

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation PERAKIS FOUNDATION JAMES PERAKIS TRUSTEE		A Employer identification number 06-1535337	
Number and street (or P O box number if mail is not delivered to street address) 59 EDGEWATER DRIVE		Room/suite	B Telephone number (see instructions) (203) 703-3741
City or town, state or province, country, and ZIP or foreign postal code WILTON, CT 06897		C If exemption application is pending, check here ▶ <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here ▶ <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation ▶ <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 1,026,099		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	3,100			
	2 Check ▶ <input checked="" type="checkbox"/> If the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	14,515	14,430		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	196,177			
	b Gross sales price for all assets on line 6a 248,064				
	7 Capital gain net income (from Part IV, line 2)		196,177		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	213,792	210,607		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	1,100	1,100		0
	c Other professional fees (attach schedule)	5,754	5,754		0
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	2,180	2,180		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)				
	24 Total operating and administrative expenses. Add lines 13 through 23	9,034	9,034		0
	25 Contributions, gifts, grants paid	131,055			131,055
	26 Total expenses and disbursements. Add lines 24 and 25	140,089	9,034		131,055
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	73,703			
	b Net investment income (if negative, enter -0-)		201,573		
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing				
	2 Savings and temporary cash investments		98,253	151,796	151,796
	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 (attach schedule) (see instructions)				
	7 Other notes and loans receivable (attach schedule) ▶ _____ 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 (attach schedule)				
	b Investments—corporate stock (attach schedule)		142,615	120,919	286,775
	c Investments—corporate bonds (attach schedule)		14,529	14,529	14,806
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
	12 Investments—mortgage loans				
	13 Investments—other (attach schedule)		379,408	421,264	572,722
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
	15 Other assets (describe ▶ _____)				
	16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)		634,805	708,508	1,026,099
Liabilities	17 Accounts payable and accrued expenses				
	18 Grants payable				
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable (attach schedule).				
	22 Other liabilities (describe ▶ _____)				
	23 Total liabilities (add lines 17 through 22)		0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.				
	24 Net assets without donor restrictions				
	25 Net assets with donor restrictions				
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.				
	26 Capital stock, trust principal, or current funds		619,350	634,805	
	27 Paid-in or capital surplus, or land, bldg, and equipment fund		0	0	
	28 Retained earnings, accumulated income, endowment, or other funds		15,455	73,703	
	29 Total net assets or fund balances (see instructions)		634,805	708,508	
	30 Total liabilities and net assets/fund balances (see instructions) .		634,805	708,508	

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 29 (must agree with end-of-year figure reported on prior year's return)	1	634,805
2 Enter amount from Part I, line 27a	2	73,703
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	708,508
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	708,508

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a CHARLES SCHWAB #5424-9590 (DETAILS AVAILABLE UPON REQUEST)		2013-04-08	2019-08-13
b CHARLES SCHWAB #5424-9590 (DETAILS AVAILABLE UPON REQUEST)		2005-04-11	2019-12-13
c CAPITAL GAINS DIVIDENDS	P		
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 24,774		34,941	-10,167
b 186,752		16,946	169,806
c 36,538			36,538
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			-10,167
b			169,806
c			36,538
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	196,177
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2018	155,641	1,012,560	0 153710
2017	221,716	981,869	0 225810
2016	91,055	949,525	0 095895
2015	114,333	1,032,248	0 110761
2014	111,446	1,030,239	0 108175

2 Total of line 1, column (d)	2	0 694351
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	3	0 138870
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	982,935
5 Multiply line 4 by line 3	5	136,500
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	2,016
7 Add lines 5 and 6	7	138,516
8 Enter qualifying distributions from Part XII, line 4	8	131,055

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	4,031
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	4,031
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	4,031
6	Credits/Payments		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	2,236
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	2,236
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	1,795
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ 0 (2) On foundation managers ▶ \$ _____ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2	No
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	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
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	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	9	No
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	No

Part 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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	13	Yes	
14	The books are in care of ▶ JAMES A PERAKIS Telephone no ▶ (203) 703-3741			

Located at **▶** 59 EDGEWATER DRIVE WILTON CTZIP+4 **▶** 06897

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. ▶ <input type="checkbox"/>	1b	
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 2019?	1c	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019).	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	No

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

5a	During the year did the foundation pay or incur any amount to		Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input checked="" type="checkbox"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JAMES A PERAKIS 59 EDGEWATER DRIVE WILTON, CT 06897	TRUSTEE 0 50	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3

Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	0
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	859,440
b	Average of monthly cash balances.	1b	125,025
c	Fair market value of all other assets (see instructions).	1c	13,439
d	Total (add lines 1a, b, and c).	1d	997,904
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	997,904
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	14,969
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	982,935
6	Minimum investment return. Enter 5% of line 5.	6	49,147

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	49,147
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	4,031
b	Income tax for 2019 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	4,031
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	45,116
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	45,116
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	45,116

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	131,055
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	131,055
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	131,055

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				45,116
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019				
a From 2014.	60,472			
b From 2015.	63,225			
c From 2016.	44,966			
d From 2017.	176,281			
e From 2018.	108,541			
f Total of lines 3a through e.	453,485			
4 Qualifying distributions for 2019 from Part XII, line 4 ▶ \$ 131,055				
a Applied to 2018, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				45,116
e Remaining amount distributed out of corpus	85,939			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	539,424			
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 2018 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions). . . .	60,472			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	478,952			
10 Analysis of line 9				
a Excess from 2015.	63,225			
b Excess from 2016.	44,966			
c Excess from 2017.	176,281			
d Excess from 2018.	108,541			
e Excess from 2019.	85,939			

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:	
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) JAMES A PERAKIS	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here <input checked="" type="checkbox"/> if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.	
a The name, address, and telephone number or email address of the person to whom applications should be addressed	
b The form in which applications should be submitted and information and materials they should include	
c Any submission deadlines	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors	

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	131,055
b <i>Approved for future payment</i>				
Total			▶ 3b	0

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2019)

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- | | | | | |
|--|--|--------------|------------|-----------|
| 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | | Yes | No |
| a Transfers from the reporting foundation to a noncharitable exempt organization of | | | | |
| (1) Cash. | | 1a(1) | | No |
| (2) Other assets. | | 1a(2) | | No |
| b Other transactions | | | | |
| (1) Sales of assets to a noncharitable exempt organization. | | 1b(1) | | No |
| (2) Purchases of assets from a noncharitable exempt organization. | | 1b(2) | | No |
| (3) Rental of facilities, equipment, or other assets. | | 1b(3) | | No |
| (4) Reimbursement arrangements. | | 1b(4) | | No |
| (5) Loans or loan guarantees. | | 1b(5) | | No |
| (6) Performance of services or membership or fundraising solicitations. | | 1b(6) | | No |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. | | 1c | | No |
| d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received | | | | |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2020-05-15	*****
	_____ Signature of officer or trustee	_____ Date	_____ Title

May the IRS discuss this return with the preparer shown below
 (see instr.) ☒ **Yes** ☐ **No**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	DANIEL B MAINZER CPA		2020-05-15		P00170531
	Firm's name ▶ FLANIGAN COTILLO & MAINZER LLP				Firm's EIN ▶ 04-3064987
	Firm's address ▶ 1881 WORCESTER ROAD SUITE 200 FRAMINGHAM, MA 017015410				Phone no (508) 626-1991

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ATLANTIC THEATER COMPANY 76 9TH AVE 537 NEW YORK, NY 10011	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	1,000
CIRCLE OF CAREPO BOX 32 WILTON, CT 06897	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	1,500
CURE ALZHEIMER'S FUND 34 WASHINGTON ST SUITE 200 WELLESLEY HILLS, MA 02481	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	500
Total ▶ 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
DOCTORS WITHOUT BORDERS 333 7TH AVE 2ND FLOOR NEW YORK, NY 10001	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	1,000
EPILEPSY FOUNDATION OF CT INC 386 MAIN STREET MIDDLETOWN, CT 06457	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	7,000
FAMILY AND CHILDRENS AGENCY 9 MOTT AVENUE NORWALK, CT 06850	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	1,250
Total ▶ 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FOLDS OF HONOR FOUNDATION 5800 N PATRIOT DRIVE OWASSO, OK 74055	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	500
FRIENDS OF THE NORWALK RIVER VALLEY TRAIL PO BOX 174 GEORGETOWN, CT 06829	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	100
JACKSONVILLE SYMPHONY 300 WATER ST 200 JACKSONVILLE, FL 32202	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	150
Total ▶ 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LAUREL HOUSEPO BOX 764 NORRISTOWN, PA 19404	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	6,000
LINCOLN CENTER FOR THE PERFORMING ARTS 10 LINCOLN CENTER PLAZA NEW YORK, NY 10023	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	2,500
MEMORIAL SLOAN KETTERING CANCER CENTER 1275 YORK AVE NEW YORK, NY 10065	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	1,000
Total ▶ 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MUSEUM OF CONTEMPORARY ART JACKSONVILLE 333 N LAURA ST JACKSONVILLE, FL 32202	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	500
NATIONAL ALLIANCE ON MENTAL ILLNESS 576 FARMINGTON AVE HARTFORD, CT 06105	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	4,500
NEW DRAMATISTS424 W 44TH ST NEW YORK, NY 10036	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	500
Total ► 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NEW YORK THEATRE WORKSHOP 79 EAST 4TH STREET NEW YORK, NY 10003	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	1,500
NORWALK GRASS ROOTS TENNIS 15 EASTWOOD ROAD NORWALK, CT 06850	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	1,000
PALLATIVE CARE FOR UGANDA 128 EAST AVENUE NORWALK, CT 06851	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	1,000
Total ▶ 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PAWEL'S CHILDREN INC 4 OAK LEDGE LN WILTON, CT 06897	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	500
PLANNED PARENTHOOD 123 WILLIAM STREET 10TH FL NEW YORK, NY 10038	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	1,000
PLAYWRIGHTS HORIZONS 416 WEST 42ND ST NEW YORK, NY 10036	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	1,800
Total ► 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
ROUNABOUT THEATRE CO 231 WEST 39TH STREET SUITE 1200 NEW YORK, NY 10018	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	2,500
SIGNATURE THEATRE 480 WEST 42ND STREET NEW YORK, NY 10036	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	500
SILVER HILL HOSPITAL 208 VALLEY ROAD NEW CANAAN, CT 06840	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	21,500
Total ▶ 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SILVERMINE ARTS CENTER 1037 SILVERMINE ROAD NEW CANAAN, CT 06840	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	500
STAY AT HOME IN WILTON INC 90 E RIDGE RD RIDGEFIELD, CT 06877	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	200
THE ACTORS FUND OF AMERICA 729 SEVENTH AVENUE 10TH FLOOR NEW YORK, NY 10019	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	1,500
Total ▶ 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE CT CHALLENGE 250 PEQUOT AVENUE SOUTHPORT, CT 06890	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	315
THE EVEREST LEADERSHIP ACADEMY PO BOX 587 CHAPPAQUA, NY 10514	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	500
THE MUSEUM OF MODERN ART 11 WEST 53 STREET NEW YORK, NY 10019	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	140
Total ▶ 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE PUBLIC THEATER 425 LAFAYETTE STREET NEW YORK, NY 10003	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	3,000
THE TREVOR PROJECTPO BOX 69232 WEST HOLLYWOOD, CA 90069	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	2,000
THERAPEUTIC ADVENTURES INC 1764 DUDLEY MOUNTAIN RD CHARLOTTESVILLE, VA 22903	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	1,000
Total ▶ 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TRACKSIDE TEEN CENTER OF WILTON 15 STATION RD WILTON, CT 06897	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	200
TREATMENT ADVOCACY CENTER 200 N GLEBE ROAD SUITE 801 ARLINGTON, VA 22203	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	5,000
VISITING NURSE HOSPICE OF FAIRFIELD COUNTY PO BOX 489 WILTON, CT 06897	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	1,500
Total ▶ 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
WILTON LIBRARY ASSOCIATION 137 OLD RIDGEFIELD ROAD WILTON, CT 06897	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	4,000
CANDLELIGHTERS OF SOUTHWEST FLORIDA 9981 S HEALTHPARK DRIVE FORT MYERS, FL 33908	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	100
CSSGA FOUNDATION INC 230 SPRUCE ST SOUTHPORT, CT 06890	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	200
Total ▶ 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GOODSPEED OPERA HOUSE FOUNDATION INC PO BOX A 6 MAIN STREET EAST HADDAM, CT 06423	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	1,000
INTERNATIONAL OCD FOUNDATION INC PO BOX 961029 BOSTON, MA 02196	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	45,000
NATURAL RESOURCES DEFENSE COUNCIL INC 40 WEST 20TH STREET NEW YORK, NY 10011	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	500
Total ▶ 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SAY THE STUTTERING ASSOCIATION FOR THE YOUNG 247 WEST 37TH STREET 5TH FLOOR SUITE 1001 NEW YORK, NY 10018	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	1,000
SIERRA CLUB 2101 WEBSTER ST SUITE 1300 OAKLAND, CA 94612	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	500
THE ALDRICH CONTEMPORARY ART MUSEUM INC 258 MAIN ST RIDGEFIELD, CT 06877	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	100
Total ▶ 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RIDGEFIELD PLAYHOUSE FOR MOVIES AND THE PERFORMING ARTS INC 80 EAST RIDGE ROAD RIDGEFIELD, CT 06877	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	700
MANHATTAN THEATRE150 W 65TH ST NEW YORK, NY 10023	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	1,000
TIMMERS WAY INC555 BELDEN HILL RD WILTON, CT 06897	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	200
Total ▶ 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
UNITED STATES COAST GUARD ACADEMY ALUMNI ASSOCIATION INC 47 MOHEGAN AVE NEW LONDON, CT 06320	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	100
WILTON VOLUNTEER AMBULANCE CORPS INC PO BOX 21 WILTON, CT 06897	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	500
BREAST CANCER RESEARCH FOUNDATION 28 W 44TH STREET SUITE 609 NEW YORK, NY 10036	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	500
Total ▶ 3a				131,055

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
YALE REPERTORY THEATRE 1120 CHAPEL ST NEW HAVEN, CT 06510	NONE	NONPROFIT ORGANIZATI	GENERAL SUPPORT	500
Total ▶ 3a				131,055

TY 2019 Accounting Fees Schedule

Name: PERAKIS FOUNDATION
JAMES PERAKIS TRUSTEE
EIN: 06-1535337

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	1,100	1,100		0

TY 2019 Investments Corporate Bonds Schedule

Name: PERAKIS FOUNDATION
 JAMES PERAKIS TRUSTEE
EIN: 06-1535337

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
SCHWAB INVESTMENTS - FIXED INCOME	14,529	14,806

TY 2019 Investments Corporate Stock Schedule

Name: PERAKIS FOUNDATION
JAMES PERAKIS TRUSTEE

EIN: 06-1535337

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
SCHWAB INVESTMENTS - EQUITIES	120,919	286,775

TY 2019 Investments - Other Schedule

Name: PERAKIS FOUNDATION
 JAMES PERAKIS TRUSTEE
EIN: 06-1535337

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
SCHWAB INVESTMENTS - MUTUAL FUNDS	AT COST	421,264	572,722

TY 2019 Other Professional Fees Schedule

Name: PERAKIS FOUNDATION
JAMES PERAKIS TRUSTEE

EIN: 06-1535337

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT ADVISOR FEES	5,754	5,754		0

TY 2019 Taxes Schedule

Name: PERAKIS FOUNDATION
JAMES PERAKIS TRUSTEE

EIN: 06-1535337

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	180	180		0
FEDERAL INCOME TAXES	2,000	2,000		0