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2019

OMB No. 1545-0052

# **Return of Private Foundation**

Form 990-PF

Department of the Treasury

Internal Revenue Service

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

A Employer's instantification number   1.0	For	caler	ndar year 2019, or tax year beginning 01-01-20	)19 , aı	nd en	nding 12-31-	2019	
B Telephane number (see instructions)   Care of comment of the c						' '	entification numbe	r
Co UE LO38 COULPRION PROVEY SO  Check all that apply:   Initial return   I						13-4007198		
Control process country, and ZiP or frosting posses cace   Cili agentation applies   Institute   Cili agentation applies   Cili agentation applies   Institute   Cili agentation   Cili agenta					<b>B</b> Telephone number (see instructions)			
### Check with that apply:   Initial return   Initial return   Amended ret					(212) 254-3424			
Final return						<b>C</b> If exemption	application is pendin	g, check here
Address change	<b>G</b> Cl	neck al	ll that apply: $\qed$ Initial return $\qed$ Initial return of a	former public charity		<b>D 1.</b> Foreign or	ganizations, check he	ere
Miles   Mile								
## Check type of organization:						<i>'</i>		· -
Take market value of all assets at end of year (from Part II, co.) (c.)   Deter (specify)	_	,						
of year (from Part II, col. (c).								
1   Contributions, giffs, grants, etc., received (attach schedule)   2   Check   □   □   The foundation is not required to attach schedule)   2   Check   □   □   The foundation is not required to attach schedule)   2   Check   □   □   The foundation is not required to attach schedule   297,182   □   □   □   □   □   □   □   □   □	of	year (f	from Part II, col. (c),  ▶\$ 11.016.641 □ Other (specify) _		ıaı			
Part	Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Bayranya and	Τ			(d) Disbursements
2   Check				expenses per	(b)		• •	purposes
2 Check		1		297 182	,			
Sch. B		,	<u></u>					
1000000000000000000000000000000000000		-	Sch. B					
10   Sample   Sampl			- · · ·					
Description		-		10,993	3	10,993		
100   241,466					-			
December   Page   Pag	ω			241,466	5			
Net short-term capital gain	evenu		• , ,					
Net short-term capital gain								
9   Income modifications	~	_				406,644		
10a   Gross sales less returns and allowances		_			-			
B   Less: Cost of goods sold   C   C   Gross profit or (loss) (attach schedule)   C   C   Gross profit or (loss) (attach schedule)   C   C   C   C   C   C   C   C   C			Í		-			
C   Gross profit or (loss) (attach schedule)   C   C   C   C   C   C   C   C   C				<u>.</u>	1			
12   Total. Add lines 1 through 11   1,282,455   1,150,451   0		c	-		1			
13   Compensation of officers, directors, trustees, etc.   0   0   0   0   0     14   Other employee salaries and wages       15   Pension plans, employee benefits       16a   Legal fees (attach schedule)       1b   Accounting fees (attach schedule)       17   Interest       18   Taxes (attach schedule)   see instructions)       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		11	Other income (attach schedule)	732,814	1	732,814	0	
14		12	Total. Add lines 1 through 11	1,282,455	5	1,150,451	0	
15   Pension plans, employee benefits   16a   Legal fees (attach schedule)		13	Compensation of officers, directors, trustees, etc.	(		0	0	0
16a   Legal fees (attach schedule)   13,613   13,613   0   0   0     b   Accounting fees (attach schedule)   2,500   0   0   2,500     c   Other professional fees (attach schedule)   17   Interest   18   Taxes (attach schedule) (see instructions)   19   Depreciation (attach schedule) and depletion   20   Occupancy   21   Travel, conferences, and meetings   22   Printing and publications   23   Other expenses (attach schedule)   25   558,552   551,222   0   392     24   Total operating and administrative expenses.   Add lines 13 through 23		14	Other employee salaries and wages					
23	es	15	Pension plans, employee benefits					
23	sue	16a	Legal fees (attach schedule)		3	13,613	0	0
23	χ	b	Accounting fees (attach schedule)	2,500		0	0	2,500
23	ė.	C	Other professional fees (attach schedule)					
23	ativ		Interest					
23	istr		, , ,		_			
23	il.							
23	Adi				_			
23	nd.				+			
26 Total expenses and disbursements. Add lines 24 and 25			•	<b>७</b> 558 552	1	551 222	n	392
26 Total expenses and disbursements. Add lines 24 and 25	Ē			350,332	1	551,222		332
26 Total expenses and disbursements. Add lines 24 and 25	era		, ,	574,665	5	564,835	0	2,892
26 Total expenses and disbursements. Add lines 24 and 25	Q	25	<del>-</del>		+	,		
27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)			Total expenses and disbursements. Add lines 24 and					
a Excess of revenue over expenses and disbursements  b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)		27		1,249,121	1	564,835	0	677,348
disbursements  b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  0								
c Adjusted net income (if negative, enter -0-)			disbursements	33,334	4			
<u> </u>			• •		-	585,616		
	For			1	Щ,	at No 11200		m 990-PF (2010)

Forr	n 990-	PF (2019)						Page <b>2</b>
Pa	rt II	Balance Sheets Attached schedules and amounts should be for end-of-year amount			Beginning of year  (a) Book Value	(	End o <b>b)</b> Book Value	f year (c) Fair Market Value
	1	Cash—non-interest-bearing			(a) Book value	<u> </u>	b) book value	(c) Full Market Value
	2	Savings and temporary cash investments			330,137	7	301,568	301,568
	3	Accounts receivable ▶						
		Less: allowance for doubtful accounts						
	4	Pledges receivable P		-				
		Less: allowance for doubtful accounts						
	5	Grants receivable						
	6	Receivables due from officers, directors, trustees	s, and other					
		disqualified persons (attach schedule) (see instru	uctions) .					
	7	Other notes and loans receivable (attach schedu	le) <b>▶</b>					
		Less: allowance for doubtful accounts ▶		_				
ا ي	8	Inventories for sale or use						_
Assets	9	Prepaid expenses and deferred charges						_
As	10a	Investments—U.S. and state government obligation	tions (attach	schedule)				_
	b	Investments—corporate stock (attach schedule)			691,653	<b>9</b>	1,118,569	1,449,353
	С	Investments—corporate bonds (attach schedule)	)					_
	11	Investments—land, buildings, and equipment: b	asis 🟲					_
		Less: accumulated depreciation (attach schedule	:) <b>&gt;</b>					
	12	Investments—mortgage loans						
	13	Investments—other (attach schedule)			10,002,549	9	9,112,421	9,056,230
	14	Land, buildings, and equipment: basis ▶		_				
		Less: accumulated depreciation (attach schedule						
	15	Other assets (describe -		)	298,500	<b>9</b>	209,490	209,490
	16	<b>Total assets</b> (to be completed by all filers—see	the					
		instructions. Also, see page 1, item I)			11,322,839	)	10,742,048	11,016,641
	17	Accounts payable and accrued expenses						
	18	Grants payable						
ies	19	Deferred revenue						
≝	20	Loans from officers, directors, trustees, and other	er disqualifie	d persons				
Liabilities	21	Mortgages and other notes payable (attach sche	-					
_	22	Other liabilities (describe		)				
	23	<b>Total liabilities</b> (add lines 17 through 22)			(		0	
Ş		Foundations that follow FASB ASC 958, che	ck here 🕨					
2		and complete lines 24, 25, 29 and 30.						
ala	24	Net assets without donor restrictions						
9	25	Net assets with donor restrictions						
Fund Balances		Foundations that do not follow FASB ASC 9	58, check h	ere 🕨 🔽				
or F		and complete lines 26 through 30.	•					
S	26	Capital stock, trust principal, or current funds .					0	
Assets	27	Paid-in or capital surplus, or land, bldg., and equ	ipment func	d	(		0	
	28	Retained earnings, accumulated income, endown	nent, or oth	er funds	11,322,839	)	10,742,048	
Net	29	Total net assets or fund balances (see instru	ctions) .		11,322,839	)	10,742,048	
_	30	Total liabilities and net assets/fund balance	s (see instr	uctions) .	11,322,839	)	10,742,048	
Pa	rt III	Analysis of Changes in Net Assets or	Fund Bala	ances				
1		ll net assets or fund balances at beginning of year ear figure reported on prior year's return)				h end-		11 222 020
2	-						2	11,322,839 33,334
3		er increases not included in line 2 (itemize)					3	<u></u>
4		lines 1, 2, and 3					4	11,356,173
5		reases not included in line 2 (itemize)					5	614,125
6		l net assets or fund balances at end of year (line					6	10,742,048
							F	orm <b>990-PF</b> (2019)

	e the kind(s) of property sold (e.g., arehouse; or common stock, 200 shs	. MLC Co.)	(D) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a</b> See Additional Data Tabl	e				
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other plus expense		Gain o	h) r (loss) ) minus (g)
a See Additional Data Tabl	` '	'		()	, (3,
b					
c					
d					
e					
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation on 1	12/31/69	(	I)
(i) F.M.V. as of 12/31/69	(j)	(k) Excess of cover col. (j)	col. (i)	Gains (Col. ( col. (k), but not	h) gain minus less than -0-) <b>or</b> om col.(h))
a See Additional Data Tabl			,,	,	( //
b					
c					
d					
e					
•		., .,	'	3	406,644
Part V Qualification U	Under Section 4940(e) for Re	duced Tax on Net In	vestment Inc	come	
(For optional use by domestic p	rivate foundations subject to the sec	tion 4940(a) tax on net in	vestment incom	e.)	
	eave this part blank. ne section 4942 tax on the distributal ot qualify under section 4940(e). Do		the base period?	. Ye	es 🔽 No
· · · · · · · · · · · · · · · · · · ·	nount in each column for each year;		king any entries	5.	
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitable-us	se assets	( <b>d)</b> Distribution rati (col. (b) divided by c	
2018	818,662		,666,836		0.064630
2017	806,473		,347,891		0.096608
2016	638,277		,352,591		0.076417
2015	335,330		,338,357		0.045696
2014	351,215	6	,630,327	ı	0.052971
2 Total of line 1, column (			2		0.336322
number of years the four	o for the 5-year base period—divide to adation has been in existence if less ancharitable-use assets for 2019 from	than 5 years	or by the		0.067264 11,040,063
<b>5</b> Multiply line 4 by line 3			5		742,599
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		5,856
<b>7</b> Add lines 5 and 6			7		748,455
	ions from Part XII, line 4 <b>,</b> eater than line 7, check the box in Pa		8 te that part usin	g a 1% tax rate. Se	677,348 e the Part VI
					000 DE /201

	930 11 (2013)									age C
			Activities for Which	Form 4720 May Be	<b>Required</b> (contin	ued)				
5a	During the year did the foundation		•						Yes	No
	(1) Carry on propaganda, or otherw		•		□ Ye	es 🗸	No			
	(2) Influence the outcome of any s		•	• • • • • • • • • • • • • • • • • • • •						
	on, directly or indirectly, any vo				· · · 🗌 🗸	s 🗸	No			
	(3) Provide a grant to an individual		* * * * * * * * * * * * * * * * * * * *		Y	s 🗸	No			
	(4) Provide a grant to an organizat			· -	d					
	in section 4945(d)(4)(A)? See i				· · · .	s 🗸	No			
	(5) Provide for any purpose other t									
_	educational purposes, or for the	•	•				No			
b	If any answer is "Yes" to $5a(1)-(5)$ ,		=			li .				
	Regulations section 53.4945 or in a				_			5b		
	Organizations relying on a current notice regarding disaster assistance check here									
С	If the answer is "Yes" to question 5			•						
	tax because it maintained expenditure responsibility for the grant?									
	If "Yes," attach the statement requi		=							
6a	Did the foundation, during the year				ıms on					
	a personal benefit contract?				· 🗌 Ye	s 🗸	No			
b	Did the foundation, during the year	, pay	premiums, directly or inc	lirectly, on a personal be	nefit contract?			6b		No
	If "Yes" to 6b, file Form 8870.									
7a	At any time during the tax year, wa				Y€	s 🗸	No			
b	If "Yes", did the foundation receive		•					7b		
8	Is the foundation subject to the sec			. , ,	in remuneration or					
	excess parachute payment during t	he ye	ar?		· · □ Y	s 🗸	No			
Par	t VIII and Contractors	Offic	ers, Directors, Trust	tees, Foundation Ma	nagers, Highly F	aid Er	nplo	yees,		
ı a	and Contractors									
1	List all officers, directors, truste	es, fo	oundation managers ar	nd their compensation	See instructions					
	(a) Name and address	(	b) Title, and average	(c) Compensation (If	(d) Contribution		(e)	Expen	se acc	ount,
	(a) Name and address		hours per week devoted to position	not paid, enter -0-)	employee benefit plants deferred compens		0	ther al	lowand	ces
BENJA	MIN E NICKOLL	TRUS	· · · · · · · · · · · · · · · · · · ·	, 0	'	0				0
	NTRACHT EARLY 325 COLUMBIA	2.00								
	STE 202 HAM PARK, NJ 07932									
	STINE M ARMSTRONG	TRUS	TFF	0		0	,			
	NTRACHT EARLY 325 COLUMBIA	2.00		۲			Ί			·
TPKE	STE 202									
	HAM PARK, NJ 07932  Compensation of five highest-pa	id on	anlayaas (athar than t	hoso included on line t	L soo instrustions	Tf no	<u> </u>	ntor"	NONE	71
	Compensation of five nignest-pa	iu ei	ipioyees (other than t		(d) Contribution		ne, e	iitei	NONE	•
(a)	Name and address of each employee	paid	<b>(b)</b> Title, and average	( ) 6	employee bene	_	(e)	Expens	se acco	ount,
` ,	more than \$50,000		hours per week devoted to position	(c) Compensation	plans and defer	red			owanc	
					compensation	1				
NON										
Tota	I number of other employees paid ov	er \$5	0,000			<b>&gt;</b>				0
					·		Гон	00	0-PF (	(2010)

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional servic	es (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		
<b>Total</b> 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 rele organizations and other beneficiaries served, conferences convened, research papers produ		r of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see i	nstructions)	
Describe the two largest program-related investments made by the foundation during the	·	Amount
1	,	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		• o
Total Add Mico Landagn 5		Form <b>990-PF</b> (2019)

2a |

2b

11,712

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

11,712

540,291

540.291

540.291

677,348

677.348

677.348

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Tax on investment income for 2019 from Part VI, line 5. . . . . .

Distributable amount before adjustments. Subtract line 2c from line 1. . . . . . . . . . . . . . . .

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Income tax for 2019. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

2a

3

4 5

6

1

2

3

4

5

b

Part XII

Part XIII Undistributed Income (see instructions)

e Remaining amount distributed out of corpus

6 Enter the net total of each column as

indicated below:

**5** Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract line 4b from line 2b . . . . . . . . . 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. . . . . . **d** Subtract line 6c from line 6b. Taxable amount —see instructions . . . . . . . . . e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount-see instructions . . . . . . f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . . . 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) . . . . . . . . . 8 Excess distributions carryover from 2014 not

applied on line 5 or line 7 (see instructions) . .9 Excess distributions carryover to 2020.

Subtract lines 7 and 8 from line 6a.

Analysis of line 9:Excess from 2015.

**b** Excess from 2016. .

c Excess from 2017. .

d Excess from 2018.

e Excess from 2019.

same amount must be shown in column (a).)

			(a) Corpus	(b) Years prior to 2018	(c) 2018	<b>(d)</b> 2019
1	Distributable amount for 2019 from	om Part XI, line 7				540,291
2	Undistributed income, if any, as	of the end of 2019:				
а	Enter amount for 2018 only				0	
b	Total for prior years: 20,	20		0		
3	Excess distributions carryover, if	any, to 2019:				
а	From 2014	85,796				
b	From 2015					
С	From 2016	225,605				
d	From 2017	393,340				
е	From 2018	180,046				
f	<b>Total</b> of lines 3a through e		884,787			
4	Qualifying distributions for 2019 f	rom Part				
	XII, line 4: ► \$	677,348				
а	Applied to 2018, but not more th	ian line 2a			0	
b	Applied to undistributed income			0		
	(Election required—see instructio	· ·				
С	Treated as distributions out of co required—see instructions)		0			
d	Applied to 2019 distributable am	ount				540,291

137,057

1,021,844

85.796

936,048

225,605

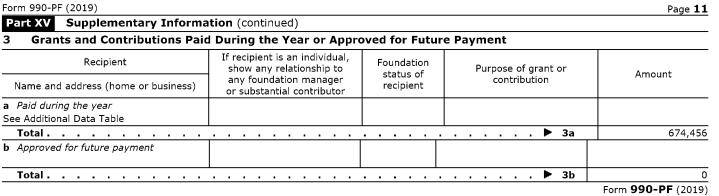
393,340

180,046

137,057

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inter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exemp
1 Program service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions.)
a b					
c d					
e					
f g Fees and contracts from government agencies					
2 Membership dues and assessments. 3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities 5 Net rental income or (loss) from real estate:			14	10,993	
<ul><li>a Debt-financed property.</li><li>b Not debt-financed property.</li></ul>					
<ul><li>6 Net rental income or (loss) from personal proper</li><li>7 Other investment income.</li></ul>	ty		01	732,814	
8 Gain or (loss) from sales of assets other than inventory			18	241,466	
<ul> <li>9 Net income or (loss) from special events:</li> <li>0 Gross profit or (loss) from sales of inventory</li> <li>1 Other revenue: a</li> </ul>					
b					
c					
d					
e		C		985,273	
	alculations.)		13	985,273 <b>3</b>	
e	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	
2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify compart XVI-B  Relationship of Activities to the accomplishment of the foundation?	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	
2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify compart XVI-B Relationship of Activities to the accomplishment of the foundation)	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	
2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify compart XVI-B  Relationship of Activities to the accomplishment of the foundation?	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	
2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify compart XVI-B  Relationship of Activities to the accomplishment of the foundation?	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	
e 2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify columns to verify columns.  Part XVI-B Relationship of Activities to the accomplishment of the foundation?	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	
2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify compart XVI-B  Relationship of Activities to the accomplishment of the foundation?	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	
2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify compart XVI-B  Relationship of Activities to the accomplishment of the foundation?	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	
2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify compart XVI-B  Relationship of Activities to the accomplishment of the foundation?	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	
e 2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify columns to verify columns.  Part XVI-B Relationship of Activities to the accomplishment of the foundation?	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	
e 2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify columns to verify columns.  Part XVI-B Relationship of Activities to the accomplishment of the foundation?	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	
e 2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify columns to verify columns.  Part XVI-B Relationship of Activities to the accomplishment of the foundation?	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	
e 2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify columns to verify columns.  Part XVI-B Relationship of Activities to the accomplishment of the foundation?	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	
e 2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify columns to verify columns.  Part XVI-B Relationship of Activities to the accomplishment of the foundation?	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	
e 2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify columns to verify columns.  Part XVI-B Relationship of Activities to the accomplishment of the foundation?	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	
2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify compart XVI-B Relationship of Activities to the accomplishment of the foundation)	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	985,273
2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify compart XVI-B Relationship of Activities to the accomplishment of the foundation)	alculations.)  • the Accomplis  • ich income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	

orm	990-PF	· ,							Pa	ge <b>13</b>
	rt XVII	Exempt Organi	zations				ionships With Non			
		ganization directly or in than section 501(c)(3)						n 501	Yes	No
,	, ,	from the reporting foun	,		, , ,	-				
(1	<b>L)</b> Cash							. 1a(1)		No
(2	2) Othe	rassets						. 1a(2)		No
<b>b</b> 0	ther trar	nsactions:								
-	-	s of assets to a nonchar	•	-				. 1b(1)		No
-	-	hases of assets from a r						1b(2)		No
-	-	al of facilities, equipmer	· ·					1b(3)		No
•	-	ibursement arrangemen						. 1b(4)		No No
-	-	s or loan guarantees. rmance of services or m						.   1b(5) .   1b(6)		No
•	-	f facilities, equipment, n	· ·	_				. 10(0)		No
	-	wer to any of the above		· ·						110
<b>2a</b> Is		(b) Amount involved	ectly affiliated w	vith, or related	•	tax-exempt orga	_		ngemen	nts
		in section 501(c) (other complete the following s	chedule.			1				
		(a) Name of organization	on	(b	) Type of organization	on	(c) Description	of relationship		
Sig	of m whice	er penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, corr				er than taxpayer) is ba	sed on all info	rmatior	n of
Her	e				2020-11-12			return with the prepa	rer shov	wn
		Signature of officer or t	rustee		Date	Title		below (see instr.) ✓ Yes ☐ No		□ <sub>No</sub>
		Print/Type preparer's	name P	reparer's Sign	ature	Date	Check if self- employed ▶ □	PTIN P00175	5762	
Paid Pre	d parer	TONIA SIMON	DAGUT FARING			2020-11-12	2			
	Only		RACHT EARLY L	LC			F	irm's EIN ▶22	-37548	356
			5 COLUMBIA T	URNPIKE SUIT	ΓE 202					
		FL	ORHAM PARK, I	NJ 07932			F	hone no. (973	) 408-	6700

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation Р 2017-05-08 2019-12-31 MEDMEN ENT INC CL B - 116,848 SHS GROWGENERATION CORP - 2,000 SHS D 2018-03-26 2019-09-10 GROWGENERATION CORP - 4,800 SHS D 2018-03-26 2019-08-30 GROWGENERATION CORP - 10,700 SHS D 2018-03-26 2019-09-03 GROWGENERATION CORP - 450 SHS D 2018-03-26 2019-09-04 GROWGENERATION CORP - 6,100 SHS D 2018-03-26 2019-09-05 GROWGENERATION CORP - 3,700 SHS D 2018-03-26 2019-09-06 2019-09-10 GROWGENERATION CORP - 8,935 SHS D 2018-03-26 ACREAGE HOLDINGS INC - 3,000 SHS Ρ 2019-04-23 2019-07-18 APPLE INC - 750 SHS Р 2019-01-03 2019-01-16 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 327,268 65.752 261,516 9,940 1,745 8,195 25,965 4,188 21,777 59,500 9,335 50,165 2,513 393 2,120 5,322 26,688 32,010 19,232 3,228 16,004 44,403 7,795 36,608 42,599 66,410 -23,811 116,034 108,652 7,382 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 261,516 8,195 21,777 50,165 2,120 26,688 16,004 36,608 -23,811 7,382

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

	or substantial contributor			
a Paid during the year				
ACLU125 BROAD STREET 18TH FLOOR	NONE	PUBLIC	GENERAL UNRESTRICTED	2,000

ACLU125 BROAD STREET 18TH FLOOR NEW YORK, NY 10004	NONE	PUBLIC	GENERAL UNRESTRICTED	2,000
AFTER SCHOOL ARTS PROGRAM PO BOX 15 WASHINGTON DEPOT, CT 06794	NONE	PUBLIC	GENERAL UNRESTRICTED	5,000
BRADY CENTER TO PREVENT GUN	NONE	PUBLIC	GENERAL UNRESTRICTED	2,000

AFTER SCHOOL ARTS PROGRAM PO BOX 15 WASHINGTON DEPOT, CT 06794	NONE	PUBLIC	GENERAL UNRESTRICTED	5,000
BRADY CENTER TO PREVENT GUN VIOLENCE 840 FIRST STREET NE SUITE 400 WASHINGTON, DC 20002	NONE	PUBLIC	GENERAL UNRESTRICTED	2,000

Total			▶ 3a	674,456
BRADY CENTER TO PREVENT GUN VIOLENCE 840 FIRST STREET NE SUITE 400 WASHINGTON, DC 20002	NONE	PUBLIC	GENERAL UNRESTRICTED	2,000
PO BOX 15 WASHINGTON DEPOT, CT 06794				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
CONNECTICUT FOOD BANK	NONE	PUBLIC	GENERAL UNRESTRICTED	500

2 RESEARCH PARKWAY WALLINGFORD, CT 06492				
CT AGAINST GUN VIOLENCE PO BOX 123	NONE	PUBLIC	GENERAL UNRESTRICTED	

	<del></del>			
CT AGAINST GUN VIOLENCE PO BOX 123 RIDGEFIELD, CT 06877	NONE	PUBLIC	GENERAL UNRESTRICTED	1,000
DOCTORS WITHOUT BORDERS	NONE	PUBLIC	GENERAL UNRESTRICTED	2,000

PO BOX 123 RIDGEFIELD, CT 06877				
DOCTORS WITHOUT BORDERS 40 RECTOR ST 16TH FLOOR NEW YORK, NY 10006	NONE	PUBLIC	GENERAL UNRESTRICTED	2,000

RIDGE ILLED, CT GGG77				
DOCTORS WITHOUT BORDERS 40 RECTOR ST 16TH FLOOR NEW YORK, NY 10006	NONE	PUBLIC	GENERAL UNRESTRICTED	2,000
Total			▶ 3a	674,456

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

A Paid during the year

Recipient Show any relationship to any foundation manager or substantial contributor

A Paid during the year

257 PARK AVE SOUTH NEW YORK, NY 10010	NONE	PORTIC	GENERAL UNRESTRICTED	2,500
FOODSHARE450 WOODLAND AVE	NONE	PUBLIC	GENERAL UNRESTRICTED	500

FOODSHARE450 WOODLAND AVE BLOOMFIELD, CT 06002	NONE	PUBLIC	GENERAL UNRESTRICTED	500
FRIENDS OF ARMSTRONG LIBRARY PO BOX 17775 NATCHEZ, MS 39122	NONE	PUBLIC	GENERAL UNRESTRICTED	200

Total .

674,456

■ 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or husiness)

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
GRAMERCY PARK BLOCK ASSOCIATION	NONE	PUBLIC	GENERAL UNRESTRICTED	1,000

RAMERCY PARK BLOCK ASSOCIATION 4 GRAMERCY PARK EAST IEW YORK, NY 10003	NONE	PUBLIC	GENERAL UNRESTRICTED	
REENWOODS COUNSELING	NONE	PUBLIC	GENERAL UNRESTRICTED	

GREENWOODS COUNSELING 25 SOUTH ST LITCHFIELD, CT 06759	NONE	PUBLIC	GENERAL UNRESTRICTED	

25 SOUTH ST LITCHFIELD, CT 06759				
JERICHO PROJECT 245 WEST 29TH STREET SUITE 902	NONE	PUBLIC	GENERAL UNRESTRICTED	50,000

LITCHFIELD, CT 06/59				1
JERICHO PROJECT 245 WEST 29TH STREET SUITE 902 NEW YORK, NY 10001	NONE	PUBLIC	GENERAL UNRESTRICTED	50,000
11211 10111,111 10001			l .	1

500

245 WEST 29TH STREET SUITE 902 NEW YORK, NY 10001		·

	1		
l Total		 ▶ 3a	l 674.456

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
KENT LAND TRUSTPO BOX 888	NONE	PUBLIC	GENERAL UNRESTRICTED	9,910

KENT, CT 06757	NONE	TOBLIC	GENERAL GINESTRICTED	3,310
KENT VILLAGE HOUSING FOR THE ELDERLY 15 SWIFT LANE PO BOX 404	NONE	PUBLIC	GENERAL UNRESTRICTED	200

KENT VILLAGE HOUSING FOR THE ELDERLY 15 SWIFT LANE PO BOX 404 KENT, CT 06757	NONE	PUBLIC	GENERAL UNRESTRICTED	200
LAKE WARAMAUG TASK FORCE INC 19 SACKETT HILL ROAD	NONE	PUBLIC	GENERAL UNRESTRICTED	2,500

15 SWIFT LANE PO BOX 404 KENT, CT 06757				
LAKE WARAMAUG TASK FORCE INC 19 SACKETT HILL ROAD WARREN, CT 06754	NONE	PUBLIC	GENERAL UNRESTRICTED	2,500

CENT, CT 00757				
AKE WARAMAUG TASK FORCE INC 19 SACKETT HILL ROAD WARREN, CT 06754	NONE	PUBLIC	GENERAL UNRESTRICTED	2,500
Total			▶ 3a	674,456

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MUNICIPAL ART SOCIETY OF NEW YORK NONE PUBLIC GENERAL UNRESTRICTED 500 488 MADISON AVE SUITE 1900

NEW YORK, NY 10022				
NATIONAL RESOURCES DEFENSE COUNCIL 40 WEST 20TH STREET 11TH FLOOR NEW YORK, NY 10011	NONE	PUBLIC	GENERAL UNRESTRICTED	5,000

NORTHWEST CT ARTS COUNCIL NONE PUBLIC GENERAL UNRESTRICTED	
40 MAIN STREET SUITE 1 TORRINGTON, CT 06790	1,000

Total .

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
PEACE USA900 CYPRUS LANE MECHANICSBURG, PA 17050	NONE	PUBLIC	GENERAL UNRESTRICTED	50,000

MECHANICSBURG, PA 17050				
PILOBOLUS 18 EAST 16TH STREET STE 308 NEW YORK, NY 10003	NONE	PUBLIC	GENERAL UNRESTRICTED	23,200

18 EAST 16TH STREET STE 308 NEW YORK, NY 10003		7 00210	DENERALE STREET TO	23,200
PLANNED PARENTHOOD123 WILLIAM ST	NONE	PUBLIC	GENERAL UNRESTRICTED	5,500

674,456

PLANNED PARENTHOOD123 WILLIAM ST NONE PUBLIC GENERAL UNRESTRICTED 5,500 NEW YORK, NY 10038	NEW YORK, NY 10003				
	PLANNED PARENTHOOD123 WILLIAM ST NEW YORK, NY 10038	NONE	PUBLIC	GENERAL UNRESTRICTED	5,500

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

LITCHFIELD, CT 06759				,
STEEP ROCK ASSOCIATIONPO BOX 279 WASHINGTON DEPOT, CT 06794	NONE	PUBLIC	GENERAL UNRESTRICTED	50,000

PUBLIC

GENERAL UNRESTRICTED

5,500

674,456

WASHINGTON DEPOT, CT 06794				
THE GUNNERY22 KIRBY RD	NONE	PUBLIC	GENERAL UNRESTRICTED	50,000
WASHINGTON, CT 06793				l

WASHINGTON DEPOT, CT 06/94				
THE GUNNERY22 KIRBY RD	NONE	PUBLIC	GENERAL UNRESTRICTED	50,0

RIVERS ALLIANCE OF CT7 WEST ST

Total .

NONE

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE HOUSATONIC VALLEY NONE PUBLIC GENERAL UNRESTRICTED 5,000 ASSOCIATION

150 KENT ROAD S CORNWALL BRIDGE, CT 06754				
UCLA FOUNDATION 10920 WILSHIRE BLVD 900 LOS ANGELES, CA 90024	NONE	PUBLIC	GENERAL UNRESTRICTED	210,000

UCLA FOUNDATION 10920 WILSHIRE BLVD 900 LOS ANGELES, CA 90024	NONE	PUBLIC	GENERAL UNRESTRICTED	210,000
UNIVERSITY OF TEXAS AT AUSTIN 110 INNER CAMPUS DRIVE AUSTIN, TX 78705	NONE	PUBLIC	GENERAL UNRESTRICTED	250

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year WARREN VOLUNTEER FIRE NONE PUBLIC GENERAL UNRESTRICTED 1,000

11 SACKETT HILL ROAD WARREN, CT 06754				
WASHINGTON AMBULANCE ASSOCIATION 109 BEE BROOK RD PO BOX 294	NONE	PUBLIC	GENERAL UNRESTRICTED	1,000

W/ (((CEIV, CT 00/51				
WASHINGTON AMBULANCE ASSOCIATION 109 BEE BROOK RD PO BOX 294 WASHINGTON DEPOT, CT 06794	NONE	PUBLIC	GENERAL UNRESTRICTED	
WASHINGTON ART ASSOCIATION	NONE	DUBLIC	GENERAL LINRESTRICTED	

Total .

ASSOCIATION 109 BEE BROOK RD PO BOX 294 WASHINGTON DEPOT, CT 06794	NONE	FOBLIC	GENERAL GIRLSTRICTED	1,000
WASHINGTON ART ASSOCIATION	NONE	PUBLIC	GENERAL UNRESTRICTED	4,850

ASSOCIATION 109 BEE BROOK RD PO BOX 294 WASHINGTON DEPOT, CT 06794				
WASHINGTON ART ASSOCIATION	NONE	PUBLIC	GENERAL UNRESTRICTED	4,850

WASHINGTON DEPOT, CT 06794				
WASHINGTON ART ASSOCIATION 4 BRYAN HALL PLAZA WASHINGTON DEPOT, CT 06794	NONE	PUBLIC	GENERAL UNRESTRICTED	4,850

WASHINGTON ART ASSOCIATION	NONE	PUBLIC	GENERAL UNRESTRICTED	4,
4 BRYAN HALL PLAZA				
WASHINGTON DEPOT, CT 06794				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year WASHINGTON ENVIRONMENTAL NONE PUBLIC GENERAL UNRESTRICTED 500

1402 3RD AVE 1400 SEATTLE, WA 98101				
WASHINGTON MONTESSORI SCHOOL 240 LITCHFIELD TPKE	NONE	PUBLIC	GENERAL UNRESTRICTED	11

COLINCIA

Total .

WASHINGTON MONTESSORI SCHOOL 240 LITCHFIELD TPKE NEW PRESTON, CT 06777	NONE	PUBLIC	GENERAL UNRESTRICTED	11,000
WASHINGTON PARK FOUNDATION	NONE	PUBLIC	GENERAL UNRESTRICTED	3,196

NEW PRESTON, CT 06777				
WASHINGTON PARK FOUNDATION 18 TITUS ROAD	NONE	PUBLIC	GENERAL UNRESTRICTED	3,196

NEW TRESTON, CT 00777				
WASHINGTON PARK FOUNDATION 18 TITUS ROAD WASHINGTON DEPOT. CT 06794	NONE	PUBLIC	GENERAL UNRESTRICTED	3,19

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year

WASHINGTON ROTARY FOUNDATION NONE

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Foundation status of recipient recipient

Purpose of grant or contribution

Amount

Purpose of grant or contribution

Status of recipient

Public GENERAL UNRESTRICTED

1,0

WASHINGTON ROTARY FOUNDATION 6 KIRBY RD WASHINGTON, CT 06793	NONE	PUBLIC	GENERAL UNRESTRICTED	1,000
WASHINGTON SCHOLARSHIP FUND PO BOX 243 WASHINGTON DEPOT. CT. 06794	NONE	PUBLIC	GENERAL UNRESTRICTED	2,000

WASHINGTON SCHOLARSHIP FUND PO BOX 243 WASHINGTON DEPOT, CT 06794	NONE	PUBLIC	GENERAL UNRESTRICTED	2,000
WASHINGTON VOLUNTEER FIRE DEPARTMENT 109 BEE BROOK RD WASHINGTON DEPOT, CT 06794	NONE	PUBLIC	GENERAL UNRESTRICTED	2,000

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

1 = · = = = = · · · · · · · · · · · · ·				
WASSAIC 37 FURNACE BANK ROAD PO BOX 220 WASSAIC, NY 12592	NONE	PUBLIC	GENERAL UNRESTRICTED	500
WEANTINOGE HERITAGE LAND TRUST	NONE	PUBLIC	GENERAL UNRESTRICTED	15,000

EANTINOGE HERITAGE LAND TRUST	NONE	PUBLIC	GENERAL UNRESTRIC
) BOX 821 :NT, CT 06757	THE STATE OF THE S	7 00210	CENTER OF THE STATE
ESTERN CONNECTICUT HEALTH	NONE	PUBLIC	GENERAL UNRESTRIC

Total .

EANTINOGE HERITAGE LAND TRUST D BOX 821 ENT, CT 06757	NONE	PUBLIC	GENERAL UNRESTRICTED	15
ESTERN CONNECTICUT HEALTH ETWORK	NONE	PUBLIC	GENERAL UNRESTRICTED	100

PO BOX 821 KENT, CT 06757				,
WESTERN CONNECTICUT HEALTH NETWORK 24 HOSPITAL AVE DANBURY CT 06810	NONE	PUBLIC	GENERAL UNRESTRICTED	100,000

WESTERN CONNECTICUT HEALTH NETWORK	NONE	PUBLIC	GENERAL UNRESTRICTED	100,000
24 HOSPITAL AVE DANBURY, CT 06810				

DANBURY, CT 06810			
24 HOSPITAL AVE			
NETWORK	]		

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

CHILDREN'S COMMUNITY SCHOOL 1212 S 47TH STREET PHILADELPHIA, PA 19143	NONE	PUBLIC	GENERAL UNRESTRICTED	500
CITY SQUASH	NONE	PUBLIC	GENERAL UNRESTRICTED	10,000

CITY SQUASH PO BOX 619 FORDHAM STATION BRONX, NY 10458	NONE	PUBLIC	GENERAL UNRESTRICTED	10,000
CONNECTICUT LEAGUE OF CONSERVATION VOTERS 553 FARMINGTON AVE	NONE	PUBLIC	GENERAL UNRESTRICTED	100

BRONX, NY 10458				
CONNECTICUT LEAGUE OF CONSERVATION VOTERS 553 FARMINGTON AVE HARTFORD, CT 06105	NONE	PUBLIC	GENERAL UNRESTRICTED	100

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GO PROJECT50 COOPER SO 3RD FLOOR | NONE PUBLIC GENERAL UNRESTRICTED 1,000

NEW YORK, NY 10003				·
GUNN HISTORICAL MUSEUM 5 WYKEHAM RD WASHINGTON, CT 06793	NONE	PUBLIC	GENERAL UNRESTRICTED	200
CUNN MEMORIAL LIBRARY	NONE	DUDLIC	CENEDAL LINDECTRICTED	700

WASHINGTON, CT 06793				
GUNN MEMORIAL LIBRARY PO BOX 1273 5 WYKEHAM ROAD WASHINGTON, CT 06793	NONE	PUBLIC	GENERAL UNRESTRICTED	700
Total			▶ 3a	674,456

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
HOSPITAL FOR SPECIAL SURGERY	NONE	PUBLIC	GENERAL UNRESTRICTED	5,000

535 EAST 70TH STREET NEW YORK, NY 10021	NONE	TOBLIC	GENERAL STREET	3,00
LAKE WARAMAUG ASSOCIATION PO BOX 2272	NONE	PUBLIC	GENERAL UNRESTRICTED	30

NEW YORK, NY 10021				
LAKE WARAMAUG ASSOCIATION PO BOX 2272 NEW PRESTON, CT 06777	NONE	PUBLIC	GENERAL UNRESTRICTED	300
LITERACY VOLUNTEERS ON THE GREEN	NONE	PUBLIC	GENERAL UNRESTRICTED	500

PO BOX 2272 NEW PRESTON, CT 06777	NONE	7 00210	CENTER OF THE CE	300
LITERACY VOLUNTEERS ON THE GREEN 7 WHITTLESEY AVENUE PO BOX 366 NEW MILFORD, CT 06776	NONE	PUBLIC	GENERAL UNRESTRICTED	500

Total			▶ 3a	674,456
LITERACY VOLUNTEERS ON THE GREEN 7 WHITTLESEY AVENUE PO BOX 366 NEW MILFORD, CT 06776	NONE	PUBLIC	GENERAL UNRESTRICTED	500
NEW PRESTON, CT 06777				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

	or substantial contributor			
a Paid during the year				
NATIONAL WILDLIFE FEDERATION 11100 WILDLIFE CENTER DRIVE	NONE	PUBLIC	GENERAL UNRESTRICTED	300

NORTHWEST CT COMMUNITY FUND NONE PUBLIC GENERAL UNRESTRICTED	0190			
33 EAST MAIN STREET PO BOX 1144 TORRINGTON, CT 06790	STREET PO BOX 1144	T PO BOX 1144	GENERAL UNRESTRICTED	250

33 EAST MAIN STREET PO BOX 1144 TORRINGTON, CT 06790	NONE	POBLIC	GENERAL UNRESTRICTED	250
NYU SCHOOL OF LAW 25 WEST FOURTH STREET 4TH FLOOR	NONE	PUBLIC	GENERAL UNRESTRICTED	10,000

TORRINGTON, CT 06790				
NYU SCHOOL OF LAW 25 WEST FOURTH STREET 4TH FLOOR NEW YORK, NY 10012	NONE	PUBLIC	GENERAL UNRESTRICTED	10,000

NYU SCHOOL OF LAW 25 WEST FOURTH STREET 4TH FLOOR NEW YORK, NY 10012	NONE	PUBLIC	GENERAL UNRESTRICTED	10,000
Total			▶ 3a	674,456

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

a Faid duffing the year				
GREENWICH VILLAGE SOCIETY FOR HISTORIC PRESERVATION 232 EAST 11TH STREET NEW YORK, NY 10003	NONE	PUBLIC	GENERAL UNRESTRICTED	500
REACH WITHIN	NONE	DUBLIC	GENERAL LINRESTRICTED	200

REACH WITHIN STARRETT-LEHIGH BUILDING 601 W 26TH ST 325-86 NEW YORK, NY 10001	NONE	PUBLIC	GENERAL UNRESTRICTED	200
NEW YORK, NY 10003				

STARRETT-LEHIGH BUILDING 601 W 26TH ST 325-86 NEW YORK, NY 10001				
SHAKESPEARIENCE 203 FLAMINGO RD 177	NONE	PUBLIC	GENERAL UNRESTRICTED	400

Total			▶ 3a	674,456
SHAKESPEARIENCE 203 FLAMINGO RD 177 MILL VALLEY, CA 94941	NONE	PUBLIC	GENERAL UNRESTRICTED	400
ST 325-86 NEW YORK, NY 10001				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year				
NEW MILFORD REFUGEE RESETTLEMENT 36 MAIN STREET	NONE	PUBLIC	GENERAL UNRESTRICTED	200

NEW MILFORD, CT 06776				
USA FOR UNHCR1310 L ST NW STE 450 WASHINGTON, DC 20005	NONE	PUBLIC	GENERAL UNRESTRICTED	15

USA FOR UNHCR1310 L ST NW STE 450 WASHINGTON, DC 20005	NONE	PUBLIC	GENERAL UNRESTRICTED	15,000
UNION OF CONCERNED SCIENTISTS TWO BRATTLE SQUARE SUITE 6	NONE	PUBLIC	GENERAL UNRESTRICTED	500

WASHINGTON, DC 20005	NONE	OBLIC	GENERAL STRICTED	13,000
UNION OF CONCERNED SCIENTISTS TWO BRATTLE SQUARE SUITE 6 CAMBRIDGE, MA 02138	NONE	PUBLIC	GENERAL UNRESTRICTED	500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

recipient

674,456

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
WASHINGTON COMMUNITY FUND	NONE	PUBLIC	GENERAL UNRESTRICTED	1,000

WASHINGTON COMMUNITY FUND POST OFFICE BOX 1213	NONE	PUBLIC	GENERAL UNRESTRICTED	
WASHINGTON, CT 06793				

Name and address (home or husiness)

Total.

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TY 2019 Accounting Fees Schedule					
_					
	Name: THE KES EIN: 13-4007	STREL FOUNDATION 1198			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
ACCOUNTING FEES	2,500	0	0	2,500	

Data - DLN: 93491319006150
Schedule

Name: THE KESTREL FOUNDATION

anie. The Restri

**EIN:** 13-4007198

MEDIA LAB

Investments Corporation Stock Schedule				
Name of Stock		End of Year Book Value	End of Year Fair Market Value	
AGRO VISION CORP		388,400	736,678	
AZEVAN PHARMACEUTICALS		56,601	56,601	
LENSGEN, INC		50,000	50,000	
VISKASE COS INC		46,652	29,158	
MM CAN USA INC.		49,909	49,909	

527,007

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# **TY 2019 Investments - Other Schedule**

Name: THE KESTREL FOUNDATION

**EIN:** 13-4007198

## **Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
RIBBIT CAPITAL II, L.P.	FMV	735,996	735,996
J.P. MORGAN PEG DIGITAL GROWTH FUND OFFSHORE SPECIAL II LP	FMV	454,378	388,890
WARBURG PINCUS ENERGY PRIVATE INVESTORS OFFSHORE 1, L.P.	FMV	363,342	373,757
LEAFLINE LABS, LLC	FMV	37,642	37,642
CORTLAND PARTNERS FUND II, LLC	FMV	401,588	401,588
BRICKMAN FUND VI, LP	FMV	489,843	489,843
CB RIBBIT OPP I LLC	FMV	415,926	415,926
MD VII PE ACCESS LP	FMV	206,363	206,363
SR UPSTATE, LLC	FMV	221,156	221,156
PEGASUS CREDIT COMPANY, LLC	AT COST	600,000	600,000
GPS SECURITY LLC	FMV	82,788	82,788
HYPUR VENTURES, L.P.	FMV	202,412	202,412
PM23, LLC	FMV	206,301	206,301
CORE SENIOR LENDING OFFSHORE FUND	FMV	425,195	425,195
ALBA FINANCE LLC	FMV	336	336
BIWKC LLC	FMV	50,814	50,814
GLOBAL DENTAL SERVICES LIMITED	FMV	284,020	284,020
MEDMEN OPPORTUNITY FUND II LP	FMV	179,711	179,711
ROSEBROOK	FMV	152,976	152,976
TROPHY HUNTER COLORADO, LLC	FMV	314,098	314,098
MAXIM INCOME OPPORTUNITY FUND I	FMV	1,561,741	1,561,741
GOTHAM GREEN FUND 1 (Q), LP	FMV	260,654	259,536
MERIDA CAPITAL PARTNER II, LP	FMV	199,374	199,374
EF TECH PARTNERS LLC	FMV	249,660	249,660
GPS AGRO LLC	FMV	261,676	261,676
TROY CAPITAL PARTNERS SX X LLC	FMV	728,484	728,484
UPSTATE KIMBALL LLC	FMV	25,947	25,947

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TY 2019 Legal Fees Schedule	ie			
_				
	ne: THE KESTREI N: 13-4007198			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

13,613

13,613

LEGAL FEES

file GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319006150
TY 2019 Other Assets Schedule		

Name: THE KESTREL FOUNDATION

**EIN:** 13-4007198

Other Assets Schedule			
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DUE FROM BEN NICKOLL	6,984	0	0
LIQUID GENOMICS, INC.	84,855	84,855	84,855
DUE FROM MAXIM INCOME OPPORTUNITY FUND I	19,045	3,802	3,802
LOAN RECEIVABLE	58,514	0	0
REALCROWD, INC.	50,000	50,000	50,000
OUTCOME MD	70,833	70,833	70,833
DUE FROM RBT. LP	8.269	0	0

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TY 2019 Other Decreases Sch	edule	_
Name:	THE KESTREL FOUNDATION	
EIN:	13-4007198	
De	escription	Amount
BOOK TO TAX DIFFERENCES		614,125

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491319006150
TY 2019 Other Expenses Schedule				
Name:	THE KESTREL F	OUNDATION		
EIN:	: 13-4007198			
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NONDEDUCTIBLE EXPENSES	6,938	0	0	0
BANK FEES	785	393	0	392
ORDINARY LOSS - BW SOLANA VISTA, LLC	74,179	74,179	0	0

254

431

5,143

90

47

4,967

9,207

254

431

5,143

90

47

4,967

9,207

0

0

0

0

0

0

ORDINARY LOSS - CB RIBBIT OPPORTUNITY I,

ORDINARY LOSS - MEDMEN OPPORTUNITY FUND

ORDINARY LOSS - TROPHY HUNTER COLORADO,

ORDINARY LOSS - HYPUR VENTURES, LP

ORDINARY LOSS - GPS SECURITY, LLC

ORDINARY LOSS - PM23, LLC

ORDINARY LOSS - BIWKC LLC

LLC

II LP

LLC

Other Expenses Schedule

Description

LLC

MANAGEMENT FEE

ORDINARY LOSS - ALBA FINANCE, LLC

ORDINARY LOSS - BRICKMAN FUND VI LP

ORDINARY LOSS - EF TECH PARTNERS, LP

ORDINARY LOSS - UPSTATE KIMBALL LLC

ORDINARY LOSS - INTEGRATED CBD HOLDINGS

Revenue and

Expenses per

Books

160,982

7,122

11.512

255,129

21.426

340

**Net Investment** 

Income

160,982

7,122

11.512

255,129

21.426

340

**Adjusted Net** 

Income

Disbursements for

Charitable

Purposes

## **TY 2019 Other Income Schedule**

Name: THE KESTREL FOUNDATION

**EIN:** 13-4007198

### Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
ORDINARY INCOME - LEAFLINE LABS, LLC	9,136	9,136	
ORDINARY INCOME - CORTLAND PARTNERS FUND II, LLC	285,366	285,366	
ORDINARY INCOME - GOTHAM GREEN FUND 1 (Q), LP	139,778	139,778	
ORDINARY INCOME - SR UPSTATE, LLC	27,903	27,903	
ORDINARY INCOME - MAXIM INCOME OPPORTUNITY FUND I L.P.	187,750	187,750	
ORDINARY INCOME - CORE SENIOR LENDING OFFSHORE FUND (PB), L.P.	23,117	23,117	
ORDINARY INCOME - RIBBIT CAPITAL II	54,076	54,076	
ORDINARY INCOME - MD VII PE ACCESS LP	390	390	
ORDINARY INCOME - MERIDA CAPITAL PARTNERS II, LP	4,743	4,743	
ORDINARY INCOME - GPS AGRO LLC	406	406	
ORDINARY INCOME - OWEN FINANCIAL SECURITIES	149	149	

efile GRAPHIC print - DC	NOT PROCESS As Filed Data	-		DLN: 93491319006150		
Schedule B	Schedule of Contributors			OMB No. 1545-0047		
Form 990, 990-EZ, or 990-PF)  Pattach to Form 990, 990-EZ, or 990-PF.  Papertment of the Treasury ternal Revenue Service  Attach to Form 990, 990-EZ, or 990-PF.  Go to <u>www.irs.gov/Form990</u> for the latest information.				2019		
Name of the organization THE KESTREL FOUNDATION	V		Employer	dentification number		
Organization type (chec			13-400719	3		
organization type (onco	K Onloy.					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	☐ 527 political organization					
Form 990-PF	☑ 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	☐ 501(c)(3) taxable private foundation					
	ion filing Form 990, 990-EZ, or 990 property) from any one contributor.					
Special Rules						
under sections 50 received from any	on described in section 501(c)(3) fil 9(a)(1) and 170(b)(1)(A)(vi), that c one contributor, during the year, t 1h, or (ii) Form 990-EZ, line 1. Co	hecked Schedule A (Form 990 otal contributions of the greater	or 990-EZ), Part II, line 13	, 16a, or 16b, and that		
during the year, to	on described in section 501(c)(7), ( tal contributions of more than \$1,0 ne prevention of cruelty to children	000 <i>exclusively</i> for religious, ch	aritable, scientific, literary,			
during the year, could be during the year.	on described in section 501(c)(7), (contributions exclusively for religious ked, enter here the total contribution mplete any of the parts unless the le, etc., contributions totaling \$5,00	s, charitable, etc., purposes, buns that were received during the General Rule applies to this o	ut no such contributions to ne year for an <i>exclusively</i> r rganization because it rece	aled more than \$1,000. eligious, charitable, etc., eived <i>nonexclusively</i>		
990-EZ, or 990-PF), but it	that isn't covered by the General I must answer "No" on Part IV, line rt I, line 2, to certify that it doesn't r	e 2, of its Form 990; or check th	ie box on line H of its Forn	•		
For Paperwork Reduction Ac	t Notice, see the Instructions	Cat. No. 30613X	Schedule B (Form 99	0, 990-EZ, or 990-PF) (2019)		

for Form 990, 990-EZ, or 990-PF.

Employer identification number

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Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)			Page <b>4</b>	
	rganization REL FOUNDATION			mployer identification number 3-4007198	
Part III	than \$1,000 for the year from any one cont	ributor. Complete co total of exclusively instructions.) ► \$	ations described in Dlumns (a) through religious, charitab	n section 501(c)(7), (8), or (10) that total more	
(a) No. from Part I	(b) Purpose of gift	(c) Us	e of gift	(d) Description of how gift is held	
	Transferee's name, address, and 2	١,,	sfer of gift Relatio	onship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	Transferee's name, address, and 2	onship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	- (c) Us	e of gift	(d) Description of how gift is held	
	Transferee's name, address, and ZIP 4		e) Transfer of gift Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Us	e of gift	(d) Description of how gift is held	
	(e) Trans Transferee's name, address, and ZIP 4		sfer of gift  Relationship of transferor to transferee		
			Sch	nedule B (Form 990, 990-EZ, or 990-PF) (2019)	