions,	
Note: You may aggregate al codes are required. Enter the								
You must check Box D, E, or F below. (If you have more long-term transactions than will	Check only one bo	x. If more than one b	ox applies for your long	-term transactions, compl	ete a separate Fo	rm 8949, page 2, for	each applicable box.	
(D) Long-term transactions rep								
(E) Long-term transactions rep X (F) Long-term transactions not	• •			eported to the IRS				
1 (a)	(b)	(c)	(d)	(e)		if any, to gain or		
Description of property	Date acquired	Date sold or	Proceeds (sales price)	Cost or other basis. See the	in column (g	enter an amount), enter a code in	Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)		Note below and	column (f). S	See instructions. (g)	from column (d) &	
				the instructions	Code(s)	Amount of adjustment	combine the result with column (g)	
AG REALTY FUND IX,								
LP							-32,082.	С
AG REALTY FUND IX (A) LP							-11,405.	С
(11) 11							11,1000	Ŭ
2 Totals. Add the amounts in colur								
negative amounts). Enter each to		-						
Schedule D, line 8b (if Box D abo above is checked), or line 10 (if E		•					-43,487.	
Note: If you checked Box D above b			was incorrect, ent	ter in column (e) the	basis as rep	orted to the IRS	, ,	
adjustment in column (g) to correct to	he basis. See C	<i>olumn (g</i>) in the s	separate instructi	ons for how to figur	e the amoun	t of the adjustm	ent.	

Department of the Treasury Internal Revenue Service

Name

Capital Gains and Losses Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T. Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

2023

Yes X No

Employer identification number

45-3845576

PATRICK P. LEE FOUNDATION

Did the corporation dispose of any	· · · · · · · · · · · · · · · · · · ·	l a calle a calle constant a factor for the set of the	· · · · · · · · · · · · · · · · · · ·	
I lid the corporation dispose of any	/ Invastmentis) in a di lalifier	1 ADDARTUNITY TUDA AURINA	n the tay vear?	

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Ga	ins and Losses - Ass	ets Held One Year	or Less		
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s) 89	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the
round off cents to whole dollars.	(sales price)	(or other basis)	Part I, line 2, column	(g)	result with column (g)
 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 					
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked					
4 Short-term capital gain from installment sales				4	
5 Short-term capital gain or (loss) from like-kin				5	
6 Unused capital loss carryover (attach compute	ation)			6	()
7 Net short-term capital gain or (loss). Combin	e lines 1a through 6 in columr	۱ <u> h</u>	•	7	
Part II Long-Term Capital Gai	ns and Losses - Ass	ets Held More Than	One Year		
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on					
Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on					
Form(s) 8949 with Box F checked					-43,487.
				11	
12 Long-term capital gain from installment sales				12	
13 Long-term capital gain or (loss) from like-kin	d exchanges from Form 8824			13	
				14	
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h 15 Part III Summary of Parts I and II 15				-43,487.	
16 Enter excess of net short-term capital gain (lin	ne 7) over net long-term capita	al loss (line 15)		16	
17 Net capital gain. Enter excess of net long-term				17	
	8 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns				
	, 3 , , ,				0.

Note: If losses exceed gains, see Capital Losses in the instructions.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2023

321051 12-26-23

Form 8949 (2023)				Attachn	nent Sequer	nce No. 12A	Page 2
Name(s) shown on return. Name and	d SSN or taxpaye	er identification n	io. not required if			Social secur	ity number or ntification no.
PATRICK P. LEE							845576
Before you check Box D, E, or F belo statement will have the same informa broker and may even tell you which b	ow, see whether ation as Form 10	you received any 99-B. Either will s	r Form(s) 1099-B show whether you	or substitute statem ır basis (usually you	ent(s) from y r cost) was r	your broker. A sul reported to the IF	bstitute IS by your
Part II Long-Term. Transaction see page 1.		al assets you held r	more than 1 year are	e generally long-term (s	ee instruction	ns). For short-term ti	ransactions,
Note: You may aggregate al codes are required. Enter the	l long-term transact	tions reported on F Schedule D. line 8a	orm(s) 1099-B show	ving basis was reported to report these trans	d to the IRS a	nd for which no adj rm 8949 (see instru	ustments or ctions).
You must check Box D, E, or F below. (If you have more long-term transactions than will	Check only one bo	x. If more than one b	ox applies for your long	-term transactions, compl	ete a separate F	orm 8949, page 2, for e	
(D) Long-term transactions rep					-		
(E) Long-term transactions rep			•			,	
X (F) Long-term transactions not	t reported to you	on Form 1099-E	3	-			
1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis. See the	loss. If you in column (, if any, to gain or u enter an amount g), enter a code in See instructions.	(h) Gain or (loss). Subtract column (e)
	(100., ady, yr.)	(Mo., day, yr.)		Note below and see Column (e) in the instructions	(f) Code(s)	(g) Amount of	from column (d) & combine the result with column (g)
AG REALTY FUND IX,						adjustment	(g)
LP							<32,082.>
AG REALTY FUND IX							
(A) LP							<11,405.>
				1			
2 Totals. Add the amounts in colur	nns (d), (e), (q). a	nd (h) (subtract					
negative amounts). Enter each to							
Schedule D, line 8b (if Box D abo	ove is checked),	line 9 (if Box E					
above is checked), or line 10 (if E							<43,487.>
Note: If you checked Box D above b							
adjustment in column (g) to correct t	THE DASIS. SEE (olumn (g) in the s	separate instructi	UNS IOF NOW LO LIGUI	e the amou		ent. Form 8949 (2023)
323012 01-05-24						ł	-orm 0373 (2023)

15121112 795314 2746.0



Alternative Minimum Tax-Corporations

OMB No. 1545-0123

Attach to your tax return.

Go to www.irs.gov/Form4626 for instructions and the latest information.

2023

Nam	e				Employ	er identifica	ation number
	PATRICK P. LEE FOUNDATION 45-3845576						5576
A	Is the corporation filing this form a member of a controlled group treated as a single	employ	ver under sections 59(k)	1)(D) and 52?	[Yes	X No
	If "Yes," the corporation must complete Part V listing the names, EINs, and separate company financial						
	statement income or loss for each member of the controlled group treated as a single employer taken into						
	account in the determination of "applicable corporation" under section 59(k)(1)(D)					
в	Is the corporation filing this form a member of a foreign-parented multinational grou	p (FPM	G) within the meaning of	section 59(k)(2))(B)?	Yes	X No
	If "Yes," the corporation must complete Part V listing the names, EINs, and	l separ	ate company financia	I			
	statement income or loss for each member of the FPMG under section 59(k)(2)(B)					
Pa	Irt I Applicable Corporation Determination (Report all am	ounts	in U.S. dollars.)				
	If you have already determined in current or prior years you are an a	applica	ble corporation, skip F	Part I and contii	nue to Pa	art II.	
			(a) First Preceding	(b) Second Pr	eceding	(c) Third	Preceding
			Year Ended	Year End	bet	Year	Ended
1	Net income or loss per applicable financial statement(s) (AFS) (see inst):						
а	Consolidated net income or loss per the AFS of the corporation	1a					
b	Include AFS net income or loss of other includible entities (add						
	net income and subtract net loss)	1b					
с	Exclude AFS net income or loss of excludible entities (add net						
	loss and subtract net income)	1c					
d	Adjustment for certain consolidating entries (see instructions)	1d					
е	Specified additional net income or loss item B. Reserved for future use	1e					
f	AFS net income or loss of all entities in the test group before						
	adjustments. Combine lines 1a through 1d	1f					
2	Adjustments:						
а	Financial statements covering different tax years	2a					
	Corporations that are not included on the taxpayer's consolidated						
	return (see instructions)	2b					
с	Pro-rata share of net income from controlled foreign corporations for						
	which the corporation is a U.S. shareholder. If zero or less, enter -0-						
	(see instructions for special rules if completing this form for an FPMG)	2c					
d	Amounts that are not effectively connected to a U.S. trade or business						
	(see instructions for special rules if completing this form for an FPMG)	2d					
е	Certain taxes (see instructions)	2e					
f	Patronage dividends and per-unit retain allocations (cooperatives only)	2f					
g		2g					
h	Certain credits (see instructions)	2h					
i	Mortgage servicing income	2 i					
i	Tax-exempt entities (organizations subject to tax under section 511)	2j					
k		2k					
Т	Qualified wireless spectrum	21					
m	Covered transactions	2m					
n	Adjustments related to bankruptcy and insolvency	2n					
	Certain insurance company adjustments	20					
р	Adjustment P - Reserved for future use	2p					
q	Adjustment Q - Reserved for future use	2q					
r	Adjustment R - Reserved for future use	2r					
s	Adjustment S - Reserved for future use	2s					
z	Other (see instructions)	2z					
3	Specified adjustment. Reserved for future use	3					
4	Total adjustments. Combine lines 2a through 2z	4					
5	AFSI. Combine lines 1f and 4	5					
6	AFSI of first, second, and third preceding tax years. Combine columns (a)		nd (c) of line 5		6		
7	3-year average annual AFSI (see instructions)				7		
LHA	For Paperwork Reduction Act Notice, see separate instructions.		316231 02-12-24			Form 4	4626 (2023)

2023.05000 PATRICK P. LEE FOUNDATION 2746.0_1

15

Form 4	626 (2023)				Page 2
Part	Applicable Corporation Determination (Report all amo	unts in U.S.	dollars.) (continued	d)	
8	Is line 7 more than \$1 billion?				
	Yes. Continue to line 9.				
	No. STOP here and attach to your tax return.				
9	Is the corporation a member of an FPMG within the meaning of section a	59(k)(2)(B)?			
	Yes. Continue to line 10.				
	No. Continue to Part II.				
			(a)	(b)	(c)
			First Preceding	Second Preceding	Third Preceding
			Year Ended	Year Ended	Year Ended
10	AFSI for purposes of the \$100 million test before adjustments:				
а	AFSI from line 5	10 a			
b	Aggregation differences (see instructions)	10 b			
С	Total AFSI for purposes of the \$100 million test before adjustments.				
	Combine lines 10a and 10b	10c			
11	Adjustments:				
а	Income not effectively connected to a U.S. trade or business	11a			
b	Pro-rata share of CFC net income described in section 56A(c)(3)				
	(attach worksheet) (see instructions)	11b			
С	Reserved for future use - Other adjustments 1	11c			
d	Reserved for future use - Other adjustments 2	11d			
12	Total adjustments. Combine lines 11a and 11b	12			
13	Total AFSI for purposes of the \$100 million test. Combine lines				
	10c and 12	13			
14	AFSI of first, second, and third preceding tax years. Combine columns (a), (b), and ((c) of line 13	14	
15	3-year average annual AFSI for purposes of the \$100 million test				
16	Is line 15 \$100 million or more?				
	Yes. Continue to Part II.				
	No. STOP here. Attach to your tax return.				

	626 (2023)		Page 3
Part	II Corporate Alternative Minimum Tax		
	Net income or loss per applicable financial statement(s) (AFS) (see instructions):		
a (Consolidated net income or loss per the AFS of the corporation	. 1a	398,010.
b	nclude AFS net income or loss of other includible entities (add net income and subtract net loss)	1b	
c	Exclude AFS net income or loss of excludible entities (add net loss and subtract net income)	1c	
d /	Adjustment for certain consolidating entries (see instructions)	. 1d	
e	Specified additional net income or loss item D. Reserved for future use	. 1e	
f,	AFS net income or loss before adjustments. Combine lines 1a through 1d	. 1f	398,010.
2	Adjustments:		
al	Financial statements covering different tax years	. 2a	
	Reserved for future use - Adjustment 2b		
с	Corporations that are not included on the taxpayers - consolidated return (see instructions)		
	The corporation's distributive share of adjusted financial statement income of partnerships		
e l	Pro-rata share of net income from controlled foreign corporations for which the corporation is a U.S.		
	shareholder. If zero or less, enter -0 (See instructions)	2e	
f	Amounts that are not effectively connected to a U.S. trade or business		
	Certain taxes. Enter the amount from Part III, line 7		
-	Patronage dividends and per-unit retain allocations (cooperatives only)		
	Alaska native corporations		
	Certain credits (see instructions)		
	Mortgage servicing income		
	Covered benefit plans described in section 56A(c)(11)(B)		
	Fax-exempt entities (organizations subject to tax under section 511)		
	Qualified wireless spectrum		
	Covered transactions		
	Adjustments related to bankruptcy and insolvency		
	Certain insurance company adjustments		
	AFSI adjustment S - Reserved for future use		
	AFSI adjustment T - Reserved for future use	. 2t	
u /	AFSI adjustment U - Reserved for future use	. <u>2u</u>	
z (Other (see instructions)	2	
	Total adjustments. Combine lines 2a through 2z		
4	AFSI before financial statement net operating loss carryover. Combine lines 1f and 3	4	398,010.
	Financial statement net operating loss (FSNOL) (see instructions)		
6	AFSI. Subtract line 5 from line 4. If zero or less, enter -0-	. 6	398,010.
7	Multiply line 6 by 15% (0.15)	. 7	59,702.
8	Corporate alternative minimum tax foreign tax credit (CAMT FTC). Enter amount from Part IV, Section I, line 6 (see inst)	. 8	
9	Tentative minimum tax. Subtract line 8 from line 7. If zero or less, enter -0-)	. 9	59,702.
10	Regular tax liability (see instructions)	10	83,582.
11	Base erosion minimum tax (see instructions)	11	0.
	Combine lines 10 and 11		83,582.
13	Alternative minimum tax. Subtract line 12 from line 9. If zero or less, enter -0 Enter here and on Form		
	1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return	13	0.
Part	III Adjustment for Certain Taxes Under Section 56A(c)(5)		
1 (Current income tax provision - Foreign	. 1	
	Current income tax provision - Federal	2	
	Deferred income tax provision - Foreign		
	Deferred income tax provision - Federal		
	ncome taxes included in equity method investment income	·	
	Adjustment A - Reserved for future use		
	Adjustment F - Reserved for future use	0	
-	Adjustment G - Reserved for future use		
	Adjustment H - Reserved for future use		
7	ncome taxes in other places		
7	Total. Combine lines 1 through 6z. Enter here and on Part II, line 2g ₀₂₋₁₂₋₂₄ 17	. 7	Form 4626 (2023)

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Form	4626 (2023)				Page 4
Pa	t IV Alternative Minimum Tax - Corporations Foreign Tax Credit				
Sec	tion I - AMT Foreign Tax Credit				
1	Domestic corporation AMT foreign income taxes:				
а	Total foreign taxes paid or accrued as reported on Form 1118, Schedule B,				
	Part I, column 2(j)	1a			
b	Adjustment	1b			
с	Adjustment	1c			
d	Adjustment	1d			
е	Adjustment	1e			
f	Adjustment	1f			
g	Adjustment	1g			
2	Total domestic corporation AMT foreign income taxes. Combine lines 1a through 1g $$			2	
3	Allowable controlled foreign corporation (CFC) AMT foreign income taxes:				
а	Pro-rata share of CFC AMT foreign income taxes from Part IV, Section II, line				
	11, column (n)	3a			
b	Carryover of excess foreign taxes (from Part IV, Section III, line 4, column (vii))	3b			
С	Total CFC AMT foreign income taxes. Add lines 3a and 3b			3c	
d	Percentage specified in section 55(b)(2)(A)(i)	3d	15%		
е	Pro-rata share of CFC net income described in section 56A(c)(3) (attach				
	worksheet) (see instructions)	3e			
f	CFC AMT foreign tax credit limitation (multiply line 3d by line 3e)			3f	
g	Allowable CFC AMT foreign income taxes (lesser of line 3c or line 3f)			3g	
4	CAMT FTC Line 4 - Reserved for future use			4	
5	CAMT FTC Line 5 - Reserved for future use			5	
6	Total AMT foreign income taxes. Combine lines 2 and 3g. Enter this amount on Part II, I	line 8		6	

Form 4626 (2023)