efile GRAPHIC print - DO NOT PROCESS

Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491246000060

2019

OMB No 1545-0052

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

1 Contributions, grifts, grants, etc., received (attach schedule) 2 Check	For	caler	ndar year 2019, or tax year beginning 01-01-20)19 , aı	nd ending 12-31	-2019		
14-0672529 13-46672529 1					A Employer id	A Employer identification number		
## Check all that apply Initial return Initial return	UA	DTD 0	62299	13-4067123	13-4067123			
Conventions, table or province, country, and 22P or foreign possible code City exemption application is periodity, creek here City exemption application application is periodity and exemption application a				Room/suite	,	,	ns)	
G Check all that apply Insteal return Amended return								
Final return Amended return Amended return Address change Name change Section 501(x)	PALN	4 REAC	H, FL 33480		C II exemption	application is pending	y, check here	
According method Section 99/7(0)(1) nonexement charable trust Content to the foundation Section 99/7(0)(1) nonexement charable trust Content to the foundation	G Cł	neck al		former public charity		•	▶ ⊔	
Controlled Section Section Social Section Sectio								
Section 4987(p)(1) noneempt charitable instable provide foundation Far market subject of all assets at end of year (from Part II, col (c), and (d) may not necessarily spart the animals outside (b) with the foundation in the		ock tv		foundation				
Far market value of all assets at end of year (from Part II, col (c), her (d) → \$ 2,172,783 C Other (epec(fr))	_	,			under section	on 507(b)(1)(A), chec	k here	
District Part Contributions of Revenue and Expenses (the total purposes contributed in the contributions) Part Contributions, grifts, grants, etc. received (attach schedule) Contributions, grifts, grants, etc. rece	I Fa	r mark	ket value of all assets at end J Accounting method					
of amounts in columns (b), (c), and (d) may not necessarily expert the amounts in columns (b), (c), and (d) may not necessarily expert the amounts in columns (a), (c) and (d) may not necessarily expert books. 1			▶\$ 2 172 783	be on cash basis)	under sectio	on 507(b)(1)(B), chec	k here	
Capital gain net income (from Part IV, line 2) She thort-term capital gain Society Socie	Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				
2 Check				expenses per	, ,			
2 Check ▶ ☐ if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Gross rents 5 Net rental income or (loss) 6 Net gain or (loss) from sale of assets not on line 10 6 Toss sales pince for all assets on line 6 G98,621 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 100 Gross sales less returns and allowances 100 Gross sales less returns and allowances 100 Gross sprofit or (loss) (attach schedule) 10 Other income (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 856,578 S84,113 19,289 15 Pension plans, employee benefits 16 Legal fees (attach schedule) 17 Interest 18 Taxes (attach schedule) S4ccounting fees (attach schedule) 19 Deprecation (attach schedule) S4ccounting fees (attach schedule) S4ccounting		1		272,463				
1		2	,					
13,708 1		2		1 22	198	199		
Sa Gross rents Net rental income or (loss) Section Secti			- · · · · · · · · · · · · · · · · · · ·					
100 200		5a	Gross rents					
December 2009 December 200		ь	Net rental income or (loss)					
Net short-term capital gain	E e	6a	Net gain or (loss) from sale of assets not on line 10	570,219				
Net short-term capital gain	ven	b						
9 Income modifications	8	7	Capital gain net income (from Part IV, line 2)		570,219			
10a Gross sales less returns and allowances		_	· -			5,393		
B Less Cost of goods sold		-	I					
C Gross profit or (loss) (attach schedule)				<u> </u>				
12 Total. Add lines 1 through 11 856,578 584,115 19,289		c		<u> </u>				
13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages		11	Other income (attach schedule)					
14		12	Total. Add lines 1 through 11	856,578	584,115	19,289		
15		13	Compensation of officers, directors, trustees, etc					
16a Legal fees (attach schedule)		14	Other employee salaries and wages					
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	ses		• • •					
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	en:							
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	Exp							
23 Other expenses (attach schedule)	ve		·					
23 Other expenses (attach schedule)	rati			96.] 3.037	960	960		
23 Other expenses (attach schedule)	<u> </u>		, , , , , , , , , , , , , , , , , , , ,					
23 Other expenses (attach schedule)	Ē	20	Occupancy					
23 Other expenses (attach schedule)	Ā	21	Travel, conferences, and meetings					
26 Total expenses and disbursements. Add lines 24 and 25 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-)	anc	22	Printing and publications					
26 Total expenses and disbursements. Add lines 24 and 25 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-)	ğuı	23	Other expenses (attach schedule)	9,889	9,602	9,602		
26 Total expenses and disbursements. Add lines 24 and 25 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-)	rat	24	•				_	
26 Total expenses and disbursements. Add lines 24 and 25 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-)	Ope	25	•		10,562	10,562	443 525	
25 456,611 10,562 10,562 443,525	_			443,323			443,325	
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)			25	456,611	10,562	10,562	443,525	
disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)								
c Adjusted net income (if negative, enter -0-)		a a	disbursements	399,967				
0,727			· · · · · · · · · · · · · · · · · · ·		573,553			
	For				Cat No. 11200		m 990-BE (3010)	

90,393

45,144

211,581

2,352

6.486

202,743

211.581

211,581

420,183

130,892

611,548

2,352

6.486

602,710

611.548

611,548

211,581

399,967

611,548

611.548 Form 990-PF (2019)

1

2

3

4

5

6

1,939,789

172,521

2,172,783

Prepaid expenses and deferred charges 9 10a Investments—U S and state government obligations (attach schedule)

Investments—corporate bonds (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Analysis of Changes in Net Assets or Fund Balances

Paid-in or capital surplus, or land, bldg , and equipment fund

Foundations that follow FASB ASC 958, check here ▶

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule) ▶

Less accumulated depreciation (attach schedule) ▶ ____

Total assets (to be completed by all filers—see the

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

and complete lines 24, 25, 29 and 30.

and complete lines 26 through 30.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) > ____

Net assets without donor restrictions . . .

Net assets with donor restrictions

Other assets (describe > _

Other liabilities (describe ▶_

Grants payable

b

c

11

12

13 14

15

16

17 18

19

20

21

22

23

24

25

28

30

Part III

Liabilities

Fund Balances

ŏ 26

Assets 27

Net 29

2

	e the kınd(s) of property sold (e g , arehouse, or common stock, 200 shs	•	How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1aSee Addıtıonal Data Tabl	e				
b					
С					
d					
e					
(e)	(f)		(g)	,	h)
Gross sales price	Depreciation allowed (or allowable)		other basis ense of sale		r (loss)) minus (g)
a See Additional Data Table		pius exp	ense or sale	(e) plus (i) Illiilus (g)
b					
d					
e					
	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69	,	11
·	(i)	<u> </u>	(k)	Gains (Col. (l) h) gain minus
(i) FMV as of 12/31/69	A decreased in the case		of col (ı)	col (k), but not	less than -0-) or
FM V 45 01 12/31/09	as of 12/31/69	over col	(j), if any	Losses (fr	om col (h))
a See Additional Data Tabl	e				
b					
С					
d					
e					
2 Capital gain net income	, , ,	If gain, also enter in P If (loss), enter -0- in F		2	570,219
·	gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi 		· }	3	5,393
Part V Qualification U	Jnder Section 4940(e) for Re	educed Tax on Net	Investment Inc	come	
(For optional use by domestic p	private foundations subject to the sec	ction 4940(a) tax on ne	t investment incom	ne)	
16 1 4040(1)(3)					
If section 4940(d)(2) applies, le	eave this part blank				
If "Yes," the foundation does no	ne section 4942 tax on the distributant ot qualify under section 4940(e) Do	not complete this part	· 		es 🗹 No
	nount in each column for each year,	see instructions before	making any entrie:		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rati (col (b) divided by c	
2018	121,390		368,541		0 32938
2017	120,207		273,465		0 43957
2016	57,000		210,366		0 27096
2015	83,596		273,287		0 30589
2014	112,169		290,193		0 38653
2 Total of line 1, column (•				1 732329
number of years the four	o for the 5-year base period—divide indation has been in existence if less incharitable-use assets for 2019 fron	than 5 years	0, or by the 3		0 346466 1,039,900
5 Multiply line 4 by line 3		•	5	1	360,290
• '	ent income (1% of Part I, line 27b)		6	+	5,736
7 Add lines 5 and 6				 	366,026
	ions from Part XII, line 4 ,			1	443,525
	eater than line 7, check the box in Pa				e the Part VI
				Fr	orm 990-PF (2019

Form 990-PF (2019)		Page 7
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly P	aid Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, ente	r "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		>
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		er of 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	ne tax year on lines 1 and 2	Amount
1		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		F 000 PF (2010)
		Form 990-PF (2019)

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

3a 3h

4

5

443.525

5,736

437.789

Form 990-PF (2019)

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

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

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

4

5

Page 9

46,259

Form **990-PF** (2019)

Form 990-PF (2019)								
Part XIII	Undi							

- istributed Income (see instructions)
- 1 Distributable amount for 2019 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2019
- a Enter amount for 2018 only.
- **b** Total for prior years Excess distributions carryover, if any, to 2019 From 2014.

- **b** From 2015. . . . c From 2016. . . **d** From 2017. . . . e From 2018.
- 4 Qualifying distributions for 2019 from Part
 - XII, line 4 🕨 \$
- 105,040 f Total of lines 3a through e. a Applied to 2018, but not more than line 2a

required—see instructions).

same amount must be shown in column (a))

d Applied to 2019 distributable amount. e Remaining amount distributed out of corpus

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

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2020.

10 Analysis of line 9

a Excess from 2015. . .

c Excess from 2017. . . .

b Excess from 2016. .

d Excess from 2018. .

e Excess from 2019. .

6 Enter the net total of each column as

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 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

indicated below:

- **b** Applied to undistributed income of prior years
 - (Election required—see instructions).
- c Treated as distributions out of corpus (Election

70.240 46,736

108.320

105.040

397.266

99.861 70,240

46 736

108.320

(a)

Corpus

430.197

397.266

827,463

99.861

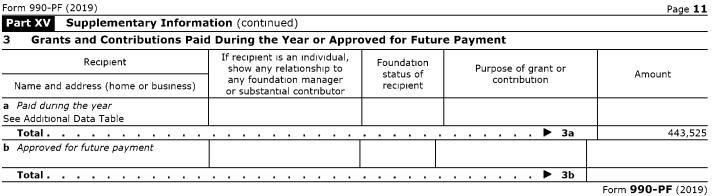
727,602

(b)

Years prior to 2018

(c)

2018



	amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
-	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
с						
	and contracts from government agencies					
	rship dues and assessments					
Interes	t on savings and temporary cash			14	188	
	nds and interest from securities			14	13,708	
	ntal income or (loss) from real estate					
	financed property ebt-financed property					
	ital income or (loss) from personal property					
	nvestment income					
invento	` ,			18	570,219	
	ome or (loss) from special events					
	profit or (loss) from sales of inventory revenue a					
b						
L2 Subtot	al Add columns (b), (d), and (e)				584,115	
3 Total.	Add line 12, columns (b), (d), and (e).	lations)		13	3	584,115
3 Total. (See w	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu Relationship of Activities to the	lations)			3	584,115
3 Total. (See w Part XV	orksheet in line 13 instructions to verify calcu	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115
.3 Total. (See w Part XV Line No.	Price Processing Proce	lations) le Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	584,115

For	Form 990-PF (2019)					
P	art XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharit Exempt Organizations	able			
1		nization directly or indirectly engage in any of the following with any other organization described in section 501 an section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes		

1		ganization directly or in than section 501(c)(3)									ion 501		Yes	No
а	(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Yes No. Transfers from the reporting foundation to a noncharitable exempt organization of													
_				•							. 1	1a(1)		No
		rassets									F	1a(2)		No
h	Other tran			_			-				· · · · · · · · · · · · · · · · · · ·			
-		of assets to a nonchari	itable evemnt	t orda	nization							1b(1)		No
		nases of assets from a n	•	_								1b(2)		No
					-		•		• • •		- F	1b(2)		No
(3) Rental of facilities, equipment, or other assets.									F					
(4) Reimbursement arrangements										1b(4)		No		
		=										1b(5)		No
	` '	mance of services or m			-						- F	1b(6)		No
	-	f facilities, equipment, n	-									1c		No
	of the goo in any trai	wer to any of the above ds, other assets, or ser- nsaction or sharing arra	vices given b	y the	reporting	foundation If th	he fo	oundation	receive	d less than fair mai	rket value			
a)	Line No	(b) Amount involved	(c) Name of	noncha	arıtable exe	mpt organization		(d) Desc	ription of	transfers, transactions	s, and shar	ng arrar	ngement	ts
							_							
	described	ndation directly or indire in section 501(c) (other omplete the following so (a) Name of organization	than section chedule		c)(3)) or i	•			_			No Oshup		
		(a) Name of organization	// /		(.) Type of organiz	ation	' 		(C) Description	ii oi relatioi	ізпір		
	of m	er penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, co	t I ha orrect,	ve examın , and com	ed this return, i plete Declaratio	inclu on of	iding acco f prepare	ompanyı r (other	ng schedules and s than taxpayer) is b	ased on a	all infor	mation	of
	ere	*****				2020-09-02			****		return	e IRS dis e prepar		
	'	Signature of officer or t	rustee			Date		′ Tı	tle		(see in:	str) 🔽	Yes □	No No
											,			
		Print/Type preparer's	name	Prep	arer's Sıgr	nature		Date		Check if self-	PTIN	P00410	691	
_	aid	PHILIP LEBOVITS	CPA							employed ▶ Ш				
	eparer	Thurst and the State	Daniels & Co	CPA F	PC						Fırm's EI	N ▶13-	38012	36
JS	se Only		5 Madison Av	/enuc	15th Floo	r								
			w York, NY			ı					Phone no	(212)	751-4	1422
		1												

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, (b) (d) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation Ρ ROLEX STAINLESS STEEL CHRONOGRAPH 1971-01-09 2019-06-06 125 SHARES SPDR S&P 500 ETF Р 2019-01-22 2019-06-12 50 SHARES SPDR S&P 500 ETF Р 2019-01-22 2019-12-05 500 SHARES ABBVIE INC Р 2016-05-31 2019-10-04 62 SHARES APPLE INC Ρ 2009-07-22 2019-12-05 7,800 SHARES BROOKFIELD ASSET MGMT INC Ρ 2001-04-03 2019-01-22 Р 2,000 SHARES BROOKFIELD ASSET MGMT INC 2001-04-30 2019-02-19 650 SHARES CVS HEALTH CORP Ρ 2006-02-27 2019-11-22 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h Depreciation allowed Gain or (loss) (e) Gross sales price Cost or other basis (f) (or allowable) (q) plus expense of sale (h) (e) plus (f) minus (g) 130,000 250 129,750 36,007 32,980 3,027 15,558 13,192 2,366 37.347 31.498 5,849 16,316 1,403 14,913 325,569 24,247 301,322 88,788 6,217 82,571 49,036 18,615 30,421 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 (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 129,750 3,027 2,366 5,849 14.913 301,322 82,571 30,421

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
ORCHESTRA OF ST LUKE'S	NONE		CHARITABLE	10,000

recipient

330 WEST 42ND STREET 9TH FLOOR NEW YORK, NY 10036	THO NE	CHARTAGEE	10,000
ALL-STAR ORCHESTRA 27 EDGEWOOD AVENUE	NONE	CHARITABLE	5,000

NEW YORK, NY 10036			
ALL-STAR ORCHESTRA 27 EDGEWOOD AVENUE LARCHMONT, NY 10538	NONE	CHARITABLE	5,000
THE SOCIETY OF THE FOUR ARTS	NONE	CHARITABLE	2,500

27 EDGEWOOD AVENUE LARCHMONT, NY 10538			
THE SOCIETY OF THE FOUR ARTS 100 FOUR ARTS PLAZA PALM BEACH, FL 33480	NONE	CHARITABLE	2,500

PALM BEACH, FL 33480			
THE SOCIETY OF THE FOUR ARTS 100 FOUR ARTS PLAZA	NONE	CHARITABLE	2,500
LARCHMONT, NY 10538			

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			
MOUNTS BOTANICAL GARDEN OF PALM BEA	NONE	CHARITABLE	1,600
531 NORTH MILITARY TRAIL			

WEST PALM BEACH, FL 33415			
ORCHESTRA OF ST LUKE'S 330 WEST 42ND STREET 9TH FLOOR NEW YORK, NY 10036	NONE	CHARITABLE	5,000

330 WEST 42ND STREET 9TH FLOOR NEW YORK, NY 10036	NONE	CHARTABLE	3,000
NORTON MUSEUM OF ART 1450 S DIXIE HIGHWAY	NONE	CHARITABLE	5,000

NEW YORK, NY 10036			
NORTON MUSEUM OF ART 1450 S DIXIE HIGHWAY WEST PALM BEACH, FL 33401	NONE	CHARITABLE	5,000

NORTON MUSEUM OF ART 1450 S DIXIE HIGHWAY WEST PALM BEACH, FL 33401	NONE	CHARITABLE	5,000
Total		 ▶ 3a	443,525

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

SACRED HEART SCHOOL 410 NORTH M STREET LAKE WORTH, FL 33460	NONE	CHARITABLE	500
CHAMBER MUSIC SOCIETY OF PALM BEACH	NONE	CHARITABLE	5,000

CHAMBER MUSIC SOCIETY OF PALM BEACH 190 VALENCIA ROAD WEST PALM BEACH, FL 33401	NONE	CHARITABLE	5,000
NEW WORLD SYMPHONY 500 17TH STREET	NONE	CHARITABLE	10,000

190 VALENCIA ROAD WEST PALM BEACH, FL 33401			
NEW WORLD SYMPHONY 500 17TH STREET MIAMI BEACH, FL 33139	NONE	CHARITABLE	10,000

NEW WORLD SYMPHONY 500 17TH STREET MIAMI BEACH, FL 33139	NONE	CHARITABLE	10,000
Total		 ▶ 3a	443,525

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			
CARAMOOR CENTER FOR MUSIC AND THE A 149 GIRDLE RIDGE ROAD KATONAH, NY 10536	NONE	EDUCATIONAL	200,000

KATONAH, NY 10536			
SACRED HEART SCHOOL 410 NORTH M STREET LAKE WORTH, FL 33460	NONE	CHARITABLE	5,000

SACRED HEART SCHOOL 410 NORTH M STREET LAKE WORTH, FL 33460	NONE	CHARITABLE	5,000
KAUFMAN MUSIC CENTER 129 WEST 67TH STREET NEW YORK, NY 10023	NONE	CHARITABLE	2,000

410 NORTH M STREET LAKE WORTH, FL 33460			,,,,,
KAUFMAN MUSIC CENTER 129 WEST 67TH STREET NEW YORK, NY 10023	NONE	CHARITABLE	2,000
Total		 ▶ 3a	443,525

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 A 149 GIRDLE RIDGE ROAD KATONAH, NY 10536	NONE	CHARITABLE	5,000
ALZHEIMER'S DISCOVERY FOUNDATION	NONE	CHARITABLE	500

- ---

ALZHEIMER'S DISCOVERY FOUNDATION 57 WEST 57TH STREET STE 904 NEW YORK, NY 10019	NONE	CHARITABLE	500
WESTCHESTER LAND TRUST INC 403 HARRIS ROAD	NONE	CHARITABLE	2,000

BEDFORD HILLS, NY 10507		▶ 3a	443.525
WESTCHESTER LAND TRUST INC 403 HARRIS ROAD	NONE	CHARITABLE	2,000
NEW YORK, NY 10019			

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

CARAMOOR CENTER FOR MUSIC AND THE A 149 GIRDLE RIDGE ROAD KATONAH, NY 10536	NONE	CHARITABLE	45,000
COUNCIL ON FOREIGN RELATIONS	NONE	CHARITABLE	25,000

,			
COUNCIL ON FOREIGN RELATIONS 58 EAST 68TH STREET NEW YORK, NY 10065	NONE	CHARITABLE	25,000
BEDFORD PLAYHOUSE 633 OLD POST ROAD BEDFORD, NY 10506	NONE	CHARITABLE	10,000

Total		 ▶ 3a	443,525
BEDFORD PLAYHOUSE 633 OLD POST ROAD BEDFORD, NY 10506	NONE	CHARITABLE	10,000
NEW YORK, NY 10065			

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

TWO EAST SIXTY-SECOND STREET FOUNDA	NONE	CHARITABLE	25,000
2 EAST 62ND STREET NEW YORK, NY 10065			
· ·			

NEW YORK, NY 10065			
THE SOCIETY OF THE FOUR ARTS 100 FOUR ARTS PLAZA PALM BEACH, FL 33480	NONE	CHARITABLE	5,000

100 FOUR ARTS PLAZA PALM BEACH, FL 33480	NONE	CHARITABLE	3,000
ALL-STAR ORCHESTRA 27 EDGEWOOD AVENUE	NONE	CHARITABLE	10,000

PALM BEACH, FL 33480			
ALL-STAR ORCHESTRA 27 EDGEWOOD AVENUE LARCHMONT, NY 10538	NONE	CHARITABLE	10,000

443,525

ALL-STAR ORCHESTRA 27 EDGEWOOD AVENUE LARCHMONT, NY 10538	NONE	CHARITABLE	10,000

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 TEATRO NUOVO NONE CHARITABLE 1,000 820 WEST END AVENUE APT 2D NEW YORK, NY 10025

CHAMBER MUSIC SOCIETY OF PALM BEACH 190 VALENCIA ROAD WEST PALM BEACH, FL 33401	NONE	CHARITABLE	3,000
COLORADO ROCKY MOUNTAIN SCHOLL	NONE	CHARITABLE	1,500

190 VALENCIA ROAD WEST PALM BEACH, FL 33401			
COLORADO ROCKY MOUNTAIN SCHOLL 500 HOLDEN WAY CARBONEDALE CO. 81623	NONE	CHARITABLE	1,5

Total . .

WEST PALM BEACH, FL 33401			
COLORADO ROCKY MOUNTAIN SCHOLL 500 HOLDEN WAY CARBONEDALE, CO 81623	NONE	CHARITABLE	1,500

443,525

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

Name and address (home or business)

Traine and dualess (Herrie et Business)	or substantial contributor		
a Paid during the year			
PALM BEACH CIVIC ASSOCIATION 139 N COUNTY ROAD 33 PALM BEACH, FL 33480	NONE	CHARITABLE	2,500
PALM BEACH SYMPHONY	NONE	CHARITABLE	25,000

recipient

PALIN BEACH, PL 33480			
PALM BEACH SYMPHONY 400 HIBISCUS St 100 WEST PALM BEACH, FL 33401	NONE	CHARITABLE	25,000
LUPUS RESEARCH ALLIANCE	NONE	EDUCATIONAL	5,000

400 HIBISCUS St 100 WEST PALM BEACH, FL 33401			
LUPUS RESEARCH ALLIANCE 845 THIRD AVENUE 6TH FLOOR NEW YORK, NY 10022	NONE	EDUCATIONAL	5,00

Total		 ▶ 3a	443,525
LUPUS RESEARCH ALLIANCE 845 THIRD AVENUE 6TH FLOOR NEW YORK, NY 10022	NONE	EDUCATIONAL	5,000
WEST PALM BEACH, FL 33401			

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

a raid daring the year			
CHAMBER MUSIC SOCIETY OF PALM BEACH	NONE	CHARITABLE	10,000
190 VALENCIA ROAD			
WEST PALM BEACH, FL 33401			

WEST PALM BEACH, FL 33401			
NORTON MUSEUM OF ART 1450 S DIXIE HIGHWAY WEST PALM BEACH, FL 33401	NONE	CHARITABLE	5,000
ORCHESTRA OF STILUKE'S	NONE	CHARITABLE	10.000

1450 S DIXIE HIGHWAY WEST PALM BEACH, FL 33401	NONE	CHARTABLE	3,000
ORCHESTRA OF ST LUKE'S 330 WEST 42ND STREET 9TH FLOOR NEW YORK, NY 10036	NONE	CHARITABLE	10,000

Total		 ▶ 3a	443,525
ORCHESTRA OF ST LUKE'S 330 WEST 42ND STREET 9TH FLOOR NEW YORK, NY 10036	NONE	CHARITABLE	10,000
WEST PALM BEACH, FL 33401			

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

Name and address (home or business)	or substantial contributor	recipient	
a Paid during the year			

3 ,		
M BECH COUNTY FOOD BANK	NONE	CHARITABLE
GATOR DRIVE		
ITANIA EL COACO		

any foundation manager

PALM BECH COUNTY FOOD BANK	NONE	CHARITABLE	1,425
525 GATOR DRIVE			
LANTANA, FL 33462			

443,525

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491246000060

TY 2019 Investments Corporate Stock Schedule

Name: GOTTSEGEN FAMILY FOUNDATION

UA DTD 062299

EIN: 13-4067123

Software ID: 19009920

Software Version: 2019v5.0

Investments Corporation Stock Schedule				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
ACTIVISION BUZZARD INC	4,682	5,942		
ALPHABET INC CL C	2,401	14,707		
ALPHABET INC CL A	2,409	14,733		
CENTENE CORP	4,462	4,715		
BROOKFIELD ASSET MGMT INC	31,086	578,000		
MERCK & CO INC	7,585	9,095		
OCCIDENTAL PETE CORP	5,886	4,121		
APPLE INC	222,100	1,045,394		
APPLE INC	2,097	66,071		
BERKSHIRE HATHAWAY INC	9,329	45,300		
CHEVRON CORP	5,625	6,026		
CITIGROUP INC	6,168	7,989		
EXXON MOBIL CORP	7,186	6,978		
MICROSOFT CORP	29,904	31,540		
MORGAN STANLEY	10,610	12,780		
PAYPAL HLDGS INC	6,758	8,113		
PFIZER INC	11,204	25,585		
RAYTHEON CO	10,801	10,987		
CHUBB LTD	6,050	6,226		
SALESFORCE.COM INC	7,550	8,132		
TARGET CORP	6,338	6,411		
TJX COS INC	5,912	6,106		
UNITED TECHNOLOGIES CORP	7,384	7,488		
UNITEADHEALTH GROUP INC	6,656	7,350		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491246000060
TY 2019 Investments - Other	Schedule	
Name:	GOTTSEGEN FAMILY FOUNDATI	ON
	UA DTD 062299	
EIN:	13-4067123	

Software ID: 19009920

SPDR S&P 500 ETF

Software Version: 2019v5.0

Investments Other Schedule 2				
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
VANGUARD TOTAL STOCK MARKET INDEX FUND	FMV	45,144	67,916	

FMV

85,748

104,605

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	93491246000060	
TY 2019 Other Expenses Sche	dule				
Name:	GOTTSEGEN FA	MILY FOUNDATION	ON		
	UA DTD 062299				
EIN:	13-4067123				
Software ID:	D: 19009920				
Software Version:	2019v5.0				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
ADVISORY FEE	9,572	9,572	9,572		
BANKING FEES	30	30	30		
NYS DEPARTMENT OF LAW (FEE)	250				
PENALTIES	37				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491246	000060		
TY 2019 Other Notes/Loans Receivable Short Schedule						
Name:	GOTTSEGEN F	AMILY FOUNDATION				
	UA DTD 06229	99				
EIN:	13-4067123					
Software ID:	19009920					
Software Version:	2019v5.0					
Name of 501(c)(3) Organizatio	n	Balance Due			
J GOTTSEGEN TRUST				5,000		
1						

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLN	N: 93491246000060
TY 2019 Taxes Schedule				
Name:	GOTTSEGEN	FAMILY FOUNDAT	ΓΙΟΝ	
	UA DTD 062	299		
EIN:	: 13-4067123			
Software ID:	19009920			
Software Version:	2019v5.0			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL TAX	2,077			
FOREIGN TAXES PAID ON DIVIDENDS	960	960	960	

efile GRAPHIC print - DC	NOT PROCESS As Filed Data -		DLN: 93491246000060	
Schedule B (Form 990, 990-EZ,	Schedule of Contributors	;	OMB No 1545-0047	
or 990-PF) Department of the Treasury Internal Revenue Service Attach to Form 990, 990-EZ, or 990-PF So to www irs gov/Form990 for the latest information Attach to Form 990, 990-EZ, or 990-PF So to www irs gov/Form990 for the latest information				
Name of the organization GOTTSEGEN FAMILY FOUNI	PATION	Employer ic	lentification number	
UA DTD 062299 Organization type (check	(one)	13-4067123		
Organization type (check	(Colle)			
Filers of:	Section:			
Form 990 or 990-EZ				
	4947(a)(1) nonexempt charitable trust not 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 prival	vate foundation		
	501(c)(3) taxable private foundation			
	on filing Form 990, 990-EZ, or 990-PF that received, during the roperty) from any one contributor. Complete Parts I and II. See			
Special Rules				
under sections 50 received from any	in described in section 501(c)(3) filing Form 990 or 990-EZ that in $\theta(a)(1)$ and 170(b)(1)(A)(vi), that checked Schedule A (Form 99) one contributor, during the year, total contributions of the greated 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	0 or 990-EZ), Part II, line 13,	16a, or 16b, and that	
during the year, to	n described in section 501(c)(7), (8), or (10) filing Form 990 or 9 tal contributions of more than \$1,000 <i>exclusively</i> for religious, cleeprevention of cruelty to children or animals. Complete Parts I,	harıtable, scıentıfıc, lıterary, c		
during the year, co If this box is check purpose Don't coi	n described in section 501(c)(7), (8), or (10) filing Form 990 or 9 ontributions exclusively for religious, charitable, etc., purposes, bed, enter here the total contributions that were received during inplete any of the parts unless the General Rule applies to this ee, etc., contributions totaling \$5,000 or more during the year.	out no such contributions tota the year for an <i>exclusively</i> re organization because it recei	aled more than \$1,000 eligious, charitable, etc , ived <i>nonexclusively</i>	
990-EZ, or 990-PF), but it	that isn't covered by the General Rule and/or the Special Rules must answer "No" on Part IV, line 2, of its Form 990, or check to I, line 2, to certify that it doesn't meet the filing requirements of	the box on line H of its Form		
For Paperwork Reduction Ac for Form 990, 990-EZ, or 990-		Schedule B (Form 990	, 990-EZ, or 990-PF) (2019)	

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Page 2 Name of organization **Employer identification number** GOTTSEGEN FAMILY FOUNDATION 13-4067123 UA DTD 062299 Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed Contributors (c) (d) (a) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person PETER M GOTTSEGEN 1 312 CHERRY LANE Payroll \$ 130,000 Noncash PALM BEACH, FL 33480 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person PETER M AND SUSAN M GOTTSEGEN 312 CHERRY LANE Payroll \$ 35,765 Noncash PALM BEACH, FL 33480 (Complete Part II for noncash contributions) (a) (b) (c) (d) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution Person PETER M AND SUSAN M GOTTSEGEN 312 CHERRY LANE **Payroll** \$ 48,967 **✓** Noncash PALM BEACH, FL 33480 (Complete Part II for noncash contributions) (c) (a) (b) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person PETER M AND SUSAN M GOTTSEGEN 312 CHERRY LANE **Payroll** \$ 998,954 Noncash PALM BEACH, FL 33480 (Complete Part II for noncash contributions) (a) (b) (C) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions)

Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2019)		Page 3
GOTTSEGE	forganization GEN FAMILY FOUNDATION Employer identification number		
UA DTD 062		13-4067123	
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<u>1</u>	ROLEX STAINLESS STEEL CHRONOGRAPH WRISTWATCH	\$ 130,000	2019-02-13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	500 SHARES OF ABBVIE INC	\$ 35,765	2019-06-28
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<u>3</u>	650 SHARES OF CVS HEALTH CORP	\$ 48,967	2019-11-21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<u>4</u>	3,560 SHARES OF APPLE INC	\$ 998,954	2019-12-20
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
		Schedule B (Form	990, 990-EZ, or 990-PF) (2019)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)			Page 4	
Name of or GOTTSEGE UA DTD 06	rganization EN FAMILY FOUNDATION			mployer identification number 3-4067123	
Part III	Exclusively religious, charitable, etc., con than \$1,000 for the year from any one con	tributor. Complete co e total of exclusively to e instructions.) > \$	tions described in lumns (a) throug	n section 501(c)(7), (8), or (10) that total more	
(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	(e) Transfer of gift Transferee's name, address, and ZIP 4		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	
	(e) Transfer of gift Transferee's name, address, and ZIP 4 Relations			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	
	(e) Transfer Transferee's name, address, and ZIP 4			of gift Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP 4 Relation		onship of transferor to transferee		
			Sol	nedule B (Form 990, 990-EZ, or 990-PF) (2019)	