Form **990-PF** 

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

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

			social security numbers on irs.gov/Form990PF for instr				Open to Public Inspection
		dar year 2019 or tax year beginning	<del></del>	, and e	ending		
Nar	ne of	foundation				A Employer identification	number
		SIGNOR RICHARD S. AMICO					
		ORIAL CHARITABLE TRUST		.V		14-6325054	
		nd street (or PO box number if mail is not delivered to street SOUTH ROSSLER AVE.	address)		Room/suite	B Telephone number 716-825-73	77
		own, state or province, country, and ZIP or foreign p	oostal code			C If exemption application is per	nding, check here
		all that apply: Initial return	Initial return of a fo	rmer public	charity	D 1. Foreign organizations,	check here
		Final return	Amended return		•		
		Address change	Name change			Foreign organizations mee check here and attach con	ating the 85% test, inputation
H C	_	type of organization X Section 501(c)(3) ection 4947(a)(1) nonexempt charitable trust	xempt private foundation Other taxable private founda	ition	04	E If private foundation stat under section 507(b)(1)(	_ [ ]
I Fa	_		ing method. X Cash	Acc	rual	F If the foundation is in a 6	**
		Part II, col. (c), line 16)	Other (specify)			under section 507(b)(1)(	
<u> </u>		1,084,142. (Part I, colu	mn (d), must be on cash bas	ıs)			<i></i>
Pa	rt I.	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)	(a) Revenue and expenses per books		nvestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received				-	-[
	2	Check X if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	3.	_	3.	3.	
	4	Dividends and interest from securities	21,773.	2	1,773.	21,773.	
	5a	Gross rents					
	b	Net rental income or (loss)		_			<u></u>
رە دە	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	RECENTED.	<u> </u>			
Revenue	b	assets on line 6a		<u>ပ</u> (၄) 1	C 700		
ev.	7	Capital gain net income (from Part IV, line 2)	11 N 9 9 2020		<u>.6,780.</u>	NT / 3	-
. –	8	Net short-term capital gain	JUN 2 2 2020	8		N/A	
	9	Gross sales less returns		15			
		and allowances Less Cost of goods sold	OGDEN, UT		····		
<u>'</u>		Gross profit or (loss)			-		
	11	Other income					
	12	Total. Add lines 1 through 11	38,556.	3	8,556.	21,776.	
	13	Compensation of officers, directors, trustees, etc			0.	0.	0.
•	14	Other employee salaries and wages					
		Pension plans, employee benefits					
ses	16a	Legal fees					<del></del>
Expense	b	Accounting fees				-	
	C 17	Other professional fees Interest					······································
Administrative		Taxes STMT 1	2,538.		2,538.	0.	0.
stra	19	Depreciation and depletion	2,330.		<u>,</u>	<del>-</del>	1
nini	20	Occupancy					<u>.                                    </u>
Adn	21	Travel, conferences, and meetings		•			
and /	22	Printing and publications					
		Other expenses STMT 2	13,494.	1	3,494.	0.	0.
Operating	24	Total operating and administrative					
per		expenses. Add lines 13 through 23	16,032.	1	6,032.	0.	0.
0	23	Contributions, gifts, grants paid	151,000.				151,000.
	26	Total expenses and disbursements.	167 020	1	6 022	0.	151 000
	07	Add lines 24 and 25	167,032.		6,032.	0.	151,000.
			<128,476.>			'	
		Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	120,270.7		22,524.		€ -
		Adjusted net income (if negative, enter -0-)	-		,,	21,776.	
				· ·			200 55

MONSIGNOR RICHARD S. AMICO MEMORIAL CHARITABLE TRUST MICHAEL A. ERV 14-6325054 Form 990-PF (2019) Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 7,376. 18,759. 18,759. 1 Cash - non-interest-bearing 5,980. 41,052. 5,980. 2 Savings and temporary cash investments 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 7 Other notes and loans receivable Less allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 953,198. STMT 3 1,093,752. 1,043,895. b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ► COST BASIS ADJUSTME) 15,508. 15,508. 0. 16 Total assets (to be completed by all filers - see the 1,142,180. 993,445. 1,084,142. instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 20,259. 0. 22 Other liabilities (describe ► COST BASIS ADJUSTM) 0. 20,259. 23 Total liabilities (add lines 17 through 22)  $\rightarrow X$ Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. Balances 1,121,921. 993,445 24 Net assets without donor restrictions 25 Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check here Fund F and complete lines 26 through 30. 26 Capital stock, trust principal, or current funds ò 27 Paid-in or capital surplus, or land, bldg, and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds 1,121,921. 993,445. 29 Total net assets or fund balances je je 1,142,180. 993,445. 30 Total liabilities and net assets/fund balances Part IIII Analysis of Changes in Net Assets or Fund Balances

ш			
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29		
	(must agree with end-of-year figure reported on prior year's return)	1	1,121,921.
2	Enter amount from Part I, line 27a	2	<128,476.>
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	993,445.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	993,445.

923521 12-17-19

Form 990-PF (2019) MEMORIAL CHARITABLE TRUST MICHAEL A. ERV 14-6325054 Page 3 Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase D - Donation (c) Date acquired (a) List and describe the kind(s) of property sold (for example, real estate, (d) Date sold (mo , day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) 18 SEE ATTACHED STMT-MS 07/01/18 P b SEE ATTACHED STMT-MS P 07/01/18 CAPITAL GAIN DISTRIBUTIONS е (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale ((e) plus (f) minus (g)) 60,845. 60,227. 618. 245,823. 239,070. 6,753. h 9.409. C d \_e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col (i) Losses (from col. (h)) (i) FMV as of 12/31/69 as of 12/31/69 over col (j), if any 618. 6,753. b 9,409.C d e If gain, also enter in Part I, line 7 16,780. 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6). If gain, also enter in Part I, line 8, column (c). 10,027. If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making any entries. (a) Base period years Calendar year (or tax year beginning in) (d) Distribution ratio (col. (b) divided by col. (c)) (b) (c) Net value of noncharitable-use assets Adjusted qualifying distributions 150,309. 1,253,438 .1199172018 .128401 171,997. 1,339,526. 2017 139,889. 1,346,911. .103859 2016 1,526,701. 134,186. .087893 2015 1,668,994 139.936. .083845 2014 .523915 2 Total of line 1, column (d) 2 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5 0, or by the number of years .104783 the foundation has been in existence if less than 5 years 3 1,128,314. 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 118,228. 5 Multiply line 4 by line 3 5 225. Enter 1% of net investment income (1% of Part I, line 27b) 6 118,453. 7 Add lines 5 and 6 7 151,000. 8 Enter qualifying distributions from Part XII, line 4 8 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions. Form 990-PF (2019)

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MONSIGNOR RICHARD S. AMICO
MEMORIAL CHARITABLE TRUST MICHAEL A. ERV

	m 990-PF (2019) MEMORIAL CHARITABLE TRUST MIC art VI Excise Tax Based on Investment Income (Section 49		<u>14-</u> 948 -	63250 see ins	) 5 4 truc		Page 4
1a	a Exempt operating foundations described in section 4940(d)(2), check here						
	Date of ruling or determination letter: (attach copy of letter if	necessary-see instructions)				_	
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	➤ X and enter 1%	1			2:	25.
	of Part I, line 27b						- 1
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter	4% of Part I, line 12, col. (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only;	; others, enter -0-)	2				0.
-	Add lines 1 and 2		3			2:	25.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	y; others, enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5			2:	25.
6	Credits/Payments:	1 1					- }
а	a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a 720.					l
b	b Exempt foreign organizations - tax withheld at source	6b 0.					i
C	c Tax paid with application for extension of time to file (Form 8868)	6c 0.					- 1
d	d Backup withholding erroneously withheld	6d 0.					لب
	Total credits and payments. Add lines 6a through 6d		7	-		-73	20.
		attached	8				<u>0.</u>
	·	<b>&gt;</b>	9				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	_		4:	95.
	Enter the amount of line 10 to be: Credited to 2020 estimated tax	495. Refunded ▶	11				0.
	art VII-A Statements Regarding Activities			<del>-1</del>		V	NIa
1a	a During the tax year, did the foundation attempt to influence any national, state, or local le	egislation or did it participate or intervene	ın	}		Yes	No
	any political campaign?			}	1a		X
þ	b Did it spend more than \$100 during the year (either directly or indirectly) for political pur		ition	}	1b		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copi	es of any materials published or		Ì			
	distributed by the foundation in connection with the activities.						<del>-</del>
	Did the foundation file Form 1120-POL for this year?			-	1c		<u> </u>
đ	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during						
	(1) On the foundation. > \$ 0. (2) On foundation manage	•					
е	e Enter the reimbursement (if any) paid by the foundation during the year for political expe managers. ► \$ 0 •	enditure tax imposed on foundation			i	1	
•	-	on IDCO		ŀ	2		
2	Has the foundation engaged in any activities that have not previously been reported to the	ie ino		ŀ			<u> </u>
•	If "Yes," attach a detailed description of the activities.  Has the foundation made any changes, not previously reported to the IRS, in its governir	as instrument articles of inserneration o					1
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	ig institution, articles of incorporation, o		ŀ	3		X
42	a Did the foundation have unrelated business gross income of \$1,000 or more during the y	waar?		ŀ	4a		X
	b If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	year.	N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the ye	ear?		′ -	5		X
J	If "Yes," attach the statement required by General Instruction T	<del></del> -		ŀ	-		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	d either:					- 1
-	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no manda	atory directions that conflict with the state	law				
	remain in the governing instrument?	,		ľ	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	omplete Part II, col. (c), and Part XV		Ī	7	Х	
		,		Ī			i
8a	Enter the states to which the foundation reports or with which it is registered. See instru-	ctions -					j
	NY						1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	ne Attorney General (or designate)					
	of each state as required by General Instruction G2 If "No," attach explanation				8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of	f section 4942(j)(3) or 4942(j)(5) for cale	ndar	[			
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," of	complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes " attach a sch	nedule listing their names and addresses	TMT	י 6	10	х	_

MEMORIAL CHARITABLE TRUST MICHAEL A. ERV 14-6325054

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Pa	rt VII-A* Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A  The books are in care of ► MICHAEL A. ERVOLINA, JR.  Telephone no. ►716-82	5 7	277	
14	The books are in care of $\blacktriangleright$ MICHAEL A. ERVOLINA, JR. Telephone no. $\blacktriangleright$ 716-82 Located at $\blacktriangleright$ 45 S. ROSSLER ST., BUFFALO, NY	<u> </u>	3 / /	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	200	_	$\overline{\Box}$
13	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		-	
	foreign country	- 4		
∶Pa	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	,		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No	,		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No  (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?		!	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		<u> </u>
	Organizations rolying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			X
2	before the first day of the tax year beginning in 2019?  Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	10		
2	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines		,	
	6d and 6e) for tax year(s) beginning before 2019?  Yes X No			
	If "Yes," list the years  ,,,,,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		<u>.                                    </u>	
	statement - see instructions.)  N/A	2b		<u> </u>
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	<u> </u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No	١		
L	during the year?  If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after			
O	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	·		
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,	1		
	Schedule C, to determine if the foundation had excess business holdings in 2019.)  N/A	3b	_	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X
	Foi	m <b>99</b> 0	)-PF	(2019)

MONSIGNOR RICHARD S. AMICO
MEMORIAL CHARITABLE TRUST MICHAEL A

Form 990-PF (2019) MEMORIAL CHARITABLE TRUST			14-03230	134		Page 6
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be R	equired <sub>(contin</sub>	ued)			
5a During the year, did the foundation pay or incur any amount to:					Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	es X No	ا, -		
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire	ectly,				•
any voter registration drive?		Y	es 🗓 No 🖰			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	?	Y(	es X No			
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section					
4945(d)(4)(A)? See instructions		Ye	es X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f					
the prevention of cruelty to children or animals?		Ye	es X No	, ]		
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify und	· ·	n Regulations				
section 53.4945 or in a current notice regarding disaster assistance? See instru	ctions		N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check h	ere		▶∟			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr						-
expenditure responsibility for the grant?	N	Γ/A Υ	es L No			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).						
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on			l d		
a personal benefit contract?		Ye	es 🗶 No 📙			
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a positive formula of the foundation.	ersonal benefit contract?		L	6b		Х
If "Yes" to 6b, file Form 8870.				, 1		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y(	.s X No	<u>·                                     </u>		٠,
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or			'		
excess parachute payment(s) during the year?			es X No			
iPart VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	es, Foundation Mar	nagers, Highly				
1 List all officers, directors, trustees, and foundation managers and th	•	(c) Compensation	(d) Contributions to	$\overline{}$	(-) [\n	0000
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	a	(e) Exp ccount,	other
	to position	`enter -0-)	compensation	┼	allowa	nces
				1		
SEE STATEMENT 7		0.	0.			0.
SEE STATEMENT /		· ·	· ·	+-	-	0.
				1		
				+		
				+		
2 Compensation of five highest-paid employees (other than those incl	uded on line 1). If none.	enter "NONE."	l .			
	(b) Title and average	1	(d) Contributions to	T	(e) Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	l a	ccount, allowa	
NONE	devoted to position		Compensation	+-	anowa	11003
110112						
				+	<u> </u>	
		<del> </del>	-	+		
			-	+		
				+-		
Total number of other employees paid over \$50,000	<u> </u>		<b></b>			0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	<u>1-63250</u>	154 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
<del></del>		
Total number of others receiving over \$50,000 for professional services	<b>•</b>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		xpenses
1 N/A		
	4	
2		
	$\dashv$	
	<u> </u>	
3	_	
4		
	_	
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		-
	_	
2	_	
All other program-related investments. See instructions.		
3	$\dashv$	
	$\dashv$	
	$\dashv$	
Total. Add lines 1 through 3	<b>-</b>	0.

Form 990-PF (2019)

[Part-X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 1,110,658. a Average monthly fair market value of securities 1a 34,838. b Average of monthly cash balances 1b c Fair market value of all other assets 10 1,145,496. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 145,496. Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 17,182.4 1,128,314. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 Minimum investment return. Enter 5% of line 5 56,416. [PartiXII Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here  $\blacktriangleright$  and do not complete this part.) 56,416. Minimum investment return from Part X, line 6 225 Tax on investment income for 2019 from Part VI, line 5 Income tax for 2019. (This does not include the tax from Part VI) 2b 225. c Add lines 2a and 2b 2ε 56.191. Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions Δ 56,191. Add lines 3 and 4 5 5 Deduction from distributable amount (see instructions) 56,191. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 [Part XII] Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes. 151,000. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3а b Cash distribution test (attach the required schedule) 3Ь 151.000. Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 225. income Enter 1% of Part I, line 27b 150, Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form 990-PF (2019)

4940(e) reduction of tax in those years.

#### MONSIGNOR RICHARD S. AMICO MEMORIAL CHARITABLE TRUST MICHAEL A. ERV

Form 990-PF (2019)

Part XIII Undistributed Income (see instructions)

Page 9

(d) (a) (b) (c) Corpus Years prior to 2018 2018 2019 1 Distributable amount for 2019 from Part XI, 56,191. 2 Undistributed income, if any, as of the end of 2019 0. a Enter amount for 2018 only b Total for prior years: 0. 3 Excess distributions carryover, if any, to 2019: 57,814. a From 2014 59,479. **b** From 2015 72,765. 107,027. c From 2016 d From 2017 89,019. e From 2018 f Total of lines 3a through e 386,104. 4 Qualifying distributions for 2019 from 151,000. Part XII, line 4: ► \$ 0 a Applied to 2018, but not more than line 2a b Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 56,191d Applied to 2019 distributable amount 94,809. e Remaining amount distributed out of corpus Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a)) 0. 0. 6 Enter the net total of each column as indicated below: 480,913. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0. 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 0. assessed d Subtract line 6c from line 6b. Taxable 0. amount - see instructions e Undistributed income for 2018 Subtract line 0. 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must 0. 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 0. may be required - see instructions) 8 Excess distributions carryover from 2014 57,814. not applied on line 5 or line 7 9 Excess distributions carryover to 2020 423,099. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 <u>59,4</u>79 a Excess from 2015 72,765. b Excess from 2016 107,027.c Excess from 2017 89,019. d Excess from 2018 94,809. e Excess from 2019

Form 990-PF (2019) MEMORIAL [Part-XIV] Private Operating Fo	L CHARTTABLE	E TRUST MIC.	A guestion 9)	N/A	25054 Page 10
			-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for			· · · · · · · · · · · · · · · · · · ·	1 4040(3)(2) == 1 4(	
<b>b</b> Check box to indicate whether the foundation		ig toundation described i		1942(j)(3) or1	)12(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 2018	Prior 3 years (c) 2017	(d) 2016	/o) Total
income from Part I or the minimum	(a) 2019	(0) 2010	(6) 2017	(0) 2010	(e) Total
investment return from Part X for	_			1	
each year listed		<u> </u>			
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4, for each year listed				//_	
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly		· ·	\ /	1	
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter;					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter	,				
2/3 of minimum investment return					İ
shown in Part X, line 6, for each year listed					
c "Support" alternative test - enter:		/			
(1) Total support other than gross		1			
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)				`	<b>\</b>
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from				<del></del>	
an exempt organization					
(4) Gross investment income				-	
Part:XV Supplementary Infor	mation (Comple	te this part only i	f the foundation	had \$5.000 or mo	re in assets
at any time during th				40,000 01 1110	\
		<del>'</del>	<del></del>	<del></del>	
<ul> <li>Information Regarding Foundation</li> <li>List any managers of the foundation who</li> </ul>	-	than 20% of the total cont	shutions received by the	foundation before the close	a of any tay
year (but only if they have contributed m			ibutions received by the	Todiloation before the clos	c or any tax
NONE	• , , , ,	( // //			
	a our 109/ or mars of th	a atank of a parapration i	or an aqually large party	an of the aumerchie of a pr	ertnorchin or
<ul> <li>b List any managers of the foundation who other entity) of which the foundation has</li> </ul>			or an equally large portion	on or the ownership or a pa	ii tilei 2111b Oi
NONE	g				
		Calcalanabia ata Da			
2 Information Regarding Contribution Check here ► X if the foundation or				not accept uppeliaited requ	acta for funda. If
the foundation makes gifts, grants, etc., t					ests for fullus, if
	<del></del>			<del></del>	
a The name, address, and telephone numb	er or email address of th	e person to wnom applic	ations should be address	sed:	
· · · · · · · · · · · · · · · · · · ·					
<b>b</b> The form in which applications should be	a submitted and informat	tion and materials they si	noula include		
c Any submission deadlines:					
					<u> </u>
d Any restrictions or limitations on awards	, such as by geographica	al areas, charitable fields,	kınds of institutions, or	other factors:	

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of recipient Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year PUBLIC CHAR BUFFALO CITY MISSION NONE ASSISTANCE WITH CENTER'S COSTS 100 E. TUPPER STREET 5,000. BUFFALO, NY 14203 NONE CATHOLIC CENTRAL HELPING HANDS FOOD PUBIC CHAR ASSISTANCE WITH SCHOOL'S COSTS PANTRY 317 LEROY AVE BUFFALO, NY 14214 5,000. CATHOLIC CHARITIES OF BUFFALO NONE PUBIC CHAR ASSISTANCE WITH THE 20 HERKIMER STREET PROGRAM'S COSTS BUFFALO, NY 14213 5,000. FAMILY PROMISE OF WNY NONE PUBIC CHAR ASSISTANCE WITH CENTER'S COSTS 75 HICKORY ST 5,000. BUFFALO, NY 14204 ASSISTANCE WITH CTAP SCHOLARSHIP - BUFFALO DIOCESE NONE PUBIC CHAR FOUNDATION OF THE ROMAN CATHOLIC CENTER'S COSTS 795 MAIN STREET BUFFALO, NY 14203 5,000. SEE CONTINUATION SHEET(S) **▶** 3a 151,000. Total **b** Approved for future payment NONE ٥. Total

#### MONSIGNOR RICHARD S. AMICO MEMORIAL CHARITABLE TRUST MICHAEL A. ERV

14-6325054 Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient NONE PUBIC CHAR ASSISTANCE WITH FRANCIS CENTER CENTER'S COSTS 1301 FERRY ST. NIAGARA FALLS, NY 14301 5,000. ASSISTANCE WITH HARVEST HOUSE NONE PUBLIC CHAR 1782 SENECA ST. CENTER'S COST BUFFALO, NY 14210 5,000. NONE PUBLIC CHAR. ASSISTANCE WITH HEART, LOVE AND SOUL, INC 939 ONTARIO AVENUE CENTER'S COSTS 10,000. NIAGARA FALLS, NY 14305 HOLY CROSS CHURCH NONE PUBIC CHAR ASSISTANCE WITH 345 7TH STREET COLLEGE'S COSTS 5,000. BUFFALO, NY 14201 KEVIN GUEST HOUSE NONE PUBLIC CHAR ASSISTANCE WITH 100 E. TUPPER STREET CENTER'S COST 5,000. BUFFALO, NY 14203 PUBLIC CHAR ASSISTANCE WITH LITTLE PORTION FRIARY NONE CENTER'S COSTS P.O. BOX 891 5,000. BUFFALO, NY 14209 NATIVITY MIGUEL MIDDLE SCHOOL OF NONE PUBLIC CHAR ASSISTANCE WITH SCHOOL'S COSTS BUFFALO 21 DAVIDSON AVE BUFFALO, NY 14215 10,000. PEACEPRINTS PRISON MINIST NONE PUBLIC CHAR ASSISTANCE WITH 102 SEYMOUR STREET CENTER'S COSTS 5,000. BUFFALO, NY 14210 RESPONSE TO LOVE NONE PUBIC CHAR ASSISTANCE WITH 130 KOSCIUSZKO ST. CENTER'S COSTS 5,000. BUFFALO, NY 14212 ASSISTANCE WITH RETIREMENT FUND FOR RELIGIOUS NONE PUBLIC CHAR 795 MAIN STREET CENTER'S COSTS

10,000.

126,000.

BUFFALO, NY 14203

Total from continuation sheets

MONSIGNOR RICHARD S. AMICO 14-6325054 MEMORIAL CHARITABLE TRUST MICHAEL A. ERV Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient SISTERS OF SOCIAL SERVICE NONE PUBLIC CHAR ASSISTANCE WITH 4316 LANAI RD. CENTER'S COSTS ENCINO, CA 91436 5,000.

SOCIETY OF ST. VINCENT DE PAUL-NATIVITY	NONE	PUBIC CHAR	ASSISTANCE WITH THE CENTER'S COSTS	
170 HILLVIEW DR. CLARENCE, NY 14031				5,000.
ST. LAWRENCE FOOD PANTRY 1520 DELAVAN AVE. BUFFALO, NY 14215	NONE	PUBIC CHAR	ASSISTANCE WITH THE CENTER'S COSTS	5,000.
ST. LUKE'S MISSION OF MER P.O.BOX 448 BUFFALO, NY 14215	NONE	PUBLIC CHAR	ASSISTANCE WITH CENTER'S COSTS	5,000.
THE BISON SCHOLARSHIP PO BOX 1134 BUFFALO, NY 14205	NONE	PUBLIC CHAR	ASSISTANCE WITH CENTER'S COSTS	5,000.
THE MAGDELENE PROJECT 301-317 19TH STREET NIAGARA FALLS, NY 14303	NONE	PUBIC CHAR	ASSISTANCE WITH	3,000.
TRY PROGRAM 228 BRINKMAN AVE. BUFFALO, NY 14211	NONE	PUBLIC CHAR	ASSISTANCE WITH	5,000.
VILLA MARIA COLLEGE 240 PINE RIDGE RD. BUFFALO, NY 14225	NONE	PUBLIC CHAR	ASSISTANCE WITH	5,000.
WEST SIDE COMM SVCS INC 161 VERMONT ST BUFFALO, NY 14213	NONE	PUBIC CHAR	ASSISTANCE WITH	3,000.
PLYMOUTH CROSSROADS 5522 BROADWAY LANCASTER, NY 14086	NONE	PUBIC CHAR	ASSISTANCE WITH	5,000.
Total from continuation sheets				

# MONSIGNOR RICHARD S. AMICO MEMORIAL CHARITABLE TRUST MICHAEL A. ERV 14-6325054

Part XV Supplementary Information 3 Grants and Contributions Paid During the N		<del></del> -	<del></del>	I
Recipient		Enundation	Durage of great or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ERIE REGIONAL HOUSING & DEVELOPMENT	NONE	PUBLIC CHAR	ASSISTANCE WITH	
THE BELLA CENTER			CENTER'S COSTS	
LO4 MARYLAND				40.00
BUFFALO, NY 14201				10,000
JERICHO ROAD COMMUNITY HEALTH CENTER	NONE	PUBIC CHAR	ASSISTANCE WITH	
L84 BARTON STREET			CENTER'S COSTS	
BUFFALO, NY 14213				5,000
				,,,,,,
		`		
		ļ		
Total from continuation sheets				

Form 990-PF (2019)

**Analysis of Income-Producing Activities** Part XVI-A

Enter gross amounts unless otherwise indicated.		d business income	Exclude	ed by section 512, 513, or 514	(e)
1 Program service revenue.	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
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			14	3.	
4 Dividends and interest from securities			14	21,773.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property			1	-	·
b Not debt-financed property			+ +		
6 Net rental income or (loss) from personal			+		
property	<del></del>		<del></del>		
7 Other investment income	-		++		
8 Gain or (loss) from sales of assets other			14	16 700	
than inventory	-		<del>-  + * </del>	16,780.	
9 Net income or (loss) from special events		<del></del>			
10 Gross profit or (loss) from sales of inventory			+ +		
11 Other revenue			1 1		
a					<del></del>
b			+		
C					
d	.		+-+		
e	-			22.556	
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0	<u> </u>	38,556.	
13 Total. Add line 12, columns (b), (d), and (e)				13	38,556.
(See worksheet in line 13 instructions to verify calculations.)	_				
Part XVI-B Relationship of Activities	to the Acco	mplishment of Ex	kempt F	Purposes	
Line No. Explain below how each activity for which inc					Ishment of
the foundation's exempt purposes (other than			71 00mm bu	nod importantly to the decomp	
	<u> </u>	<u> </u>			
		<u>. –                                     </u>			
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Form 990-PF (2019) MEMORIAL CHARITABLE TRUST MICHAEL A. ERV 14-6325054 Page 13
Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

•	Did the or	reconstrue directly or indir	ectly engage in any of the followin	a with any other erganization	n docerihad in caetu	on 501/c)		Yes	No
1		•	izations) or in section 527, relating		n described in section	JII 30 I(G)		-	
_									
a			ition to a noncharitable exempt org	ganization of:			4-(4)		$\frac{1}{X}$
	(1) Cash						1a(1)		X
	(2) Other						1a(2)		-
Ь	Other tran		_						<del></del>
		s of assets to a noncharitat					1b(1)		X
	(2) Purch	hases of assets from a nor	ncharitable exempt organization				1b(2)		X
	(3) Renta	al of facilities, equipment, o	or other assets				1b(3)		X
	(4) Reim	bursement arrangements					1b(4)		X
	(5) Loans	s or Ioan guarantees					1b(5)		X
	(6) Perfo	ormance of services or mei	mbership or fundraising solicitatio	ns			1b(6)		X
C	Sharing o	f facilities, equipment, mai	ling lists, other assets, or paid em	ployees			1c		Х
d		•	"Yes," complete the following sche	· ·	-			ets,	
	or service	s given by the reporting fo	oundation. If the foundation receive	ed less than fair market value	e in any transaction	or sharing arrangement, sho	w in		
	column (c	d) the value of the goods, (	other assets, or services received.						
a)L	ine no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description	of transfers, transactions, and sha	aring arr	angemen	ts
			N/A						
				***					
							İ		
		-							
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2a		•	lly affiliated with, or related to, one	or more tax-exempt organiz	ations described		٦,,,,	Γ <del>υ</del>	٦.,,
		` ' '	n 501(c)(3)) or in section 527?				_ Yes	اح.	No
b	If "Yes," co	omplete the following sche		T (h) Time of avanganton		(-) Description of relationship			
		(a) Name of org	anization	(b) Type of organization		(c) Description of relationship	þ		
		N/A							
						<del>-</del> -			
			hat I have examined this return, including iplete. Declaration of Asparer (other than					discuss t	
	gn	191 / 1 / 1		1 5/20/20	1 Treel	, ideas		e prepar ? See ins	
He	re			\$ / 40/10	- I have	<u> </u>	Yes	; <u> </u>	J No
	Sıgı	nature of officer or trustee		Date /	Title				
		Print/Type preparer's na	me Preparer's s	ignature	Date	Check If PTIN			
		LYNN T.	$\downarrow$			self- employed			
Pa	id	DOMACHOWSK	I, CPA LYNN T	. DOMACHOWS	05/20/20	P00	561	076	
Pr	eparer		NCONI SEGARRA &		LLP	Firm's EIN ▶ 04-37	288	17	
Us	e Only								
	•	Firm's address ▶ 83	21 MAIN STREET						
			LLIAMSVILLE, NY	14221		Phone no. (716)	633	-13	73
									/2019\

FORM 990-PF	TAX	ES	Si	PATEMENT 1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
STATE TAX FOREIGN TAXES FEDERAL TAX	275. 824. 1,439.		0. 0. 0.	0. 0. 0.
TO FORM 990-PF, PG 1, LN 18	2,538.	2,538.	0.	0.
FORM 990-PF	OTHER E	XPENSES	Si	гатемент 2
FORM 990-PF DESCRIPTION	OTHER E  (A)  EXPENSES PER BOOKS	XPENSES  (B)  NET INVEST-  MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
	(A) EXPENSES	(B) NET INVEST- MENT INCOME  1,850. 7,588. 152.	(C) ADJUSTED	(D) CHARITABLE

ORM 990-PF CORPORATE STOCK			STATEMENT 3
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
MUTUAL FUNDS-SEE ATTACHED SCHEDUL	953,198.	1,043,895.	
TOTAL TO FORM 990-PF, PART II, LI	953,198. 1,043,		
FORM 990-PF	OTHER ASSETS		STATEMENT 4
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
COST BASIS ADJUSTMENT	0.	15,508.	15,508.
TO FORM 990-PF, PART II, LINE 15	0.	15,508.	15,508.

MONSIGNOR	RTCHARD	S.	AMTCO	MEMORTAL	CHAR
TIONDION		$\sim$	111100	TITITION	~11111

14-6325054	1	4 -	-6	3	2	5	0	5	4
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FORM 990-PF OTHER LIABILITIES			STATEMENT 5	
DESCRIPTION		BOY AMOUNT	EOY AMOUNT	
COST BASIS ADJUSTMENT	-	20,259.	0.	
TOTAL TO FORM 990-PF, PART II,	LINE 22	20,259.	0.	

	BSTANTIAL CONTRIBUTORS VII-A, LINE 10	STATEMENT 6		
NAME OF CONTRIBUTOR	ADDRESS			
ESTATE OF MSGR. RICHARD AMICO	6304 EVERWOOD COURT EAST AMHERST, NY 14051			

21 one 1

FORM 990-PF PART VIII - TRUSTEES	STATEMENT 7			
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
CHERYL ARENA 231 RICHMOND AVE. #14 BUFFALO, NY 14222	CO-TRUSTEE 1.00	0.	0.	0.
MICHAEL A ERVOLINA , JR 6304 EVERWOOD COURT EAST AMHERST, NY 14051	CO-TRUSTEE 1.00	0.	′ 0.	0.
RICHARD C ARENA 506 DELAWARE AVE. 1F BUFFALO, NY 14202	CO-TRUSTEE 1.00	0.	0.	0.
PATRICIA TUFILLARO 153 BRAMBLE COURT WILLIAMSVILLE, NY 14221	CO-TRUSTEE 1.00	0.	0.	0.
JOAN ESS 40 OAKGROVE DRIVE WILLIAMSVILLE, NY 14221	CO-TRUSTEE 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	GE 6, PART VIII	0.	0.	0.