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2019

OMB No. 1545-0052

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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
or	caler	ndar year 2019, or tax year beginning 01-01-20)19 , ar	nd en	ding 12-31-	2019	
		indation AND ISIDOR M STETTENHEIM			A Employer id	entification numbe	r
		ION INC			13-5599355		
		d street (or P.O. box number if mail is not delivered to street address) BOSTON ROAD	Room/suite		B Telephone nu	mber (see instruction	าร)
	J+ 11E11	BOSTON ROAD			(802) 384-1333	3	
		n, state or province, country, and ZIP or foreign postal code VT 050559670			C If exemption	application is pendin	g, check here
							▶ ⊔
G C	neck al		former public charity			ganizations, check he	▶ ⊔
		☐ Final return ☐ Amended return ☐ Address change ☐ Name change				ganizations meeting k here and attach co	
.	neck tv	pe of organization: ✓ Section 501(c)(3) exempt private	foundation			undation status was t	
_		· · · · · · · · · · · · · · · · · · ·	e private foundation		under sectio	n 507(b)(1)(A), chec	k nere
Fa	ir mark	(et value of all assets at end	☑ Cash ☐ Accru	ıal		ation is in a 60-mont	
		rom Part II, col. (c), ▶\$ 1,178,135 Other (specify)			under sectio	n 507(b)(1)(B), chec	k here 🕨 🗀
		(Part I, column (d) must	be on cash basis.)				
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and	(b)	Net investment	(c) Adjusted net	(d) Disbursements for charitable
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	(5)	income	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach		 			(cush busis only)
		schedule)	89,170				
	2	Check ► ☐ if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments		1			
	4	Dividends and interest from securities	25,250)	25,250		
	5a	Gross rents					
	b	Net rental income or (loss)	402.002				
ZE	6a	Net gain or (loss) from sale of assets not on line 10	402,082	-			
Revenue	b	Gross sales price for all assets on line 6a787,744					
ž	7	Capital gain net income (from Part IV, line 2)			402,082		
	8	Net short-term capital gain		<u> </u>			
	9	Income modifications		-			
	10a b	Gross sales less returns and allowances Less: Cost of goods sold		1			
	c	Gross profit or (loss) (attach schedule)		 			
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	516,502	2	427,332		
	13	Compensation of officers, directors, trustees, etc.	3,000)	0		3,000
	14	Other employee salaries and wages					
ses	15	Pension plans, employee benefits		-			
ē	16a	Legal fees (attach schedule)	2,500	-	0		2,500
EX	b	Other professional fees (attach schedule)	9 5,513		5,513		2,300
Operating and Administrative Expenses	17	Interest	5,313	-	J,J13		
ıza L	18	Taxes (attach schedule) (see instructions)		1			
<u>=</u>	19	Depreciation (attach schedule) and depletion		 			
<u>=</u>	20	Occupancy		<u> </u>			
D A	21	Travel, conferences, and meetings					
ë	22	Printing and publications					
<u>5</u> .	23	Other expenses (attach schedule)					
erat	24	Total operating and administrative expenses.	44.040	,	F F43		F 500
ă	25	Add lines 13 through 23	11,013 37,620		5,513		5,500 37,620
	26	Total expenses and disbursements. Add lines 24 and	37,020	+			37,020
		25	48,633	3	5,513		43,120
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	467,869	,			
	b	Net investment income (if negative, enter -0-)			421,819		
	С	Adjusted net income (if negative, enter -0-)					

Attached schedules and amounts in the description column

Beginning of year

Page 2

End of year

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2

3

4

5

- 1	_	' '			
	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			_
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶		'	
2	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)	4,895	3,697	3,829
	b	Investments—corporate stock (attach schedule)	428,138	% 897,871	1,129,508
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶		1	
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			_
	14	Land, buildings, and equipment: basis ▶			_
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe >)			_
	16	Total assets (to be completed by all filers—see the			_
		instructions. Also, see page 1, item I)	478,497	946,366	1,178,135
	17	Accounts payable and accrued expenses			_
	18	Grants payable			
Liabilities	19	Deferred revenue			
≝	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>ia</u>	21	Mortgages and other notes payable (attach schedule)			
기	22	Other liabilities (describe)			
	23	Total liabilities(add lines 17 through 22)	0	0	
s		Foundations that follow FASB ASC 958, check here ▶			
Š		and complete lines 24, 25, 29 and 30.			
Balances	24	Net assets without donor restrictions			
8	25	Net assets with donor restrictions			
필		Foundations that do not follow FASD ASC OFS, shook home			
ᆵ		Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30.			
٥	26	Capital stock, trust principal, or current funds	478,497	478,497	
Assets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
ss!	28	Retained earnings, accumulated income, endowment, or other funds	0	467,869	
	29	Total net assets or fund balances (see instructions)	478,497	946,366	
Net	30	Total liabilities and net assets/fund balances (see instructions) .	478,497	946,366	
		The second secon	1, 5, 437	3 10,500	

	e the kind(s) of property sold (e.g., rehouse; or common stock, 200 shs	·	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a CHARTER TRUST COMPA	NY - SEE ATTACHED LISTING			2018-12-31	2019-12-31
b					
c					
d					
e					
7-3	(f)	(g)	(1	h)
(e) Gross sales price	Depreciation allowed		ther basis		r (loss)
•	(or allowable)	plus expe	nse of sale	(e) plus (f) minus (g)
	7,744		385,661		402,082
b					
C					
d					
е					
Complete only for assets	s showing gain in column (h) and ow				1)
(i)	(j)		k)		h) gain minus less than -0-) or
F.M.V. as of 12/31/69	Adjusted basis as of 12/31/69		of col. (i) (j), if any		om col.(h))
a	43 01 12/31/03	0 7 61 601.	()), ii diiy		402,082
b					102/001
C					
d					
e					
-		If gain, also enter in Pa	ert I lino 7		
2 Capital gain net income	or (net capital loss)	If (loss), enter -0- in Pa	, I I	2	402,082
3 Net short-term capital of	gain or (loss) as defined in sections :	1222(5) and (6):			
If gain, also enter in Pa in Part I, line 8	rt I, line 8, column (c) (see instructi	ons). If (loss), enter -0-	$\left\{ \ldots \right\} \left[$	3	
Part V Qualification l	Jnder Section 4940(e) for Re	educed Tax on Net	Investment Inc	 come	
For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on net	: investment incom	e.)	
·	-	. ,		,	
f section 4940(d)(2) applies, le	eave this part blank.			_	_
	e section 4942 tax on the distributal ot qualify under section 4940(e). Do		in the base period?	? \ \ \ \ \ \ \ \ \	es 🗸 No
1 Enter the appropriate an	nount in each column for each year;	see instructions before	making any entries	5.	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable	e-use assets	(d) Distribution rati (col. (b) divided by c	
2018	49,463		942,857	(Sol. (S) divided by C	0.052461
2017	50,021		934,113		0.053549
2016	50,469		837,115		0.060289
2015	52,004		891,826		0.058312
2014	50,302		750,503		0.067024
2 Total of line 1, column (d)		2		0.291635
· · ·	, o for the 5-year base period—divide t	the total on line 2 by 5.0), or by the		
number of years the four	dation has been in existence if less	than 5 years 🔒	<u>3</u>		0.058327
	ncharitable-use assets for 2019 fron	•	<u>4</u>	ļ	963,155
5 Multiply line 4 by line 3			<u>5</u>		56,178
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		4,218
7 Add lines 5 and 6			7		60,396
If line 8 is equal to or gre	ons from Part XII, line 4 , eater than line 7, check the box in Pa			g a 1% tax rate. Se	43,120 e the Part VI
instructions.					orm 990-PF (2019

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Pa	rt VIII-B Statements Rega	ding	Activities for Which	Form 4720 May Be	Required (continue	ed)			
5a	During the year did the foundation	pay o	r incur any amount to:					Yes	No
	(1) Carry on propaganda, or othe	wise a	attempt to influence legislation (section 4945(e))?				No		
	(2) Influence the outcome of any specific public election (see section 4955); or to carry								
	on, directly or indirectly, any voter registration drive? Yes					✓	No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes					✓	No		
	(4) Provide a grant to an organization other than a charitable, etc., organization described								
		on 4945(d)(4)(A)? See instructions					No		
	(5) Provide for any purpose other		• • •						
	educational purposes, or for the prevention of cruelty to children or animals? Yes b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in						No		
b	, , , ,		•						
	Regulations section 53.4945 or in				_		5b		
_	Organizations relying on a current					Ш			
С	If the answer is "Yes" to question			•		_			
	tax because it maintained expendi If "Yes," attach the statement requ		-		· · Yes	Ш	No		
6-	•		-						
6a	Did the foundation, during the year		, , ,		_	_			
b	a personal benefit contract? Did the foundation, during the year				I I Yes	✓	No 6b		No
D	If "Yes" to 6b, file Form 8870.	i, pay	premiums, unectry or mit	illectiy, oli a persoliai be	ment contract:	•	0.0		NO
7a	At any time during the tax year, w	ac the	foundation a party to a r	prohibited tay shelter trai	nsaction?				
b	If "Yes", did the foundation receive				1es	✓	No 7b		
8	Is the foundation subject to the se		,			•	75		
•	excess parachute payment during					. <i> </i>			
	<u> </u>		ers, Directors, Trus		Yes	<u> </u>	No L		
1 Pa	and Contractors List all officers, directors, trust								
			b) Title, and average	(c) Compensation (If	(d) Contributions	to	(e) Expe	nce 300	count
	(a) Name and address		hours per week	not paid, enter	employee benefit plan			allowan	
10EL	STETTENHEIM	DDEC	devoted to position	- 0-)	deferred compensat	.ion 0			
	NEW BOSTON ROAD	2.00	IDENT			٩			U
	VICH, VT 05055								
WEND	DY STETTENHEIM JONES	VICE 0.50	PRESIDENT	0		0			0
	PLAZA DEL AMO UNIT 291 ANCE, CA 905039320	0.30							
	E TAYLOR	TREA	SURER	3,000		0			0
	NEW BOSTON ROAD	2.00				ا			
	VICH, VT 05055	<u> </u>							
	Compensation of five highest-p	aid er	nployees (other than t	hose included on line 1	_		e, enter	"NONE	•
(a)	Name and address of each employe more than \$50,000	e paid	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions employee benefi plans and deferre compensation	t	(e) Expended other a	nse acco llowanc	
NON					·				
Tota	I number of other employees paid o	ver \$5	0,000						0
							Form 90	O-DE	(2019)

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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		
Total number of others receiving over \$50,000 for professional services		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include 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	<u> </u>	Amount
1	,	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		• o
Total Add Into I through 5		Form 990-PF (2019)

Page 8

48.158

8,436

39,722

39.722

39.722

43,120

43,120

43,120

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1

2a

3

4 5

6

1

2

3

4

5

b

Part XII

2a |

2b

8,436

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

organizations check here

and do not complete this part.)

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

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.

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

Part XIII

c From 2016.

d From 2017. .

e From 2018. . . .

4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ a Applied to 2018, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

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

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

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) . . .

9 Excess distributions carryover to 2020.

10 Analysis of line 9: a Excess from 2015.

b Excess from 2016. .

c Excess from 2017. .

d Excess from 2018. .

e Excess from 2019. .

Subtract lines 7 and 8 from line 6a

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 —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

indicated below:

39,722

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			(a)	(b)	(c)	(d)
			Corpus	Years prior to 2018	2018	2019
1	Distributable amount for 2019 from	om Part XI, line 7				39,722
2	Undistributed income, if any, as	of the end of 2019:				
а	Enter amount for 2018 only				0	
b	b Total for prior years: 20			0		
3	Excess distributions carryover, if any, to 2019:					
а	From 2014	13,373				
b	From 2015	8,151				

8,151 9.186 3.747 2,764 f Total of lines 3a through e.

Undistributed Income (see instructions)

37.221

3.398

40,619

13.373

27,246

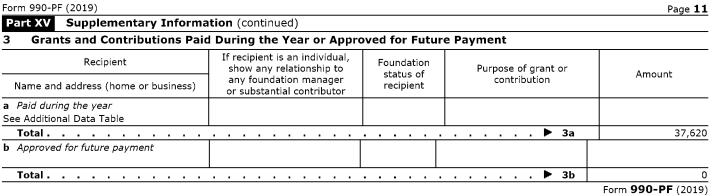
8.151 9,186

3.747

2,764

3.398

- - **b** The form in which applications should be submitted and information and materials they should include:
 - c Any submission deadlines:
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:



		Uman laka di b			E10 E10 E11	(e)
nter gros	ss amounts unless otherwise indicated.		usiness income	Excluded by section		Related or exempt
_	m service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
d						
						
	s and contracts from government agencies					
_	pership dues and assessments					
	est on savings and temporary cash ements					
	ends and interest from securities ental income or (loss) from real estate:			14	25,250	
	t-financed property					
	debt-financed property					
	ental income or (loss) from personal property					
	or (loss) from sales of assets other than					
invent	• •					402,08
	come or (loss) from special events:					
	profit or (loss) from sales of inventory revenue: a					
	revenue. a					
	otal. Add columns (b), (d), and (e)		0		25,250	402,083 427,332
	worksheet in line 13 instructions to verify calcu				3	727,332
Doub VI						
rart Av	/I-B Relationship of Activities to the	e Accomplis		-		
Line No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the accomplishment of the foundation of the fo	ne Accomplis	ed in column (e) of	Part XVI-A contribu		
ine No	Relationship of Activities to the Explain below how each activity for which	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
Line No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
Line No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		
ine No	/I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ie Accomplis income is report empt purposes	ed in column (e) of (other than by prov	Part XVI-A contribu		

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Part XV	Information Re Exempt Organi		fers To and Transact	ions and F	Relationships With Nonchari	table		
			any of the following with a in section 527, relating to		ganization described in section 501 anizations?		Yes	No
a Transfei	rs from the reporting foun	dation to a noncha	aritable exempt organizatio	on of:				
(1) Ca	sh .					1a(1)		No
(2) Otl	ner assets					1a(2)		No
b Other tr	ansactions:							
` ,			nization			1b(1)		No
` ,	rchases of assets from a r					1b(2)		No
` '	ntal of facilities, equipmen	•				1b(3)		No
` '	imbursement arrangemer					1b(4)		No
	ans or loan guarantees.					1b(5)		No
` .		·	raising solicitations.			1b(6)		No
_					should always show the fair market	1c		No
(a) Line No.	ransaction or snaring arra (b) Amount involved		aritable exempt organization		ther assets, or services received. cription of transfers, transactions, and sha	aring arra	ngemen	ıts
2a Is the fo	undation directly or indir	l ectly affiliated with	, or related to, one or mo	re tay-eyem	nt organizations			
describe	,	r than section 501	(c)(3) or in section 527?	'	'	✓ No		
	(a) Name of organization		(b) Type of organiza	ation	(c) Description of relati	onship		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. May the IRS discuss this 2020-07-14 return with the preparer shown Signature of officer or trustee Title Date (see instr.) 🗹 Yes 🗆 No

Sign Here PTIN Print/Type preparer's name Preparer's Signature Date Check if self-P00356904 employed ▶ 🔲 PHILIP A LAPP CPA 2020-07-14 er Firm's name ▶ GALLAGHER FLYNN & COMPANY LLP Firm's EIN ▶03-0225774 ıly 85 MECHANIC STREET BOX A-9 SUITE Firm's address ▶

LEBANON, NH 03766

Phone no. (603) 643-0043

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

Total .

	or substantial contributor			
a Paid during the year				
AFSC DEVELOPMENT1501 CHERRY ST PHILADELPHIA, PA 19102		PC	GENERAL SUPPORT	1,000

250

111111111111111111111111111111111111111			
ARTS IN REACHPO BOX 236 PORTSMOUTH, NH 03802	PC	GENERAL PURPOSE	
AVA GALLERY AND ART CENTER	PC	GENERAL PURPOSE	

PORTSMOUTH, NH 03802			
AVA GALLERY AND ART CENTER 11 BANK STREET LEBANON NH 03766	PC	GENERAL PURPOSE	1,000

101(15)100111,1111 05002			
AVA GALLERY AND ART CENTER	PC	GENERAL PURPOSE	1,000
11 BANK STREET LEBANON, NH 03766			

FC	GENERAL PURPOSE	1,000
		GENERAL PORPOSE

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

1,000

37,620

a Paid during the year			
BARNARD COLLEGE3009 BROADWAY	PC	GENERAL PURPOSE	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

HANGING PERSPECTIVESPO BOX 694 RADFORD, VT 05033	PC	GENERAL PURPOSE	

or substantial contributor

CHANGING PERSPECTIVESPO BOX 694 BRADFORD, VT 05033	PC	GENERAL PURPOSE	100
WAYPOINT 464 CHESTNUT STREET/ PO BOX 448	PC	GENERAL PURPOSE	1,000

DRADI ORD, VI 03033			
WAYPOINT	PC	GENERAL PURPOSE	1,000
464 CHESTNUT STREET/ PO BOX 448			
MANCHESTER, NH 03105			

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

recipient

▶ 3a

37,620

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year			
CIRCUS SMIRKUS1 CIRCUS ROAD GREENSBORO, VT 05841	PC	GENERAL PURPOSE	500
CLAREMONT SOUP KITCHEN & FOOD PANTRY PO BOX 957	PC	GENERAL PURPOSE	1,000

PANTRY PO BOX 957 CLAREMONT, NH 03743		SEMENAL FOR OSE	1,0
COVER HOME REPAIR	PC	GENERAL PURPOSE	1,0

PO BOX 957 CLAREMONT, NH 03743			
COVER HOME REPAIR 158 SOUTH MAIN STREET	PC	GENERAL PURPOSE	1,000
WHITE RIVER JUNCTION, VT 05001			

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

recipient

▶ 3a

37,620

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

or substantial contributor

Name and address (home or business)

WINOOSKI, VT 05404

a Paid during the year			
DARTMOUTH COLLEGE 6066 DEVELOPMENT OFFICE HOME, NH 03755	PC	GENERAL PURPOSE	1,000
DEMPSEY CHALLENGE 29 LOWELL STREET 5TH FLOOR	PC	GENERAL PURPOSE	1,500

1	DEMPSEY CHALLENGE 29 LOWELL STREET 5TH FLOOR LEWISTON, ME 04240	PC	GENERAL PURPOSE	1,500
	DISMAS OF VERMONT INC	PC	GENERAL PURPOSE	500

29 LOWELL STREET 5TH FLOOR LEWISTON, ME 04240			
DISMAS OF VERMONT INC 103 EAST ALLEN STREET	PC	GENERAL PURPOSE	5

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			
FAMILY PLACE319 US RTE 5 SOUTH NORWICH, VT 05055	PC	GENERAL PURPOSE	750
GOOD NEIGHBOR HEALTH CLINICS	PC	GENERAL PURPOSE	1,000

GOOD NEIGHBOR HEALTH CLINICS 70 N MAIN STREET WHITE RIVER JUNCTION, VT 050117061	PC	GENERAL PURPOSE	
GRAFTON COUNTY SENIOR CITIZENS	PC	GENERAL PURPOSE	

WHITE RIVER JUNCTION, VT 050117061			
GRAFTON COUNTY SENIOR CITIZENS COUNCIL	PC	GENERAL PURPOSE	250

WHITE RIVER JUNCTION, VT 050117061			
GRAFTON COUNTY SENIOR CITIZENS COUNCIL	PC	GENERAL PURPOSE	2

050117061			
GRAFTON COUNTY SENIOR CITIZENS COUNCIL PO BOX 433	PC	GENERAL PURPOSE	250

GRAFTON COUNTY SENIOR CITIZENS COUNCIL PO BOX 433 LEBANON, NH 037660433 PC GENERAL PURPOSE 250	05011/061			
	COUNCIL PO BOX 433	PC	GENERAL PURPOSE	250

LEBANON, NH 037660433			
Total	 	> 3a	37,620

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

,	or substantial contributor			
a Paid during the year				
GRANITE STATE INDEPENDENT LIVING		PC	GENERAL PURPOSE	250

21 CHENELL DRIVE CONCORD, NH 03301			
HAND TO HEART PROJECTPO BOX 248	PC	GENERAL PURPOSE	•

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

	CONCORD, NH 03301			
П	HAND TO HEART PROJECTPO BOX 248 CORNISH FLAT, NH 03746	PC	GENERAL PURPOSE	5
1				

CORNISH FLAT, NH 03746	PC	GENERAL PURPOSE	500
HANOVER FRIENDS43 LEBANON STREET	 PC	GENERAL PURPOSE	3,000

CORNISH FLAT, NH 03/46			
HANOVER FRIENDS43 LEBANON STREET HANOVER, NH 03755	PC	GENERAL PURPOSE	3,000

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			
HAVERFORD COLLEGE 370 LANCASTER AVENUE HAVERFORD, PA 19041	PC	GENERAL PURPOSE	1,000

KUA ALUMNI & DEVELOPMENT OFFICE PO BOX 188 MERIDEN, NH 03770	PC	GENERAL PURPOSE	500
LISTEN INC60 HANOVER STREET	PC	GENERAL PURPOSE	1,000

37,620

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PO BOX 188 MERIDEN, NH 03770	PC	GENERAL PURPOSE	50
LISTEN INC60 HANOVER STREET	PC	GENERAL PURPOSE	1,00

MERIDEN, NH 03770			
LISTEN INC60 HANOVER STREET LEBANON, NH 03766	PC	GENERAL PURPOSE	1,000

LISTEN INC60 HANOVER STREET	PC	GENERAL PURPOSE	1,0
LEBANON, NH 03766			

LISTEN INC60 HANOVER STREET	PC	GENERAL PURPOSE	1,
LEBANON, NH 03766			

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 contribution show any relationship to status of

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
FRIENDS OF MADRONA MARSH 3201 PLAZA DEL AMO TORRANCE, CA 90503		PC	GENERAL PURPOSE	500
MONTSHIRE MUSEUM OF SCIENCE		PC	GENERAL PURPOSE	500

recipient

MONTSHIRE MUSEUM OF SCIENCE 1 MONTSHIRE ROAD NORWICH, VT 05055	PC	GENERAL PURPOSE	
NATURE CONSERVANCY OF NH	PC	GENERAL PURPOSE	

MONTSHIRE MUSEUM OF SCIENCE 1 MONTSHIRE ROAD NORWICH, VT 05055	PC	GENERAL PURPOSE	5
NATURE CONSERVANCY OF NH 22 BRIDGE STREET 4TH FL	PC	GENERAL PURPOSE	5

NORWICH, VT 05055			
NATURE CONSERVANCY OF NH 22 BRIDGE STREET 4TH FL CONCORD, NH 03301	PC	GENERAL PURPOSE	500

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

NEW HAMPSHIRE PUBLIC TELEVISION 268 MAST ROAD DURHAM, NH 03824	PC	GENERAL PURPOSE	250
AUDUBON SOCIETY OF NEW	PC	GENERAL PURPOSE	1,000

OUBON SOCIETY OF NEW	PC	GENERAL PURPOSE
SILK FARM ROAD ICORD, NH 03301		

Total .

HAMPSHIRE 84 SILK FARM ROAD CONCORD, NH 03301			
ACLU FOUNDATION OF NEW	PC	GENERAL PURPOSE	

HAMPSHIRE 84 SILK FARM ROAD CONCORD, NH 03301			
ACLU FOUNDATION OF NEW HAMPSHIRE	PC	GENERAL PURPOSE	50

84 SILK FARM ROAD CONCORD, NH 03301			
ACLU FOUNDATION OF NEW HAMPSHIRE 18 LOW AVENUE	PC	GENERAL PURPOSE	500

ACLU FOUNDATION OF NEW	PC	GENERAL PURPOSE	500
HAMPSHIRE			
18 LOW AVENUE			
CONCORD, NH 03301			

За

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

Total .

a Faid duffing the year			
NORWICH PUBLIC LIBRARY PO BOX 290 368 MAIN STREET NORWICH, VT 05055	PC	GENERAL PURPOSE	500
NORWICH HISTORICAL SOCIETY	PC	GENERAL PURPOSE	100

NORWICH HISTORICAL SOCIETY 277 MAIN ST PO BOX 1680 NORWICH, VT 05055	PC	GENERAL PURPOSE	

277 MAIN ST PO BOX 1680 NORWICH, VT 05055			
NORWICH WOMEN'S CLUBPO BOX 191	PC	GENERAL PURPOSE	1

NORWICH, VT 05055			
NORWICH WOMEN'S CLUBPO BOX 191	PC	GENERAL PURPOSE	10

NORWICH WOMEN'S CLUBPO BOX 191 NORWICH, VT 05055	PC	GENERAL PURPOSE	100

Recipient If recipient is an individual, Show any relationship to status of contribution Amount

recipient

▶ 3a

37,620

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

or substantial contributor

Name and address (home or business)

SANFORD, CA 94309

	or substantial contributor			
a Paid during the year				
PLANNED PARENTHOOD FEDERATION OF AMERICA INC PO BOX 97166 WASHINGTON, DC 200907166		PC	GENERAL PURPOSE	500
RICHMOND STORY HOUSE 2109 M STREET RICHMOND, VA 23223		PC	GENERAL PURPOSE	600
STANFORD UNIVERSITYPO BOX 20466		PC	GENERAL PURPOSE	1.000

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

FORESTS	a Paid during the year			
		PC	GENERAL PURPOSE	500

CONCORD, NH 03301			
ST CHRISTOPHER'S INN 21 FRANCISCAN WAY GARRISON. NY 10524	PC	GENERAL PURPOSE	250

21 FRANCISCAN WAY GARRISON, NY 10524			
STATEN ISLAND OUTLOUD PO BOX 10253	PC	GENERAL PURPOSE	750

GARRISON, NY 10524			
STATEN ISLAND OUTLOUD PO BOX 10253	PC	GENERAL PURPOSE	750
STATEN ISLAND, NY 10301			

37,620

STATEN ISLAND OUTLOUD PO BOX 10253 STATEN ISLAND, NY 10301	PC	GENERAL PURPOSE	75
STATEN ISLAND, NT 10301			

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

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
TURNING POINTS NETWORK 11 SCHOOL STREET CLAREMONT, NH 03743	PC	GENERAL PURPOSE	750
1			

UPPER VALLEY HAVEN 713 HARTFORD AVENUE WHITE RIVER JUNCTION, VT 05001	PC	GENERAL PURPOSE	1,000
UPPER VALLEY LAND TRUST	PC	GENERAL PURPOSE	500

WHITE RIVER JUNCTION, VT 05001			
UPPER VALLEY LAND TRUST 19 BUCK ROAD	PC	GENERAL PURPOSE	5

WHITE RIVER JUNCTION, VI 05001			
UPPER VALLEY LAND TRUST 19 BUCK ROAD HANOVER, NH 03755	PC	GENERAL PURPOSE	500

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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

	or substantial contributor			
a Paid during the year				
UPPER VALLEY TRAILS ALLIANCE PO BOX 1215		PC	GENERAL PURPOSE	100

NORWICH, VT 05055			
VERMONT CENTER FOR ECOSTUDIES PO BOX 420 NORWICH, VT 05055	PC	GENERAL PURPOSE	

VERMONT CENTER FOR ECOSTUDIES PO BOX 420 NORWICH, VT 05055	PC	GENERAL PURPOSE	500
THE VERMONT COMMUNITY FOUNDATION	PC	GENERAL PURPOSE	500

NORWICH, VT 05055				
THE VERMONT COMMUNITY FOUNDATION PO BOX 30		PC	GENERAL PURPOSE	500
MIDDLEDUDY VIT GETED	1		l e	

THE VERMONT COMMUNITY FOUNDATION PO BOX 30 MIDDLEBURY, VT 05753	PC	GENERAL PURPOSE	500

Total	 ▶ 3a	37,620
FOUNDATION PO BOX 30 MIDDLEBURY, VT 05753		

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			
VERMONT PUBLIC TELEVISION 204 ETHAN ALLEN AVENUE COLCHESTER, VT 05446	PC	GENERAL PURPOSE	250
_			

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

GROUP 141 MAIN STREET STE 6 MONTPELIER, VT 05602			-
VISITING NURSE & HOSPICE OF VT AND	PC	GENERAL PURPOSE	5

GROUP 141 MAIN STREET STE 6 MONTPELIER, VT 05602			
VISITING NURSE & HOSPICE OF VT AND	PC	GENERAL PURPOSE	5

GROUP 141 MAIN STREET STE 6 MONTPELIER, VT 05602			
VISITING NURSE & HOSPICE OF VT AND NH	PC	GENERAL PURPOSE	50

MONTPELIER, VT 05602			
VISITING NURSE & HOSPICE OF VT AND NH 56 BENNING ST STE 6	PC	GENERAL PURPOSE	500

120

37,620

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VISITING NURSE & HOSPICE OF VT AND	PC	GENERAL PURPOSE	500
NH			
66 BENNING ST STE 6			
W LEBANON, NH 03784			

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)

Total .

, ,	or substantial contributor			
a Paid during the year				
VITAL COMMUNITIES		PC	GENERAL PURPOSE	500

WHITE RIVER JUNCTION, VT 05001			
VOLUNTEERS IN ACTIONPO BOX 707 WINDSOR, VT 05089	PC	GENERAL PURPOSE	250

VOLUNTEERS IN ACTIONPO BOX 707 WINDSOR, VT 05089	PC	GENERAL PURPOSE	250
WEST CENTRAL BEHAVIORAL INSTITUTE	PC	GENERAL PURPOSE	1,000

WINDSOR, VT 05089			
WEST CENTRAL BEHAVIORAL INSTITUTE 9 HANOVER ST STE 2 LEBANON, NH 03766	PC	GENERAL PURPOSE	1,000

WEST CENTRAL BEHAVIORAL INSTITUTE	PC	GENERAL PURPOSE	1,000
9 HANOVER ST STE 2 LEBANON, NH 03766			

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			
WHITE RIVER INDIE FILM SERIES 58 N MAIN STREET STE 107	PC	GENERAL PURPOSE	3,000

WHITE RIVER JUNCTION, VT 05001			
WILLING HANDSPO BOX 172 LEBANON, NH 03766	PC	GENERAL PURPOSE	500

WILLING HANDSPO BOX 172 LEBANON, NH 03766	PC	GENERAL PURPOSE	500
WISE38 BANK STREET	PC	GENERAL PURPOSE	1,000

LEBANON, NH 03766			
WISE38 BANK STREET LEBANON, NH 03766	PC	GENERAL PURPOSE	1,000

WISE38 BANK STREET LEBANON, NH 03766 PC	J I GENERAL FORFOSE I	1,000

LEBANON, NH 03766			l
Total	 	▶ 3a	37,620

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 husiness)

Total.

Hame and dadress (Home or Business)	or substantial contributor			
a Paid during the year				
WORLD LEARNING INCPO BOX 676 BRATTLEBORO, VT 053020676		PC	GENERAL PURPOSE	500

recipient

BRATTLEBORO, VT 053020676	PC	GENERAL PURPOSE	
WOMEN'S FUND OF NEW HAMPSHIRE TWO DELTA DRIVE	PC	GENERAL PURPOSE	1,

	BRATTLEBORO, VT 053020676			
П	WOMEN'S FUND OF NEW HAMPSHIRE TWO DELTA DRIVE	PC	GENERAL PURPOSE	1,0
ı	CONCORD NU 03304			

WOMEN'S FUND OF NEW HAMPSHIRE	PC	GENERAL PURPOSE	1,000
TWO DELTA DRIVE			
CONCORD NH 03301			1

efile GRAPHIC print - DO NOT PROC	CESS As Filed D	As Filed Data - DLN: 93491196006460				
TY 2019 Accounting Fees	Schedule					
Name: FLORA R AND ISIDOR M STETTENHEIM						
FOUNDATION INC						
	EIN: 13-5599	355				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
TAX PREPARATION	2,500	0		2,500		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491196006460		
TY 2019 Investments Corporate Stock Schedule					
Namo	FIODA D AND IST	OOR M STETTENHEIM			
Name:	FOUNDATION INC				

EIN: 13-5599355			
Investments Corporation Stock Schedule			
Name of Stock	End of Year Book Value	End of Year Fair Market Value	
CHARTER TRUST PORTFOLIO	808,701	1,040,338	

89,170

89,170

DONATIONS IN TRANSIT

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491196006460		
TY 2019 Investments Government Obligations Schedule					
Name:	FLORA R AND	ISIDOR M STETTENHEIM			
	FOUNDATION	INC			
EIN:	13-5599355				
US Government Securities - End of Year Book Value:		3,697			
US Government Securities - End of Year Fair Market Value:		3,829			
State & Local Government Securities - End of Year Book Value:		0			
State & Local Government Securities - End of Year Fair Market Value:		0			

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DL	N: 93491196006460
TY 2019 Other Professional Fees Schedule				
Name: FLORA R AND ISIDOR M STETTENHEIM				
FOUNDATION INC				
EIN: 13-5599355				
Category	Amount	Net Investment	Adjusted Net	Disbursements
		Income	Income	for Charitable Purposes
TRUSTEE FEES	5,513	5,513		0

efile GRAPHIC print - [O NOT PROCESS As	Filed Data -			OMB No. 1545-0047		
Schedule B (Form 990, 990-EZ,	Schedule of Contributors			-	OIVID INU. 1345-0047		
or 990-PF) Department of the Treasury Internal Revenue Service	990-PF) ► Attach to Form 990, 990-EZ, or 990-PF. Partment of the Treasury ► Go to <u>www.irs.gov/Form990</u> for the latest information.			2019			
Name of the organization FLORA R AND ISIDOR M FOUNDATION INC	STETTENHEIM			Employer ide 13-5599355	entification number		
Organization type (che	ck one):						
Filers of:	Section:						
Form 990 or 990-EZ	☐ 501(c)() (ent	☐ 501(c)() (enter number) organization					
	☐ 4947(a)(1) nor	nexempt charitable trust not treat	ted as a private founda	tion			
	☐ 527 political or	rganization					
Form 990-PF	✓ 501(c)(3) exer	mpt private foundation					
	☐ 4947(a)(1) nor	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	☐ 501(c)(3) taxa	able private foundation					
		D-EZ, or 990-PF that received, du contributor. Complete Parts I and					
Special Rules							
under sections 5 received from a	09(a)(1) and 170(b)(1)(A ny one contributor, during	501(c)(3) filing Form 990 or 990-E (vi), that checked Schedule A (F the year, total contributions of the T, line 1. Complete Parts I and II.	orm 990 or 990-EZ), P	art II, line 13, 1	16a, or 16b, and that		
during the year,	total contributions of mor	501(c)(7), (8), or (10) filing Form 9 to than \$1,000 exclusively for religitor to children or animals. Complete	gious, charitable, scient				
during the year, If this box is che purpose. Don't o	contributions exclusively cked, enter here the total omplete any of the parts	501(c)(7), (8), or (10) filing Form 9 for religious, charitable, etc., purp I contributions that were received unless the General Rule applies taling \$5,000 or more during the y	poses, but no such con during the year for an to this organization be	tributions total exclusively reli cause it receiv	ed more than \$1,000. igious, charitable, etc.		
990-EZ, or 990-PF), but	it must answer "No" on I	ne General Rule and/or the Specia Part IV, line 2, of its Form 990; or t it doesn't meet the filing requiren	check the box on line I	H of its Form 9			
For Paperwork Reduction A for Form 990, 990-EZ, or 99	Act Notice, see the Instructio 0-PF.	ons Cat. No. 30613	X Schedu	ıle B (Form 990,	990-EZ, or 990-PF) (2019)		

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)			Page 4
	rganization ND ISIDOR M STETTENHEIM ON INC			Employer identification number 13-5599355
Part III	than \$1,000 for the year from any one contribut	tor. Comple Il of e <i>xclusi</i> ructions.) ▶	te columns (a) the vely religious, cha	ped in section 501(c)(7), (8), or (10) that total more rough (e) and the following line entry. For aritable, etc., contributions of \$1,000 or less for
(a) No. from Part I	(b) Purpose of gift	(c) Use of		(d) Description of how gift is held
	(e) Transfer of Transferee's name, address, and ZIP 4		Transfer of gift Re	elationship of transferor to transferee
(2)				
(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 ZIP 4	elationship 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 ZIP 4	<u> </u>	K	elationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	- (0	:) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and ZIP 4		Transfer of gift Re	elationship of transferor to transferee
				Schedule B (Form 990, 990-EZ, or 990-PF) (2019)