Form **990-PF**

Department of the Treasury

EXTENDED TO FEBRUARY 15, 2019 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.

_			1 2017			Open to Public Inspection
		dar year 2017 or tax year beginning APR	1, 2017	, and ending	MAR 31, 201	
Nac	ne of	foundation			A Employer identificati	on number
_			_			_
		BERMAN CHARITABLE TRUS			58- <u>61952</u> 0	9
		nd street (or P.O. box number if mail is not delivered to street	·	Room/suite	B Telephone number	
_2	66	O PEACHTREE ROAD, N.W.,	UNIT 20A		(404)262-	2181
City	or to	own, state or province, country, and ZIP or foreign pe	ostal code		C If exemption application is	s pending check here
A	TL	ANTA, GA 30305				
G	heck	all that apply. Initial return	initial return of a fo	rmer public charity	D 1 Foreign organization	ns, check here
		Final return	Amended return		1	
		Address change	Name change		2 Foreign organizations check here and attach	meeting the 85% test, computation
H (heck	type of organization X Section 501(c)(3) ex	empt private foundation	11.	E If private foundation s	statue wae terminated
Г	_		Other taxable private founda	tion $\mathcal{D}_{\mathcal{N}}$	under section 507(b)	
			ng method; X Cash	Accrual] ' '	. ,
		1	her (specify)	7.1007 da1	F If the foundation is in under section 507(b)	
•	\$	4,079,856. (Part I, colum	nn (d) must be on cash basis	;)	under Section 307(0)	(1)(D), circox fiere
<u> </u>	irt l				(a) Adjusted not	(d) Disbursements
		(The total of amounts in columns (b) (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	4		17,065.		N/A	(casii basis omy)
	1	Contributions, gifts, grants, etc., received	17,003.		IV/A	
	2	Check If the foundation is not required to attach Sch. B. Interest on savings and temporary	100	100	·	CM3 massassa
	3	cash investments	102.	102.		STATEMENT 2
	4	Dividends and interest from securities	73,877.	73,877.		STATEMENT 3
	5a	Gross rents				
	b	Net rental income or (loss)				
<u>o</u>	6a	Net gain or (loss) from sale of assets not on line 10	169,944.			STATEMENT 1
Revenue	b	Gross sales price for all assets on line 6a 1,406,197.				
ě	7	Capital gain net income (from Part IV, line 2)		170,194.		
œ	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	1.	Less Cost of goods sold				
	С	Gross profit or (loss)				
	11	Other income	52,974.	52,974.		STATEMENT 4
	12	Total Add lines 1 through 11	313,962.	297,147.		
	13	Compensation of officers directors, trustees, etc	0.	0.		0.
		Other employee salaries and wages				
	1	Pension plans, employee benefits				
es	•	Legal fees				
SUS		Accounting fees STMT 5	6,000.	4,500.		1,500.
and Administrative Expenses	ı	Other professional fees STMT 6	14,565.	14,565.		0.
e	17		14,303.	111,505.		
ıŧ	18	Interest RECEIVED			_	
stri	١.					
Ē	19	Depreciation and depletion 2016				
퉏	20	Travel, Iconferences, and meetings				
٥þ	21					
E	22	Printing and publications, LIT	, 20			20
Operating	23	Other expenses STMT 7	30.	0.		30.
rat	24	Total operating and administrative	20 505	10 00-		1 530
ğ		expenses Add lines 13 through 23	20,595.	19,065.		1,530.
J	20	Contributions, gifts, grants paid	168,200.			168,200.
	26	Total expenses and disbursements		4		
		Add lines 24 and 25	188,795.	<u> 19,065.</u>	 	169,730.
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	125,167.			
	b	Net investment income (if negative, enter -0-)		278,082.		
	C	Adjusted net income (if negative enter -0-)			N/A	

Form 990-PF (2017) THE BERMAN CHARITABLE TRUST 58-6195209 Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 137,911. 34,674. 34,674. 2 Savings and temporary cash investments 3 Accounts receivable ► Less allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 2,716,629. 3,135,261. 3,616,470. **b** Investments - corporate stock STMT 8 c Investments - corporate bonds 11 Investments land buildings and equipment basis Less accumulated denreciation 12 Investments - mortgage loans 690,243. 500,000. 428,697. STMT 9 13 Investments - other 14 Land, buildings, and equipment; basis ▶ Less accumulated depreciation STATEMENT 10) 0. 15. 15. 15 Other assets (describe ► 16 Total assets (to be completed by all filers - see the 3,544,783. 3,669,950. 4,079,856. instructions Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Fund ightharpoonsFoundations that do not follow SFAS 117, check here and complete lines 27 through 31 ō 3,544,783. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 3,544,783. 3,669,950 30 Total net assets or fund balances 3,669,950 3,544,783. 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 3,544,783. 125,167. 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 Decreases not included in line 2 (itemize)

723511 01-03-18

3,669,950. Form **990-PF** (2017)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

See the Part VI instructions

_		6195			Page 4
		see ii	istru	Ctio	nsj
	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)			2 7	0.1
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%			4,1	81.
	of Part I, line 27b				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).				Λ
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			2,7	0.
	Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 4			4,1	0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-			2 7	81.
	Credits/Payments			4,1	01.
	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 12,012.				
	Exempt foreign organizations - tax withheld at source 6b 0 •				
	Tax paid with application for extension of time to file (Form 8868) 6c 6c				
	Backup withholding erroneously withheld 6d 0.				
	Total credits and payments. Add lines 6a through 6d		1	2 0	12.
	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			<u> </u>	0.
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed				
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			9 2	31.
	Enter the amount of line 10 to be: Credited to 2018 estimated tax			<i></i>	0.
_	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
	any political campaign?		1a		Х
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1	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	Ì			
	distributed by the foundation in connection with the activities.	1			
	Did the foundation file Form 1120-POL for this year?		1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	Ī			
	(1) On the foundation. \triangleright \$ 0 • (2) On foundation managers \triangleright \$				
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers ► \$ O.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Х
	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				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3_		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	l	4a		_X_
b	If "Yes," has it filed a tax return on Form 990-T for this year?	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	1	_ 5		X
	If "Yes," attach the statement required by General Instruction T	1			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or	ŀ			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	Ì	i		
	remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	_X_	ļ
		l			
8a	Enter the states to which the foundation reports or with which it is registered. See instructions				ļ
h	GA 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 G21f "No," attach explanation		8b	Х	1
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	ţ	_ 00		
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes," complete Part XIV	}	9		x
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		X
<u>.</u> -	11 Tes, auteur a scriedule fishing treir names and goulesses	For)-PF	(2017)

Pa	int vii-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule See instructions	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	X	
	Website address ► N/A		4.60	
14	The books are in care of STEPHEN M. BERMAN Telephone no. > 404-25		469	
15	Located at ► 2660 PEACHTREE RD., N.W. UNIT 20A, ATLANTA, GA ZIP+4 ►30 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	303		$\overline{}$
IJ	and enter the amount of tax-exempt interest received or accrued during the year	1NT	/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,	- 11	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 >			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	ŧ		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No Yes X No Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2017?	1c		_X_
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):	i		
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?			
	Vanc III au			
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	!		
	statement - see instructions.) N/A	2b		ı
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after	Ì		
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	۵.		
4.	Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b	- -	X
	Did the foundation filvest during the year any amount in a marrier that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	4a		
u	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		х
)-PF	(2017)

Part VII-B Statements Regarding Activities for Which F		Poguirod /	<u> 58-6195∠</u>	09	Page 6
	Ulili 4/20 May be i	nequii eu (contini	uea)	Yes	No
5a During the year, did the foundation pay or incur any amount to:	10.157.330			162	NO
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	, .,		es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir		es X No	*	
any voter registration drive?	n		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes'		; Y €	es LAL NO		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		(V),		
4945(d)(4)(A)? See instructions			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or i		es X No		
the prevention of cruelty to children or animals?	for the eventions decayled		S LAJ NO	Ì	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	•	in Regulations	N/A	E I.	
section 53 4945 or in a current notice regarding disaster assistance? See instru			N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check to lf the answer is "Yes" to question 5a(4), does the foundation claim exemption from the contraction of		unad			
expenditure responsibility for the grant?		il/A 🗀 Ye			1
. , , ,	T,	(/A	es L No		
If "Yes," attach the statement required by Regulations section 53 4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to	22V promiumo on				
a personal benefit contract?	Jay premiums on	□ v _e	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	arconal hanafit contract?	TE	_	6b	X
If "Yes" to 6b. file Form 8870.	ersonal benefit contract.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	□ v ₄	es X No	İ	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			-	7b	
Part VIII Information About Officers, Directors, Trusto		nagers, Highly		. 3	
Paid Employees, and Contractors	·				
1 List all officers, directors, trustees, and foundation managers and t	 				
() Name and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp account	ense
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowa	nces
SEE STATEMENT 11		0.	0.		0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 4) If none	anton HAIONIC II			
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to employee benefit plans	(a) Eyn	ense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred compensation	(e) Exp account, allowa	, other
NT / A	devoted to position		compensation	allowa	nces
N/A	0.00	0.	0.		0.
	0.00	- 0.	0.		
		1			
		 			
			_		
		_			
Total number of other employees paid over \$50,000					0
			Form	990-PF	(2017)

Form 990-PF (2017) THE BERMAN CHARITABLE TRUST	58-6	195209 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
	_	
Total number of others receiving over \$50,000 for professional services	- I	▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	cal information such as the	F
number of organizations and other beneficiaries served, conferences convened, research papers produ	iced, etc	Expenses
1 <u>N/A</u>		
2		
3		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on in	nes 1 and 2	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions		
3	· · · · · · · · · · · · · · · · · · ·	
To a Add have 4 Above to 0		0.
Total. Add lines 1 through 3		0.

1 Fair market value of assets not used (or held for use) directly in ca	arrying out charitable, etc., purposes		1	
a Average monthly fair market value of securities			1a	3,351,526.
b Average of monthly cash balances			1b	70,944.
c Fair market value of all other assets			1c	620,824.
d Total (add lines 1a, b, and c)			1d	4,043,294.
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	4,043,294.
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 ((for greater amount, see instructions)	'	4	60,649.
Net value of noncharitable-use assets Subtract line 4 from line	3 Enter here and on Part V, line 4		5	3,982,645.
6 Minimum investment return Enter 5% of line 5			6	199,132.
Part XI Distributable Amount (see instructions) (S	ection 4942(j)(3) and (j)(5) private operatii	ng foundations an	d certain	
foreign organizations, check here 🕨 🔃 and do not	complete this part)			
1 Minimum investment return from Part X, line 6			1	199,132.
2a Tax on investment income for 2017 from Part VI, line 5	2a	2,781.		
b Income tax for 2017 (This does not include the tax from Part VI)	2b			
c Add lines 2a and 2b		!	2c	2,781.
3 Distributable amount before adjustments Subtract line 2c from lir	ne 1		3	196,351.
4 Recoveries of amounts treated as qualifying distributions		:	4	0.
5 Add lines 3 and 4			5	196,351.
6 Deduction from distributable amount (see instructions)			6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Ent	er here and on Part XIII, line 1		7	196,351.
Part XII Qualifying Distributions (see instructions)				
1 Amounts paid (including administrative expenses) to accomplish	charitable, etc., purposes:		-	
a Expenses, contributions, gifts, etc - total from Part I, column (d),	line 26		1a	169,730.
b Program-related investments - total from Part IX-B			1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in or	carrying out charitable, etc., purposes	:	2	
3 Amounts set aside for specific charitable projects that satisfy the:				
a Suitability test (prior IRS approval required)			3a	
b Cash distribution test (attach the required schedule)			<u>3</u> b	
4 Qualifying distributions Add lines 1a through 3b. Enter here and	on Part V, line 8; and Part XIII, line 4		4	169,730.
5 Foundations that qualify under section 4940(e) for the reduced rate	te of tax on net investment			
income. Enter 1% of Part I, line 27b			5	2,781. 166,949.
6 Adjusted qualifying distributions Subtract line 5 from line 4		1	6	
Note The amount on line 6 will be used in Part V, column (b), in	subsequent years when calculating whethe	r the foundation (jualifies for	the section
4940(e) reduction of tax in those years.				

Form **990-PF** (2017)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,				
line 7				196,351.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			168,001.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2017				
a From 2012				
b From 2013				
c From 2014				
d From 2015				
e From 2016	_			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from				
Part XII, line 4. \triangleright \$ 169,730.				
a Applied to 2016, but not more than line 2a			168,001.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				1,729.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2017 (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:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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 2016 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				194,622.
7 Amounts treated as distributions out of	I			
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 2012	•			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9.				
a Excess from 2013				
b Excess from 2014				
c Excess from 2015				
d Excess from 2016				
e Excess from 2017				5 000 DE (00.17)

Total

723611 01-03-18

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income		y section 512, 513 or 514	(e)	
•	_ (a)	(b)	(C) Exclu-	(d)	Related or exempt	
1 Program service revenue	Business code	Amount	sion code	Amount	function income	
a		,·			<u></u>	
b						
C						
d	1					
e						
•						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments			14	102.		
4 Dividends and interest from securities			14	73,877.		
5 Net rental income or (loss) from real estate.						
a Debt-financed property		-				
b Not debt-financed property						
6 Net rental income or (loss) from personal					V	
property						
7 Other investment income			14	52,974.		
8 Gain or (loss) from sales of assets other						
than inventory			18	169,944.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue.						
a						
b					 	
С	1 1					
d						
e						
12 Subtotal Add columns (b), (d), and (e)		().	296,897.	0	
13 Total Add line 12, columns (b), (d), and (e)				13	296,897	
(See worksheet in line 13 instructions to verify calculations)				_	

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

ne No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).						
_							
-							

Form 990-PF (2			HARITABL				<u> 195209</u>		age 13
Part XVII	Information Re Exempt Organ		ansfers to a	nd Transactions	and Relations	hips With Nond	charitable	!	
1 Did the or	ganization directly or indir	rectly engage in a	iny of the following	g with any other organiza	tion described in sec	tion 501(c)		Yes	No
	n section 501(c)(3) organ					. ,			
a Transfers	from the reporting founda	ation to a noncha	ritable exempt org	janization of:			Ì		ĺ
(1) Cash							1a(1)		X
(2) Other	assets						1a(2)		X
b Other tran	sactions.								
(1) Sales	of assets to a noncharital	ble exempt organ	uzation				1b(1)		X
(2) Purch	nases of assets from a nor	ncharitable exem	pt organization				1b(2)		X
(3) Renta	al of facilities, equipment,	or other assets					1b(3)		X
	bursement arrangements	l					1b(4)		X
	s or loan guarantees						1b(5)		X
	rmance of services or me	•	-				1b(6)		X
-	f facilities, equipment, ma	_		•				<u> </u>	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							sets,		
	s given by the reporting to I) the value of the goods, (ed less than fair market va	nue in any transaction	i or snaring arrangem	ient, snow in		
(a) Line no	(b) Amount involved	,		exempt organization	(d) Descriptio	n of transfers, transaction.	s, and sharing ar	rangeme	ents
			N/A						
									
				 -					
		 							
		 				····		-	
	 				- -				
									
			 		- 				
	- <u>-</u>	Ĺ							
	ndation directly or indirect 501(c) (other than section	-		or more tax-exempt orga	nizations described		Yes	v	No
	omplete the following sch		1 3600001 327					لـــــــــــــــــــــــــــــــــــــ	טאו ב
<u>v</u> 11 100, 00	(a) Name of org			(b) Type of organization		(c) Description of rela	itionship		
	N/A					<u>, , , , , , , , , , , , , , , , , , , </u>			
									
						 			
	penalties of perjury, I declare t elief پئنيs true, correct, and com						May the IRS or		
Sign Here	Con V	Ken	_	115/2/1	8 Name		shown below	? See in:	
	nature of officer or trustee	1 Con		72/3/10	TRUST	<u> </u>	X Yes	<u> </u>	⊔ No
Joiyi	Print/Type preparer's na		Preparer's si	nnature /	Title Date	Check If F	PTIN		
	. Απιστηρο ριοραίοι σ πα	a1110	/ /	ga.u. 0	, ,	self- employed			
Paid	STEPHEN BE	RMAN	Mantan h.	Bennew CPA	12/3/18	,,	P00031	701	
Preparer	Firm's name ► STE		BERMAN	& ASSOC.,L.	L.C.	Firm's EIN ▶ 58			
Use Only									
	Firm's address ► 34	75 LENOX	K ROAD,	N.E., SUITE	950				
		LANTA 3	-	·		Phone no. 404	-262-2		
				_			Form 99 0	D-PF	(2017)

CONTINUATION FOR 990-PF, PART IV THE BERMAN CHARITABLE TRUST 58-6195209 PAGE Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse, or common stock, 200 shs. MLC Co (mo., day, yr) (mo, day, yr.) D - Donation 1a 19.679 SHS. VANGUARD SHORT-TERM-GRADE FD. 07/20/17 P VARIOUS b 53.353 SHS. VANGUARD SHORT-TERM GRADE FD P VARIOUS |11/29/17 c 1849.48 SHS. VANGUARD SHORT-TERM GRADE FD P 08/24/1407/20/17 d 2146.263 SHS. VANGUARD SHORT-TERM GRADE FD P VARIOUS |11/29/17 e 1871.491 SHS. ABERDEEN EMERGING MARKETS INSTL. P |12/23/16|02/08/18 f 4577.031 SHS. ISHARES EDGE MSCI /EAFE P 12/10/1502/08/18 g 5071.815 SHS. ISHARES EDGE MSCI/USA P 01/30/1502/08/18 h 744.00 SHS. VANGUARD MID-CAP INDEX FD P 01/30/1502/08/18 1770.983 SHS. VANGUARD SMALL-CAP VALUE INDEX FD. P 12/10/1502/08/18 18.017 SHS. VANGUARD SMALL-CAP VALUE INDEX FD. D 12/24/1602/08/18 12/30/1503/14/18 k 871.00 SHS. VANGUARD TOTAL INTERNATIONAL STOCK ET P | 3621.565 SHS. WISDOMTREE EUROPE HEDGE EQUITY FD P 12/23/1602/12/18 m PARTNERSHIP LIQUIDATION - GOLUB CAPITAL PARTNERS P VARIOUS 02/09/18 n 383.991 SHS. RUSSELL 2000 VALUE ETF P |12/23/16|02/08/18 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 210 211. -1. a 568. 572. -4. <u>b</u> -107<u>.</u> 19,765. 19,872. С -205. 22,833. 23,038 đ 22,929. 7,071. 30,000. e 324,948. <u> 297,287.</u> 27,661. 258,429. 207,109. 51,320. g 111,959. 90,961. 20,998. h 97,738. 78,<u>567</u>. 19,171. 2,282. 1,958. 324. 50,119. 39,699. 10,420. 217,612. 6,037. 223,649. <u>217,650.</u> <u>190,243</u> 27,407. m 46,047. 45,945 102. n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col (h)) Gains (excess of col. (h) gain over col. (k), (1) Adjusted basis (k) Excess of col (i) (i) F M V as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any -1. a -4<u>.</u> b_ -107. C -205. ď 7,071. е 27,661. 51,320. g 20,998. 19,171. 324. 10,420. 6,037.

0				
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 } }		2_	170,194.
3 Net short-term capital gain or (loss) as defined If gain, also enter in Part I, line 8, column (c)	in sections 1222(5) and (6)	}		
If (loss), enter "-0-" in Part I, line 8			3	N/A

m

27,407.

102.

Part XV Supplementary Information	MAN CHARITABLE n		58-619	
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual,	Foundation	Durages of great or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
JEWISH FEDERATION OF GREATER ATLANTA	N/A	PUBLIC	CONTRIBUTION FOR THE	
1440 SPRING ST.,NW			2017 CAMPAIGN TO	
ATLANTA, GA 30309			SUPPORT THE JEWISH	
			COMMUNITY IN THE	
			ATLANTA AREA-ANNUAL	12,500
JEWISH HOME LIFE COMMUNITIES	N/A	PUBLIC	I'M STILL HERE	
3150 HOWELL MILL RD., NW			CONTRIBUTION.	
ATLANTA, GA 30327				70,000
JEWISH WOMEN'S FUND OF ATLANTA	N/A	PUBLIC	CONTRIBUTION TO	
1440 SPRING ST.,NW			PROMOTE SOCIAL CHANGE	
ATLANTA, GA 30309			IN THE LIVES OF JEWISH	
			WOMEN AND GIRLS LIVING	
		 	IN ATLANTA, ISRAEL AND	5,500
PRIZMAH CENTER FOR JEWISH DAY SCHOOL	N/A	PUBLIC	GENERAL SUPPORT TO AID	
254 WEST 54TH STREET			IN THE JEWISH DAY	
NEW YORK, NY 10019			SCHOOLS GOAL OF	
			BECOMING FIRST CHOICE	
			FOR EDUCATION FOR	10,000
MUNDLE CIMAT	N/A	DUDI TO	ANDULA GIVING	
TEMPLE SINAI	N/A	DABTIC	ANNUAL GIVING	
5645 DUPREE DR., NW SANDY SPRINGS. GA 30327				3 200
SANDI STRINGS, GA 30327				3,200
PIEDMONT HOSPITAL FOUNDATION	N/A	PUBLIC	CONTRIBUTION TOWARDS	
1968 PEACHTREE ROAD, NW			PLEDGE.	
ATLANTA GA 30309				10,000
TULANE UNIVERSITY	N/A	PUBLIC	ANNUAL DONATION AND	
1555 POYDRAS STREET, 10TH FLOOR			45TH REUNION DONATION.	
NEW ORLEANS, LA 70112		 -		7,000
UNION FOR REFORM JUDAISM	N/A	PUBLIC	CONTRIBUTION TOWARD	
1410 ARCADIA PLACE			THE NATIONAL	
PALO ALTO, CA 94303			INITIATIVE ON "ELDER	
			ENGAGEMENT."	10,000
Total from continuation sheets				128,200

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.rs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization Employer identification number THE BERMAN CHARITABLE TRUST 58-6195209 Organization type (check one) Filers of: Section: Form 990 or 990-FZ 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 🛣 For an organization filing Form 990, 990 EZ, or 990 PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990 EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990. Part VIII, line 1h, or (ii) Form 990-EZ, ine 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

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

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990 EZ, or 990 PF).

Name of organization

Employer identification number

THE BERMAN CHARITABLE TRUST

58-6195209

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STEPHEN M. BERMAN & CANDY BERMAN 2660 PEACHTREE RD., N.W., UNIT 20A ATLANTA, GA 30305	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$ _ \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

THE BERMAN CHARITABLE TRUST

58-6195209

(a) No. (b) FMV (or estimate) (Ge instructions.) (a) No. (c) FMV (or estimate) (Ge instructions.) (b) FMV (or estimate) (Ge instructions.) (c) FMV (or estimate) (Ge instructions.) (d) Date receive FMV (or estimate) (Ge instructions.) (d) Date receive FMV (or estimate) (Ge instructions.) (e) FMV (or estimate) (Ge instructions.) (f) No. (h) PMV (or estimate) (Ge instructions.) (a) No. (b) FMV (or estimate) (Ge instructions.) (a) No. (b) FMV (or estimate) (Ge instructions.) (a) No. (c) FMV (or estimate) (Ge instructions.) (a) No. (b) FMV (or estimate) (Ge instructions.) (b) FMV (or estimate) (Ge instructions.) (c) FMV (or estimate) (Ge instructions.) (d) Date receive FMV (or estimate) (Ge instructions.) (e) FMV (or estimate) (Ge instructions.) (f) Date receive FMV (or estimate) (Ge instructions.) (a) No. (b) FMV (or estimate) (Ge instructions.) (d) Date receive FMV (or estimate) (Ge instructions.)	art II	t II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed				
(a) No. from Part I (a) No. from Description of noncash property given FMV (or estimate) (See instructions.) Date receive (b) FMV (or estimate) (See instructions.) Date receive (c) FMV (or estimate) (See instructions.) Date receive (d) Date receive (a) No. from Description of noncash property given FMV (or estimate) (See instructions.) (a) No. from Description of noncash property given FMV (or estimate) (See instructions.) (a) No. from Description of noncash property given S (a) No. from Description of noncash property given FMV (or estimate) (See instructions.) (b) FMV (or estimate) (See instructions.) Date receive (c) FMV (or estimate) (See instructions.) (d) Date receive (e) FMV (or estimate) (See instructions.) (f) Date receive (g) PMV (or estimate) (See instructions.) (g) Date receive (g) PMV (or estimate) (See instructions.) (g) Date receive (g) PMV (or estimate) (See instructions.) (g) Date receive (g) Date re			FMV (or estimate)	(d) Date received		
(a) No. hom Description of noncash property given See instructions.) (b) FMV (or estimate) (See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date receive See instructions.) (a) No. hom Description of noncash property given (C) FMV (or estimate) (See instructions.) (a) No. hom Description of noncash property given (C) FMV (or estimate) (See instructions.) (a) No. hom Description of noncash property given (C) FMV (or estimate) (See instructions.) (a) No. hom Description of noncash property given (C) FMV (or estimate) (See instructions.) (b) FMV (or estimate) (See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date receive (C) FMV (or estimate) (See instructions.) (d) Date receive (C) FMV (or estimate) (See instructions.) (d) Date receive (C) FMV (or estimate) (See instructions.) (d) Date receive (C) FMV (or estimate) (See instructions.) (d) Date receive (C) FMV (or estimate) (See instructions.)						
(a) No. (b) (c) FMV (or estimate) (See instructions.) Date receive (See instructions.) (a) No. (b) (c) FMV (or estimate) (See instructions.) (b) FMV (or estimate) (See instructions.) (a) No. (b) (See instructions.) (b) FMV (or estimate) (See instructions.) (a) No. (b) (C) FMV (or estimate) (See instructions.) (b) FMV (or estimate) (See instructions.) (a) No. (b) (See instructions.) (b) FMV (or estimate) (See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date receive (See instructions.)	No. from		(c) FMV (or estimate)	(d) Date received		
No. rom Description of noncash property given (a) No. (b) (c) FMV (or estimate) (See instructions.) (a) No. (c) FMV (or estimate) (See instructions.) (b) Co FMV (or estimate) (See instructions.) (c) FMV (or estimate) (See instructions.) (a) No. (b) FMV (or estimate) (See instructions.) (b) FMV (or estimate) (See instructions.) (a) No. (c) FMV (or estimate) (See instructions.) (b) Date receive (See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date receive (See instructions.)						
(a) No. (b) FMV (or estimate) (See instructions.) (a) No. (b) FMV (or estimate) (See instructions.) (b) FMV (or estimate) (See instructions.) (c) FMV (or estimate) (d) Date receive (See instructions.) (d) Date receive (See instructions.) (a) No. (b) FMV (or estimate) (See instructions.) (a) No. (b) FMV (or estimate) (See instructions.) (b) FMV (or estimate) (C) FMV (or estimate) (See instructions.) (d) No. (e) FMV (or estimate) (G) Date receive (See instructions.)	No. from		FMV (or estimate)	(d) Date received		
No. (b) FMV (or estimate) (See instructions.) (a) No. (b) FMV (or estimate) (See instructions.) (b) FMV (or estimate) (C) FMV (or estimate) (Ge instructions.) (a) Description of noncash property given Part I (a) No. (b) FMV (or estimate) (See instructions.) (b) FMV (or estimate) (FMV (or estimate) (See instructions.) (b) FMV (or estimate) (C) FMV (or estimate) (C) FMV (or estimate) (C) FMV (or estimate) (D) Date receive			\$			
(a) No. (b) FMV (or estimate) (See instructions.) (a) No. (b) FMV (or estimate) (See instructions.) (b) FMV (or estimate) (c) FMV (or estimate) (d) Date receive (a) No. (b) FMV (or estimate) (c) FMV (or estimate) (d) Date receive	No. from		FMV (or estimate)	(d) Date received		
No. (b) FMV (or estimate) (See instructions.) (a) No. (b) No. (b) FMV (or estimate) (See instructions.) (b) FMV (or estimate) (See instructions.) (c) FMV (or estimate) (d) FMV (or estimate) (f) FMV (or estimate) (g) FMV (or estimate)			\$			
(a) No. (b) (c) (d) FMV (or estimate) Description of noncash property given (See instructions.) Date receive	No. from		FMV (or estimate)	(d) Date received		
No. (b) (c) (d) FMV (or estimate) Date require			\$			
	No. from		FMV (or estimate)	(d) Date received		
\$			 			

Schedule B	3 (Form 990, 990-EZ, or 990 PF) (2017)		Page 4			
Name of org	anization	Employer identification number				
			50 5105000			
THE BE	ERMAN CHARITABLE TRUST Exclusively religious charitable etc. con	58-6195209 section 501(c)(7), (8), or (10) that total more than \$1,000 for				
	the year from any one contributor. Complete	columns (a) through (e) and the followin	a line entry. For organizations			
	completing Part III, enter the total of exclusively religion. Use duplicate copies of Part III if addition	us, charitable etc contributions of \$1,000 or les: nal space is needed	s for the year (Enterthis into once)			
(a) No. from			(d) Description of how gift is held			
Part I	(b) Furpose or girt	b) Purpose of gift (c) Use of gift (d) I				
			_			
	(e) Transfer of gift					
	· · · · · · · · · · · · · · · · · · ·					
-	Transferee's name, address, a	Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I	(5), a post of gut	(6, 655 6. g)	(a, Door phon of now gut to note			
			_			
		(e) Transfer of gift				
	Turnefore de maner endances e		Delete when of home forms to be referred			
-	Transferee's name, address, a	ING ZIP + 4	Relationship of transferor to transferee			
(a) No.	_					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Tarti						
}-						
	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
(a) No.						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee			
		 				