## SCANNED 01 2 2 2021

Form **990-PF** 

Department of the Treasury Internal Revenue Service

## 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 1545-0052

**2018** 

Open to Public Inspection

| ١. | For cal                          | enda     | year 2018 or ta   | x year beginnir                                    | 1g           | , 2018                                   | , and ending            |                     | ,   |   |
|----|----------------------------------|----------|---|--|--------------|--|-------------------------|---------------------|---|---|
| 1  |                                  |          | ND COURTNEY   | MONTGOME   | RY FA        | MILY                                     |                         | A                   | Employer identification nu<br>83-1006855<br>Telephone number (see ins |   |
|    | 484                              | PAC:     | FIC STREET  | :  |              |  |                         | L                   | 203-344-0250  |   |
|    |                                  |          | O, CT 06902   |  |              |  |                         | С                   | If exemption application is   | pending, check here                       |
| ,  | <b>G</b> Che                     | ck al    | that apply:   | X Initial return<br>Final return                   |              | Initial return of a form                 | mer public charity      | D                   | 1 Foreign organizations, che  |   |
|    |                                  |          | -   | Address char                                       | nae          | Name change                              | , .                     |                     | 2 Foreign organizations mee   | ting the 85% test, check                  |
| •  | <b>H</b> Che                     | ck ty    | pe of organization  |  |              | 1(c)(3) exempt private                   | foundation(             | 1                   | here and attach computate   | on •                                      |
|    |                                  | Sec      | ction 4947(a)(1)  |  |              | trust Other taxable                      | private foundation      | E                   | If private foundation statu   |   |
|    |                                  |          | value of all assets a   |  | J Acc        | counting method X C                      | ash Accrual             |                     | under section 507(b)(1)(A   | ), check here                             |
|    | (1101<br>► \$                    |          | ii, coluiliii (c), iiile ii   | 0)   | (Part I      | Other (specify)<br>column (d) must be or | cash hasis)             | F                   | If the foundation is in a 60 under section 507(b)(1)(B                |   |
| 1  | Part I                           |          | nalysis of Re   | venue and  | (1 211 1,    | Column (a) mast be of                    | Casii basis )           |                     | under seedon ser(b)(1)(b)   | (d) Disbursements                         |
| •  |                                  | co<br>ne | (penses (The flumns (b), (c), a cessarily equal tlumn (a) (see inst | total of amount<br>nd (d) may not<br>he amounts in | s in         | (a) Revenue and expenses per books       | (b) Net investme income | nt                  | (c) Adjusted net income   | for charitable purposes (cash basis only) |
| ,  |                                  | 1        | Contributions, gifts, grants  |  | redute).     |  |                         |                     |   |   |
| y. | <b>,</b>                         | 2        | Check ► X if the foun   | ndation is not required to                         | attach Sch B |  |                         |                     |   |   |
| ٨  | <b>^</b>                         | 3        | Interest on savings and ter   | mporary cash investments                           |              |  |                         |                     |   |   |
| V  | ,                                | 4        | Dividends and interest from<br>Gross rents                          | n securities                                       |              |  |                         |                     |   | 1   |
|    |                                  |          | Net rental income   |  |              |  |                         |                     |   | -   |
|    | ě                                | 6 a      | or (loss)  Net gain or (loss) from sal                              | le of assets not on line 10                        |              |  |                         |                     |   |   |
|    | Revenue                          | b        | Gross sales price for<br>assets on line 6a                          | all  |              |  |                         | -                   |   |   |
|    | Re                               | 7<br>8   | Capital gain net inco<br>Net short-term capita                      |  | ne 2)        |  |                         |                     |   |   |
|    |                                  | 9        | Income modifications  | -  |              |  |                         |                     |   | -   |
|    |                                  | 10 a     | Gross sales less returns and  |  |              | <del></del>                              | <del></del>             |                     |   | i   |
|    |                                  | ь        | allowances<br>Less Cost of  |  |              |  |                         |                     |   |   |
|    |                                  | _        | goods sold<br>Gross profit or (loss) (atta                          | ch schadula)                                       |              |  |                         |                     |   |   |
|    |                                  |          | Other income (attach  |  |              |  |                         |                     |   |   |
|    |                                  |          |   |  |              |  |                         |                     |   |   |
|    |                                  | 12<br>13 | Total. Add lines 1 t  |  |              | (X 0.                                    |                         | 0.                  | 0.  | <u> </u>                                  |
|    |                                  | 14       | Other employee sala   |  | ees, etc.    | 0.                                       |                         |                     |   |   |
|    | s                                | 15       | Pension plans, emple  | oyee benefits                                      |              |  |                         |                     |   |   |
|    | enses                            |          | Legal fees (attach sc   |  |              |  |                         |                     |   |   |
|    | _                                |          | Accounting fees (atta<br>Other professional fees (a                 | · ·  |              |  |                         |                     |   |   |
|    | e<br>E                           | 17       | Interest  | itacii scriy                                       |              |  | DE                      | $\overline{\Delta}$ | 'N/ED   |   |
|    | ativ                             | 18       | Taxes (attach schedule)(se  | e instrs).   |              |  | 1, 17,                  |                     | IVED ,  |   |
|    | istra                            | 19       | Depreciation (attach schedule) and deplet                           | ion  |              |  | 128 1111                |                     | 2 2020  |   |
|    | nini                             | 20       | Occupancy   |  |              |  | 1UL   82                | <u>v_Z</u>          | 2 7070  |   |
|    | Adr                              | 21       | Travel, conferences,  | _  |              |  |                         | U                   |   |   |
|    | pu                               | 22<br>23 | Other expenses (atta  |  |              |  | L OG                    | <u>l)</u> F         | N.UT  | <del></del>                               |
|    | 1 <u>9</u> a                     |          | , ,   | ŕ  |              |  |                         |                     |   |   |
|    | Operating and Administrative Exp | 24       | Total operating and expenses. Add lines                             |  |              |  |                         |                     |   |   |
|    | per                              | 25       | Contributions, gifts, grants  | •  |              |  |                         |                     | -   |   |
|    | 0                                | 26       | Total expenses and<br>Add lines 24 and 25                           | disbursements.                                     |              |  |                         | 0.                  |   |   |
|    |                                  | 27       | Subtract line 26 from   | l line 12  |              | 0.                                       | <del>'</del>            | υ.                  | 0.  | 0.  |
|    |                                  |          | Excess of revenue o   |  |              |  | 1                       |                     |   |   |
|    |                                  | Ь        | and disbursements  Net investment inco                              | me (if negative legte                              | er -0-)      | 0.                                       |                         | 0.                  |   | 1   |
|    |                                  |          | Adjusted net income   |  |              |  | •                       | <u> </u>            | 0.  |   |

Form 990-PF (2018) BRENT AND COURTNEY MONTGOMERY FAMILY 83~1006855 Page 2 Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions ) Beginning of year End of year Part II Balance Sheets (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing 2 Savings and temporary cash investments Accounts receivable Less allowance for doubtful accounts 4 Pledges receivable Less allowance for doubtful accounts to Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (attach sch) Less allowance for doubtful accounts Inventories for sale or use Prepaid expenses and deferred charges 10a Investments - US and state government obligations (attach schedule) **b** Investments - corporate stock (attach schedule) c Investments - corporate bonds (attach schedule) Investments - land, buildings, and equipment basis. Less accumulated depreciation (attach schedule) 12 Investments - mortgage loans. 13 Investments - other (attach schedule) 14 Land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule) 15 Other assets (describe ► Total assets (to be completed by all filers — see the instructions Also, see page 1, item I) X O ¥ 0 Accounts payable and accrued expenses 18 Grants payable Liabilities 19 Deferred revenue 20 Loans from officers, directors, trustees, & other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ► 23 Total liabilities (add lines 17 through 22) 0 0 Foundations that follow SFAS 117, check here or Fund Balances and complete lines 24 through 26, and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Assets 28 Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions) Net 0 0 Total liabilities and net assets/fund balances (see instructions) 0 0 Part III Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 1 Enter amount from Part I, line 27a 2 0. 3 Other increases not included in line 2 (itemize) 3 Add lines 1, 2, and 3 4 Decreases not included in line 2 (itemize) 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6

|  | D COURTNEY MONTGOMERY F  |   |                              | 83-1006855   | Page :               |
|--|--|---|------------------------------|--|----------------------|
| <u> </u>   | Losses for Tax on Investment the kind(s) of property sold (for examp             |   | (b) How acquired             | (C) Date acquired  | (d) Date sold        |
|  | warehouse, or common stock, 200 sh   |   | P — Purchase<br>D — Donation | (mo , day, yr )  | (mo , day, yr )      |
| 1a N/A   | Auditor -  | <del></del>                                   | 2 20101011                   | <del>                                     </del>                         |                      |
| b  |  | •   |                              |  | -                    |
| С  |  |   |                              |  |                      |
| d  |  |   |                              | _  |                      |
| e  |  |   |                              |  |                      |
| (e) Gross sales price  | (f) Depreciation allowed<br>(or allowable)                                       | (g) Cost or other ba<br>plus expense of sa    |                              | <b>(h)</b> Gain or<br>((e) plus (f) m                                    |                      |
| a  |  |   |                              |  |                      |
| <u>b</u>   |  |   |                              |  |                      |
| d  |  |   |                              |  |                      |
| e  | <del> </del>   |   |                              |  |                      |
|  | I<br>ing gain in column (h) and owned by the                                     | foundation on 12/31/69                        |                              | (I) Cause (Cal   | (h)                  |
| (i) FMV as of 12/31/69   | (j) Adjusted basis<br>as of 12/31/69   | (k) Excess of col (i)<br>over col (j), if any |                              | (I) Gains (Col<br>gain minus col (k), b<br>han -0-) <b>or</b> Losses (fi | ut not less          |
| a  |  |   |                              |  |                      |
| ь  | -  |   |                              |  |                      |
|  |  | <del></del>                                   |                              | <del></del>  | <del></del>          |
| e  | +  |   |                              |  |                      |
|  |  | enter in Part I, line 7                       |                              |  |                      |
| 2 Capital gain net income or (r                                  | net capital loss) - If (loss), en  | ter -0- in Part I, line 7                     | - 2                          |  |                      |
|  | r (loss) as defined in sections 1222(5   | · · · · · -                                   |                              |  |                      |
| ın Part I, line 8  | ne 8, column (c) See instructions If   | <u>`</u>                                      | - 3                          |  |                      |
| <u> </u>   | er Section 4940(e) for Reduce  |   |                              |  |                      |
| (For optional use by domestic private                            | foundations subject to the section 4940  | (a) tax on net investment inc                 | come )                       | N/A  |                      |
| If section 4940(d)(2) applies, leave                             | this part blank  |   |                              |  |                      |
|  | ection 4942 tax on the distributable a   | • •   | pase period?                 | Yes  | No                   |
| · ·  | n each column for each year, see the in  |   | entries                      |  |                      |
| (a)  | (b)  |   | - I                          | (d)  |                      |
| Base period years<br>Calendar year (or tax year<br>beginning in) | Adjusted qualifying distributions  | (c)<br>Net value of<br>noncharitable-use as   | sets                         | Distribution<br>(col (b) divided   | ratio<br>by col (c)) |
| 2017   |  |   |                              |  |                      |
| 2016   |  |   |                              |  |                      |
| 2015   |  | ······································        |                              |  |                      |
| 2014   |  | <del>"-</del>                                 |                              |  |                      |
| 2013   |  |   |                              | ı  |                      |
| 2 Total of line 1, column (d)                                    |  |   | 2                            |  |                      |
| ,  | e 5-year base period — divide the total of on has been in existence if less than | on line 2 by 5 0, or by the 5 years.          | 3                            |  |                      |
| 4 Enter the net value of nonch                                   | arıtable-use assets for 2018 from Par  | rt X, line 5                                  | 4                            |  |                      |
| 5 Multiply line 4 by line 3                                      |  |   | 5                            |  |                      |
| 6 Enter 1% of net investment i                                   | ncome (1% of Part I, line 27b)   |   | 6                            |  |                      |
| 7 Add lines 5 and 6  |  |   | 7                            |  |                      |
| 8 Enter qualifying distributions                                 | ·  |   | 8                            |  |                      |
| If line 8 is equal to or greater the Part VI instructions        | nan line 7, check the box in Part VI, line                                       | 1b, and complete that part i                  | using a 1% tax               | rate See the   |                      |

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|-----|--|--------------|-----------|------------------|--------------|
| Par |  | ons)         |           |                  | 7            |
| 1 2 | 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)   |              |           | _                |              |
|     | Domestic foundations that meet the section 4940(e) requirements in Part V,   |              |           | <u>      0 .</u> | 7            |
| _   | check here and enter 1% of Part I, line 27b  |              |           |                  |              |
| C   | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)  |              |           |                  | •            |
| 2   | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)   |              |           | ^                |              |
| 3   | Add lines 1 and 2  |              |           | 0.               | _            |
| 3   | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)   |              |           | 0.               | -            |
| -   | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  |              |           | 0.               | -            |
| 6   | Credits/Payments   |              |           | <u> </u>         | 7            |
| _   | 2018 estimated tax pmts and 2017 overpayment credited to 2018  |              |           |                  |              |
|     | Exempt foreign organizations — tax withheld at source 6 b  |              |           |                  |              |
|     | Tax paid with application for extension of time to file (Form 8868)  6 c   |              |           |                  | 1            |
|     | Backup withholding erroneously withheld  6 d   |              |           |                  |              |
| 7   | Total credits and payments Add lines 6a through 6d   |              |           | 0.               |              |
| 8   | Enter any <b>penalty</b> for underpayment of estimated tax. Check here   | -            |           | <u> </u>         | -            |
| 9   | Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed   |              |           | 0.               | -            |
| 10  | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid   |              |           |                  | -            |
| 11  | Enter the amount of line 10 to be: Credited to 2019 estimated tax  |              |           |                  | -            |
|     | t VII-A   Statements Regarding Activities  |              |           |                  | -            |
|     | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it   |              | Yes       | No               | -            |
| 1 4 | participate or intervene in any political campaign?  | 1 a          | 1         | Х                | -            |
|     | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?   |              | 1         |                  | -            |
|     | See the instructions for the definition  | 1 1 1        | ,         | X                |              |
|     | If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published  | January      |           | <b>1</b> -       | Ĩ            |
|     | or distributed by the foundation in connection with the activities   |              |           |                  | ]            |
|     | Did the foundation file Form 1120-POL for this year?   | 10           | <u>: </u> | X                | _            |
| C   | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation ►\$  (2) On foundation managers ►\$   | ,            |           |                  |              |
| •   | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on   | <u> </u>     | 1         |                  |              |
|     | foundation managers ►\$ 0.   |              | 1         |                  | ļ            |
| 2   | Has the foundation engaged in any activities that have not previously been reported to the IRS?  | 2            |           | X                | •            |
|     | If 'Yes,' attach a detailed description of the activities  |              |           |                  | Ī            |
| 3   | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles   | <u> </u>     |           | ]                |              |
| 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            |           | Х                | -            |
| 4 a | Did the foundation have unrelated business gross income of \$1,000 or more during the year?  | 4 8          | 1         | Х                | -            |
| Ŀ   | If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?  | 41           | N         | /A               | _            |
| 5   | Was there a liquidation, termination, dissolution, or substantial contraction during the year?   | 5            |           | Х                | _            |
|     | If 'Yes,' attach the statement required by General Instruction T   |              |           |                  | Ī            |
| 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  | <u> </u>     | <u> </u>  | .                |              |
|     | with the state law 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         |                  |              |
| 8 a | Enter the states to which the foundation reports or with which it is registered. See instructions  |              | 1         |                  | 1            |
|     | DE   |              | 1         |                  |              |
| t   | of 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   | 81           | X         | +                | 7 /          |
| 9   | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(6) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If 'Yes,' complete Part XIV | 5) <b>-</b>  | ·         |                  | $\neg$       |
|     |  | <del> </del> | +         | X                | -V           |
| 10  | Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses   | 10           | 1         | x                |              |
| BAA |  | Form 99      | 0-PF (    |                  | -            |

|     | n'990-PF'(2018) BRENT AND COURTNEY MONTGOMERY FAMILY  | 83-1                  | 006855        | 5          | P          | age 5    |
|-----|---|-----------------------|---------------|------------|------------|----------|
| Pai | t VII-A Statements Regarding Activities (continued)   |                       |               |            |            |          |
| 11  | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule See instructions   |                       |               | 11         | Yes        | No<br>X  |
| 12  | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified per advisory privileges? If 'Yes,' attach statement See instructions   | son had               |               | 12         |            | X        |
| 13  | Did the foundation comply with the public inspection requirements for its annual returns and exemption  | n applicati           | on?           | 13         | Χ          |          |
| 14  | The books are in care of ► ROBERT LIA Telephon  | -                     | <u>203-34</u> | <u>4-0</u> | <u>250</u> |          |
| 15  | Located at A84 PACIFIC STREET STAMFORD CT ZIP + 4 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   | · <u>0690</u><br>• 1! |               | N/A        | ,          | ∏<br>N/A |
| 16  | At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority   | <del>-</del>          | · .           |            | Yes        | No       |
|     | bank, securities, or other financial account in a foreign country?  See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,'  |                       | -             | 16         |            | Х        |
| Dai | enter the name of the foreign country  † VII-B   Statements Regarding Activities for Which Form 4720 May Be Required  |                       |               |            |            |          |
| rai |   |                       | 1             |            |            |          |
| _   | File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.   |                       | -             |            | Yes        | No       |
| 1 a | 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?  | Yes                   | X No          |            |            |          |
|     | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  |                       | XNo           |            |            |          |
|     | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  |                       | X No          |            |            | ļ        |
|     | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  | 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                   | XNo           |            |            |          |
|     | (6) Agree to pay money or property to a government official? (Exception, Check 'No' if the  |                       |               |            |            | l        |
|     | (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 )  | _                     | X No          |            |            |          |
| ı   | olf any answer is 'Yes' to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instruction   |                       | _ [           | 1 b        | N          | /A       |
|     | Organizations relying on a current notice regarding disaster assistance, check here   | •                     |               |            |            |          |
| (   | 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 2018?  | ,                     | -             | 1 c        |            | 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))   |                       |               |            |            |          |
| •   | At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?   | Yes                   | χNο           |            |            |          |
|     | If 'Yes,' list the years ► 20 , 20 , 20 , 20  |                       |               |            |            |          |
| 1   | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 494 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942)   | 2(a)(2)<br>(a)(2) to  |               |            |            |          |
|     | <b>all</b> years listed, answer 'No' and attach statement – see instructions).  If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years   |                       | -             | 2 b        | N          | /A       |
| •   | ► 20 , 20 , 20 , 20   | riere                 |               |            |            |          |
| 3 8 | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  | Yes                   | X No          |            |            | !        |
| ı   | of If 'Yes,' did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approve by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or | n<br>ed               |               | :          |            |          |
|     | (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedulé Č, Form 4720, to determine if the foundation had excess business holdings in 2018)  |                       |               | 3 b        | N          | /A       |
| 4 : | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?   |                       |               | 4 a        |            | х        |
|     | Did the foundation make any investment in a prior year (but after December 31, 1969) that could   |                       |               |            |            |          |
|     | jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?   |                       |               | 4 b        |            | X        |

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Form **990-PF** (2018)

| Form 990-PF (2018) BRENT AND COURTNEY   |   |   | 83-100   | <u> </u>            | P         | age ( |
|---|---|---|--|---------------------|-----------|-------|
| Part VII-B   Statements Regarding Activiti  | <del></del>   | 4720 May Be Req                                 | uired (continued)_   | <del></del> _       |           |       |
| <b>5 a</b> During the year, did the foundation pay or incur as <b>(1)</b> Carry on propaganda, or otherwise attemption  | •   | n (castion 404E(s))?                            | □ v <sub></sub> □  | <u> </u>            | Yes       | No    |
|   | J   | ,   | ∐ Yes X  | No                  |           |       |
| (2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra  |   |   |  | No                  |           |       |
| (3) Provide a grant to an individual for travel,  | •   | •   | Yes X  | No                  |           |       |
| (4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions  |   |   | Yes X  | No                  |           |       |
| (5) Provide for any purpose other than religio<br>educational purposes, or for the preventio  | n of cruelty to children  | or animals?                                     |  | No                  |           |       |
| b If any answer is 'Yes' to 5a(1)—(5), did any of<br>described in Regulations section 53 4945 or in a d<br>See instructions   | the transactions fail to<br>current notice regarding d          | qualify under the exceptions asser assistance?  | otions   |                     | N         |       |
| Organizations relying on a current notice rega  | rding disaster assistanc  | e, check here                                   | ▶ [  |                     |           |       |
| c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsif 'Yes,' attach the statement required by Regional Statement (Statement Programment). | sibility for the grant?   |   | N/A Yes  | ] No                |           |       |
| 6 a Did the foundation, during the year, receive ar   | ny funds, directly or indi                                      | rectly, to pay premium:                         | s  |                     |           |       |
| on a personal benefit contract? <b>b</b> Did the foundation, during the year, pay premi   | iums, directly or indirec                                       | tly, on a personal bene                         |  | No 6 b              | _         | X     |
| If 'Yes' to 6b, file Form 8870  7a At any time during the tax year, was the found   | dation a party to a prob  | ibited tay shelter transa                       | iction? Yes X  | No                  |           |       |
| <b>b</b> If 'Yes,' did the foundation receive any procee  |   |   |  | N/A 7b              |           |       |
| 8 Is the foundation subject to the section 4960 tax of  |   | an \$1,000,000 in remune                        |  | No                  |           |       |
| or excess parachute payment(s) during the ye  |   |   |  | · I                 | <u>  </u> |       |
| Part VIII Information About Officers, Diand Contractors   | irectors, Trustees,   | Foundation Manag                                | gers, Highly Paid E  | imployee            | s,        |       |
| 1 List all officers, directors, trustees, and found   | lation managers and th  | eir compensation. See                           | instructions.  |                     |           |       |
| (a) Name and address  | (b) Title, and average<br>hours per week<br>devoted to position | (c) Compensation<br>(If not paid,<br>enter -0-) | (d) Contributions to<br>employee benefit<br>plans and deferred<br>compensation | (e) Expense other a |           |       |
| BRENT MONTGOMERY  | Director  | 0.  | 0.   |                     |           | 0.    |
| 484 Pacific Street, 3rd Floor Stamford, CT 06902  | 0   |   |  |                     |           |       |
| COURTNEY NAPURANO   | Director  | 0.  | 0.   |                     |           | 0.    |
| 484 Pacific Street, 3rd Floor<br>Stamford, CT 06902   | 0   |   |  |                     |           |       |
|   | ·   |   |  |                     |           |       |
|   |   |   |  | ļ                   |           |       |
|   |   |   |  |                     |           |       |
| 2 Compensation of five highest-paid employees (of   | her than those included   | on line 1 — see instructio                      | l<br>ns). If none. enter 'NONE   | <u> </u>            |           | _     |
| (a) Name and address of each employee   | (b) Title, and average  |   | (d)Contributions to employee benefit   | <del> </del>        | se acc    | ount. |
| paid more than \$50,000   | hours per week<br>devoted to position                           | (c) Compensation                                | plans and deferred compensation  | (e) Expense other a | illowar   | nces  |
| <u>None</u>   |   |   |  |                     | -         |       |
|   |   |   |  |                     |           |       |
|   |   |   |  |                     |           |       |
|   | -   |   |  | †                   |           |       |
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|   |   |   |  |                     |           |       |
|   |   |   | -  |                     |           |       |
|   |   |   |  | ļ                   |           |       |
| Total number of other employees paid over \$50,000  | )   |   | •  | 1                   |           | C     |

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| and Contractors (continued)   |                                       |                           |
|---|---------------------------------------|---------------------------|
| 3 Five highest-paid independent contractors for professional services. See in   | structions. If none, enter 'NONE.'    |                           |
| (a) Name and address of each person paid more than \$50,000   | (b) Type of service                   | (c) Compensation          |
| None  |                                       |                           |
|   |                                       |                           |
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|   |                                       |                           |
|   |                                       |                           |
| Total number of others receiving over \$50,000 for professional services  | <u> </u>                              | 0                         |
| PartilX:A Summary of Direct Charitable Activities   |                                       |                           |
| Italia (IA) Summary of Direct Chantable Activities  |                                       |                           |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica<br>organizations and other beneficiaries served, conferences convened, research papers produced, etc | Il information such as the number of  | Expenses                  |
| 1 N/A   |                                       |                           |
|   |                                       |                           |
|   |                                       |                           |
| 2   |                                       |                           |
|   |                                       |                           |
|   |                                       |                           |
| 3   |                                       | <u> </u>                  |
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| 4   | · · · · · · · · · · · · · · · · · · · | •                         |
|   |                                       | ı                         |
|   |                                       |                           |
| PartilX:BI Summary of Program-Related Investments (see Instruc  | ctions)                               |                           |
| Describe the two largest program-related investments made by the foundation during the  | e tax year on lines 1 and 2           | Amount                    |
| 1 <u>N/A</u>  |                                       | 1                         |
|   |                                       |                           |
|   |                                       |                           |
| 2   |                                       | 1                         |
|   |                                       |                           |
|   |                                       |                           |
| All other program-related investments See instructions  |                                       |                           |
| 3   |                                       |                           |
|   |                                       |                           |
|   |                                       |                           |
| Total. Add lines 1 through 3  | <u> </u>                              | 0.                        |
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| see instructions.)  | . i oreigii iouria | ations,       |
|---|--------------------|---------------|
| Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes     Average monthly fair market value of securities.                               | 1 a                |               |
| <b>b</b> Average of monthly cash balances   | 1 b                |               |
| c Fair market value of all other assets (see instructions)  | 1 c                | -             |
| d Total (add lines 1a, b, and c)  | 1 d                | 0.            |
| e Reduction claimed for blockage or other factors reported on lines 1a and  |                    |               |
| 1c (attach detailed explanation)  |                    |               |
| 2 Acquisition indebtedness applicable to line 1 assets  | 2                  |               |
| 3 Subtract line 2 from line 1d  | 3                  |               |
| 4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)  | 4                  |               |
| 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4   | 5                  | 0.            |
| 6 Minimum investment return. Enter 5% of line 5   | 6                  | 0.            |
| PartiXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations, check here ☐ and do not complete this particular organizations. |                    | tions         |
| 1 Minimum investment return from Part X, line 6   | 1                  |               |
| 2 a Tax on investment income for 2018 from Part VI, line 5  |                    |               |
| b Income tax for 2018 (This does not include the tax from Part VI.)   |                    |               |
| c Add lines 2a and 2b   | 2 c                |               |
| 3 Distributable amount before adjustments Subtract line 2c from line 1  | 3                  |               |
| 4 Recoveries of amounts treated as qualifying distributions   | 4                  |               |
| 5 Add lines 3 and 4   | 5                  |               |
| 6 Deduction from distributable amount (see instructions)  | 6                  |               |
| 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1  | 7                  | 0.            |
| PartiXIII 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                   | 1 a                |               |
| <b>b</b> Program-related investments — total from Part IX-B   | 1 b                |               |
| 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes   | 2                  |               |
| 3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)  | 3 a                |               |
| <b>b</b> Cash distribution test (attach the required schedule)  | 3 b                |               |
| 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4   | 4                  | 0.            |
| 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions   | 5                  |               |
| 6 Adjusted qualifying distributions. Subtract line 5 from line 4  | 6                  | 0.            |
| Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the qualifies for the section 4940(e) reduction of tax in those years             | ie foundation      |               |
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Part XIII Undistributed Income (see instructions)

|   | (a)<br>Corpus                         | (b)<br>Years prior to 2017 | <b>(c)</b><br>2017 | <b>(d)</b><br>2018 |
|---|---------------------------------------|----------------------------|--------------------|--------------------|
| Distributable amount for 2018 from Part XI, line 7  |                                       |                            |                    | 0.                 |
| 2 Undistributed income, if any, as of the end of 2018.  | · · · · · · · · · · · · · · · · · · · | <u></u>                    |                    |                    |
| a Enter amount for 2017 only  |                                       | i                          | 0.                 |                    |
| <b>b</b> Total for prior years: 20 , 20 , 20  | -                                     | 0.                         |                    | ·                  |
| 3 Excess distributions carryover, if any, to 2018   |                                       |                            |                    | <del></del>        |
| <b>a</b> From 2013  |                                       |                            |                    |                    |
| <b>b</b> From 2014  |                                       |                            |                    |                    |
| c From 2015   |                                       |                            |                    | ļ                  |
| <b>d</b> From 2016  |                                       | į                          |                    |                    |
| e From 2017   |                                       |                            |                    |                    |
| f Total of lines 3a through e   | 0.                                    |                            |                    |                    |
| 4 Qualifying distributions for 2018 from Part   |                                       |                            |                    |                    |
| XII, line 4 ► \$  |                                       |                            |                    |                    |
| a Applied to 2017, but not more than line 2a  |                                       |                            | 0.                 |                    |
| <b>b</b> Applied to undistributed income of prior years                                       |                                       |                            |                    |                    |
| (Élection required – see instructions)  |                                       | 0.                         |                    |                    |
| c Treated as distributions out of corpus (Election required – see instructions)               | 0.                                    |                            |                    |                    |
| d Applied to 2018 distributable amount  |                                       |                            | ,                  | 0.                 |
| e Remaining amount distributed out of corpus  | 0.                                    |                            |                    |                    |
| 5 Excess distributions carryover applied to 2018  | 0.                                    |                            |                    | 0.                 |
| (If an amount appears in column (d), the same amount must be shown in column (a))             |                                       |                            |                    |                    |
| same amount must be shown in column (a)   |                                       |                            |                    |                    |
| 6 Enter the net total of each column as   |                                       |                            |                    |                    |
| indicated below:  |                                       |                            |                    |                    |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5   | 0.                                    |                            |                    |                    |
| <b>b</b> Prior years' undistributed income Subtract   |                                       |                            |                    |                    |
| line 4b from line 2b  |                                       | 0.                         |                    |                    |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has  |                                       |                            |                    |                    |
| been issued, or on which the section 4942(a)  |                                       | _                          |                    |                    |
| tax has been previously assessed  | ,                                     | 0.                         |                    |                    |
| d Subtract line 6c from line 6b Taxable   |                                       |                            |                    |                    |
| amount – see instructions   |                                       | 0.                         |                    |                    |
| e Undistributed income for 2017. Subtract line 4a from  |                                       |                            | 0                  |                    |
| line 2a. Taxable amount — see instructions  |                                       |                            | 0.                 | · ***              |
| f Undistributed income for 2018 Subtract lines  |                                       |                            |                    |                    |
| 4d and 5 from line 1. This amount must be distributed in 2019.                                |                                       |                            |                    | 0                  |
| 7 Amounts treated as distributions out of   |                                       |                            |                    | 0.                 |
| corpus to satisfy requirements imposed by   |                                       |                            |                    |                    |
| section 170(b)(1)(F) or 4942(g)(3) (Election may be required – see instructions)              | 0                                     |                            |                    |                    |
| · '   | 0.                                    |                            |                    | -                  |
| 8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions) | 0.                                    |                            |                    | i                  |
| 9 Excess distributions carryover to 2019.   | <u></u>                               | -                          |                    |                    |
| Subtract lines 7 and 8 from line 6a   | 0.                                    |                            |                    |                    |
| 10 Analysis of line 9:  |                                       |                            |                    |                    |
| a Excess from 2014  |                                       |                            |                    |                    |
| b Excess from 2015  |                                       |                            |                    |                    |
| c Excess from 2016  |                                       |                            |                    |                    |
| d Excess from 2017  |                                       |                            |                    |                    |
| e Excess from 2018  | ·                                     |                            |                    |                    |

| orm 990-PF (2018) BRENT AND COURTNI   | EY MONTGOMER                            | Y FAMILY _                    |                         | 83-1006855               | Page <b>10</b> |
|---|---|-------------------------------|-------------------------|--------------------------|----------------|
| Part∤XIV■ Private Operating Foundat   |   |                               |                         |                          | N/A            |
| 1a If the foundation has received a ruling or dete is effective for 2018, enter the date of the   | ruling                                  |                               |                         |                          | 7 4040()(5)    |
| <b>b</b> Check box to indicate whether the foundat  |   | erating foundation of         | -                       | 4942(j)(3) or            | 4942(j)(5)     |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum   | Tax year                                | #1.0017                       | Prior 3 years           | 4 11 0015                | (e) Total      |
| investment return from Part X for each year listed  | (a) 2018                                | <b>(b)</b> 2017               | (c) 2016                | (d) 2015                 |                |
| <b>b</b> 85% of line 2a   |   |                               | <u> </u>                | -                        | <del></del>    |
| c Qualifying distributions from Part XII,   |   | -                             |                         |                          |                |
| line 4 for each year listed   |   |                               |                         |                          |                |
| d Amounts included in line 2c not used directly<br>for active conduct of exempt activities  |   |                               | ļ                       |                          |                |
| e Qualifying distributions made directly<br>for active conduct of exempt activities<br>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   |   |                               |                         |                          | ,, <u>,</u>    |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i)   |   |                               |                         |                          |                |
| b 'Endowment' alternative test — enter 2/3 of<br>minimum investment return shown in Part X,<br>line 6 for each year listed                        |   |                               |                         |                          |                |
| c 'Support' alternative test - enter  |   |                               |                         |                          |                |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) |   |                               |                         |                          |                |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)                                      |   |                               |                         |                          |                |
| (3) Largest amount of support from an exempt organization   |   |                               | ,                       |                          |                |
| (4) Gross investment income   | *************************************** |                               |                         |                          |                |
| Part XVI Supplementary Information assets at any time during th   | (Complete this<br>e vear – see in       | part only if the structions.) | foundation had          | \$5,000 or more i        | n              |
| 1 Information Regarding Foundation Manag  |   |                               |                         | -                        | <del></del>    |
| a List any managers of the foundation who have<br>close of any tax year (but only if they have  | e contributed more th                   | nan 2% of the total c         | ontributions received   | by the foundation before | e the          |
| None  | contributed more                        | (See                          | : Section 507(u)(2)     |                          |                |
| <b>b</b> List any managers of the foundation who own  | 10% or more of the                      | stock of a corporation        | on (or an equally large | nortion of the owners    | hin of         |
| a partnership or other entity) of which the   | foundation has a 1                      | 0% or greater inter           | est                     | portion of the owners    | nip oi         |
| None  |   |                               |                         |                          |                |
| 2 Information Departing Contribution Count (  | Cift Loop Coholorek                     | nin etc. Brogramsı            |                         |                          |                |
| 2 Information Regarding Contribution, Grant, € Check here  if the foundation only ma  |   |                               | le organizations and o  | loes not accept unsolic  | ated           |
| requests for funds. If the foundation make  |   |                               |                         |                          |                |
| 2a, b, c, and d See instructions.   | omail address of th                     | o porcoo to whom o            | nations should be       |                          |                |
| <b>a</b> The name, address, and telephone number or   | eman address or th                      | e person to whom a            | pplications should be   | addressed                |                |
|   |   |                               |                         |                          |                |
|   |   |                               |                         |                          |                |
| <b>b</b> The form in which applications should be   | submitted and infor                     | mation and materi             | als they should inclu   | de:                      |                |
|   |   | <del>-</del>                  | <del> </del>            |                          |                |
| c Any submission deadlines  |   |                               |                         |                          |                |
|   |   |                               |                         |                          |                |
| d Any restrictions or limitations on awards,  | such as by geograp                      | hical areas, charita          | able fields, kinds of i | nstitutions, or other f  | actors         |
|   |   |                               |                         |                          |                |

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| 3 Grants and Contributions Paid During t | he Year or Approved for Fut   | ure Paymen           | t                                | N/A              |
|--|---|----------------------|----------------------------------|------------------|
| Recipient                                | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount           |
| Name and address (home or business)      | or substantial contributor  | 700.610.11           |                                  |                  |
| a Paid during the year                   |   |                      |                                  |                  |
|  |   |                      | <b>.</b>                         |                  |
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|  |   |                      |                                  |                  |
|  |   | 1                    |                                  |                  |
| Total                                    | l   | <u> </u>             | ► 3a                             |                  |
| <b>b</b> Approved for future payment     |   |                      |                                  |                  |
|  |   |                      |                                  |                  |
|  |   |                      |                                  | ]                |
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|  |   |                      |                                  |                  |
| Total                                    | L   | 1                    | <u> </u>                         | <del>  -</del> - |

|  | <ul> <li>A   Analysis of Income-Producing as amounts unless otherwise indicated.</li> </ul>  |  | d business income      | Excluded b            | y section 512, 513, or 514 |  |
|--|--|--|------------------------|-----------------------|----------------------------|--|
| J  |  | (a)<br>Business<br>code                          | (b)<br>Amount          | (c)<br>Exclu-<br>sion | (d)<br>Amount              | (e) Related or exempt function income (See instructions) |
| -  | ram service revenue  |  | ,,                     | code                  |                            |  |
| a  | •  |  | <del></del>            | +                     |                            |  |
| b  |  | <del> </del>                                     | <del></del>            | <del> </del>          | <u>,•</u>                  | <del>_</del> ,   |
| g  |  |  |                        | +                     |                            | · · ·  |
| e  | ·  |  | <del> </del>           | +                     | **                         | <u>.</u>   |
| ·  | <del></del>  |  |                        |                       |                            |  |
| n Fees   | and contracts from government agencies   | <del>                                     </del> |                        | +                     |                            |  |
| •  | bership dues and assessments   |  | <del>.</del>           | 1 1                   | ···-                       | <del></del>  |
|  | et on savings and temporary cash investments   | -  |                        | + +                   |                            |  |
|  | ends and interest from securities  |  |                        | + +                   |                            |  |
|  | ental income or (loss) from real estate  |  |                        | + +                   |                            | ,  |
|  | financed property  |  |                        | <del></del>           |                            |  |
|  | ebt-financed property  |  |                        | + +                   |                            | <del></del>  |
|  | ntal income or (loss) from personal property   | <del></del>                                      |                        | 1                     |                            |  |
|  | investment income  |  | <del></del>            |                       |                            | <del></del>  |
| 8 Gain o                                       | r (loss) from sales of assets other than inventory   |  |                        | 1 1                   |                            | ·  |
|  | ncome or (loss) from special events.   |  |                        |                       |                            |  |
|  | s profit or (loss) from sales of inventory   |  |                        | 1                     | ***                        |  |
|  | revenue  |  | <del></del>            |                       |                            |  |
| а  |  |  |                        |                       |                            |  |
| b  |  |  |                        | 1 1                   |                            |  |
| c  |  |  |                        |                       | ·                          |  |
| d  |  |  |                        |                       |                            |  |
| е  |  |  |                        |                       |                            |  |
| 40 -   |  |  |                        |                       |                            |  |
|  | otal Add columns (b), (d), and (e)   |  |                        |                       |                            |  |
| 13 Total                                       | . Add line 12, columns (b), (d), and (e)   |  |                        | ]                     | 13                         | 0.   |
| 13 Total<br>(See works                         | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated  |  |                        | 1                     | •                          | 0.   |
| 13 Total<br>(See works<br>Part XVI             | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.    Relationship of Activities to the  | Accompli   |                        |                       | ses .                      |  |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated  | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI             | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | ly to the instructions )                                 |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |
| 13 Total<br>(See works<br>Part XVI<br>Line No. | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.  B Relationship of Activities to the Explain below how each activity for which in | Accompli   | orted in column (e) of | Part XVI-A            | ses                        | v to the   |

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## Rart:XVIII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

|  | Exempt Orga   | nizations  |  |                                    |  | <b>.</b>  |   |   |                  |           |
|--|---|--|--|------------------------------------|--|---|---|---|------------------|-----------|
| describ  | organization directed in section 501(                             | c) (other than see   | engage in any of the follow<br>ction 501(c)(3) organization                            | wing with<br>ons) or ii            | n any otl<br>n section                       | her organization<br>n 527,                                    | on  |   | Yes              | No        |
| -  | •   |  | a noncharitable exempt   | organiza                           | tion of                                      |   |   | ļ,                                      |                  |           |
| (1) Cas  | sh  | -  |  | _                                  |  |   |   | 1 a (1                                  | )                | Х         |
| <b>(2)</b> Oth   | er assets   |  |  |                                    |  |   |   | 1 a (2                                  | )                | Х         |
| <b>b</b> Other transactions                                |   |  |  |                                    |  |   |   |   |                  |           |
| (1) Sales of assets to a noncharitable exempt organization |   |  |  |                                    |  |   |   | 1 b (1                                  |                  | X         |
| <b>(2)</b> Pur   | chases of assets  | from a noncharita  | able exempt organization   |                                    |  |   |   | 1 b (2                                  |                  | X         |
| <b>(3)</b> Rer   | ntal of facilities, ed  | quipment, or othe  | r assets   |                                    |  |   |   | 1 b (3                                  |                  | X         |
| ` '  | mbursement arrar  | •  |  |                                    |  |   |   | 1 b (4                                  |                  | X         |
| ` '  | ns or loan guaran   |  |  |                                    |  |   |   | 1 b (5                                  | _                | X         |
|  |   |  | ip or fundraising solicitati   |                                    |  |   |   | 1 b (6                                  | Ч                | X         |
| c Sharing  | of facilities, equip  | pment, mailing lis   | sts, other assets, or paid   | employe                            | es.  |   |   | 1c                                      |                  | Х         |
| <b>d</b> If the ar<br>the good<br>any trar                 | nswer to any of th<br>ds, other assets, or<br>nsaction or sharing | e above is 'Yes,'<br>services given by<br>g arrangement, s | complete the following so<br>the reporting foundation. If<br>how in column (d) the val | chedule<br>the found<br>lue of the | Column<br>dation re-<br>e goods              | ( <b>b)</b> should alv<br>ceived less than<br>, other assets, | ways show the<br>n fair market v<br>or services r | e fair market va<br>alue in<br>eceived. | alue of          |           |
| (a) Line no.   | (b) Amount involved   | <del> </del>   | of noncharitable exempt organiza   |                                    |  |   |   | ns, and sharing arr                     | angement         | :s        |
| N/A  |   |  |  |                                    |  |   |   |   |                  |           |
|  |   |  |  |                                    |  |   |   |   |                  |           |
|  |   |  | =  |                                    |  |   |   |   |                  |           |
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|  |   | ***  |  |                                    |  | ···········   |   |   |                  |           |
|  |   |  |  |                                    | •  |   |   |   |                  |           |
|  |   |  |  |                                    |  |   |   |   |                  |           |
|  |   |  | d with, or related to, one or<br>ction 501(c)(3)) or in sect                           | more tax<br>ion 527?               | -exempt                                      | organizations   |   | Y                                       | s X              | No        |
|  | complete the follows:  Name of organize  Output                   |  | (b) Type of organ  |                                    | Т  |   | N Dogovation                                      | of roletionship                         |                  |           |
| N/A  | y Name or organiz   | ation  | (b) Type of organ  | IIZALIOII                          |  |   | Description                                       | of relationship                         |                  |           |
| N/A  |   |  |  |                                    | +  |   |   | <del></del>                             |                  |           |
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| Under  | penalties of perfury i de   | clare that I have exam                                     | ined this return, including accomp<br>than taxpayer) is based on all info              | anying sch                         | edules and                                   | statements, and to  | the best of my ki                                 | nowledge and belief                     | ıt ıs true,      |           |
| Sign Here  |   | tion of preparer (other                                    | man taxpayer) is based on all into   | ormation or                        | •  | resident  | neage   | May the this reto prepare               | IRS disci        | uss<br>ie |
| Signa  | ature of officer or trustee                                       | •  | Date   | 1                                  | Titl   |   |   |   | tructions<br>Yes | No        |
|  | Print/Type preparer's   | name   | Preparer's signature   | Oh                                 | <u>,                                    </u> | Date / /  | Check   | if PTIN                                 |                  | '         |
| Paid   | Mitchell Chi:   | zner   | Mitchell Chiz  | ner ()                             | <del>-</del>                                 | 6/2/7   | self-employ                                       | ed P00664                               | 201              |           |
| Preparer   | Firm's name   | Chizner & Co   | mpany Certified Publ   | lic Acc                            | ountan                                       | ts LLC  | Firm's EIN ► 4                                    | 16-0614074                              |                  |           |
| Use Only   | Firm's address  | 98 Cuttermil   |  |                                    |  |   | ]   |   |                  |           |
|  |   | Great Neck,  | NY 11021   |                                    |  |   | Phone no  | (212) 967-39                            | <u>50</u>        |           |
| BAA  |   |  |  |                                    |  |   |   | Form 9                                  | 90-PF (          | 2018)     |