Form, 990-PF

Internal Revenue Service

**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.

2019

| Fo               | r c      | alen     | dar year 2019 or tax year beginning  |   | , and ending                          |  | ·····  |
|------------------|----------|----------|--|---|---------------------------------------|--|--|
|                  | lam      | ne of    | foundation   | •   |                                       | A Employer identification  | number                                       |
|                  | Τŀ       | ΙE       | HYDE FAMILY CHARITABLE   | FUND  |                                       |  |  |
|                  | C,       | 0        | THOMAS R. HYDE   | 16-1502229                                      |                                       |  |  |
| N                | lumt     | ber a    | nd street (or P O box number if mail is not delivered to street  | address)  | Room/suite                            | <b>B</b> Telephone number  |  |
|                  | 1(       | 9        | CHAPIN PARKWAY   |   |                                       | 716-848-13   | 58 ·   |
|                  |          |          | own, state or province, country, and ZIP or foreign  | postal code                                     |                                       | C If exemption application is pe   | ending, check here                           |
| _                |          |          | FALO, NY 14209   |   |                                       | <u>.</u>   |  |
| G                | Cł       | neck     | all that apply:  | _   | ormer public charity                  | D 1. Foreign organizations   | s, check here                                |
|                  |          |          | Final return   | Amended return                                  |                                       | Foreign organizations me<br>check here and attach co   | eting the 85% test,                          |
| · —              |          |          | Address change   | Name change                                     |                                       | check here and attach co   | mputation                                    |
| / H<br>/ T       | Cr       |          | type of organization: X Section 501(c)(3) e  |   | 04                                    | E If private foundation sta  |  |
| t 上              | <u> </u> |          | ction 4947(a)(1) nonexempt charitable trust  | Other taxable private foundaring method: X Cash | Accrual                               | under section 507(b)(1)  | •  |
|                  |          |          | · 1 —  | -   | Accidal                               | F if the foundation is in a  |  |
|                  | (ird     |          | Part II, col. (c), line 16) (Part I, colu  | Other (specify)<br>mn (d) must be on cash bas   | us )                                  | under section 507(b)(1)  | (b), check here                              |
| Ϋ́C              |          |          | Analysis of Revenue and Expenses   |   |                                       | (a) Advicted not   | (d) Disbursements                            |
| 34.              | <u>;</u> | 362.     | (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              | (b) Net investment income             | (c) Adjusted net income  | for charitable purposes<br>(cash basis only) |
| _                | Т        | 1        | Contributions, gifts, grants, etc., received   | <u> </u>  |                                       | N/A  |  |
|                  |          | -        | Check X if the foundation is not required to attach Sch. B   |   |                                       |  |  |
| _                | 1        | 3        | Interest on savings and temporary cash investments   | 36,731.   | 36,731.                               | A STATE OF THE PARTY OF THE PAR | STATEMENT 1                                  |
| 2020             | 1        | 4        | Dividends and interest from securities   | 71,562.   | 71,562.                               |  | STATEMENT 2                                  |
|                  | 1        | 5a       | Gross rents  |   |                                       |  |  |
| ಯ                | 1        |          | Net rental income or (loss)  |   |                                       |  |  |
| 0                | 1        | 6a       | Net gain or (loss) from sale of assets not on line 10  | 161,281.  |                                       |  |  |
| NO.              | JE       | b        | Gross sales price for all assets on line 6a 1,065,329.   |   |                                       | RE   | OF WILL                                      |
| Z                | š        | 7        | Capital gain net income (from Part IV, line 2)   |   | 161,281.                              | E AND A SECURE OF THE PERSON   | PEINED N                                     |
|                  | ڇ        | 8        | Net short-term capital gain  |   |                                       |  |  |
| لِيا             | 1        | 9        | Income modifications   |   |                                       | <u> </u>   | <b>29</b> 2020 9                             |
| SCANNED          | 1        | 10 a     | Gross sales less returns and allowances  |   |                                       |  |  |
| W.               | 1        | b        | Less Cost of goods sold  |   |                                       | With US  | DENJUT                                       |
| No.              | 1        | C        | Gross profit or (loss)   |   |                                       | , , , , , , , , , , , , , , , , , , ,  |  |
|                  | 1        | 11       | Other income   | 0.60 5.74                                       | 060 554                               |  |  |
| _                | 4        | 12       | Total. Add lines 1 through 11  | 269,574.  | 269,574.                              |  |  |
|                  | -        | 13       | Compensation of officers, directors, trustees, etc   | 0.  | 0.                                    | <u> </u>   | . 0.   |
|                  | - 1      | 14       | Other employee salaries and wages  |   | _                                     | <del> </del>   |  |
|                  |          |          | Pension plans, employee benefits   |   |                                       | 1  | , .  |
|                  | Ses      |          | Legal fees Accounting fees STMT 3  | 2,500.  | 1,250.                                | -  | 1,250.                                       |
|                  | Ber      |          | 3  | 2,300.  | 1,230.                                |  | 1,230.                                       |
|                  | ŭ        |          | Other professional fees  |   |                                       |  |  |
| -                | ≥:       |          | Interest STMT 4  | 17,800.   | 0.                                    |  | 0.   |
| $\approx$        | -        | 18<br>19 | Depreciation and depletion   | 17,000.   |                                       |  |  |
| 20 20            |          | 20       | Occupancy  |   |                                       |  | ***************************************      |
| <del>}</del> %   | 뒦        | 20<br>21 | Travel, conferences, and meetings  |   |                                       |  |  |
| 5 <del>₹</del> ` |          | 22       | Printing and publications  |   | · · · · · · · · · · · · · · · · · · · | ,  | ·  |
| 30 Received in   | രി       | 22<br>23 | Other expenses STMT 5  | 31,718.   | 31,718.                               | ·  | 0.   |
| 5 -              | □        | 24       | Total operating and administrative   | ,   | ·                                     |  |  |
| •                | :4       |          | expenses Add lines 13 through 23   | 52,018.   | 32,968.                               | ·  | 1,250.                                       |
| ŕ                |          | 25       | Contributions, gifts, grants paid  | 253,600.  |                                       |  | 1,250.<br>253,600.                           |
|                  |          | 26       | Total expenses and disbursements.  |   |                                       |  |  |
| >-               | _[       | _        | Add lines 24 and 25  | 305,618.  | 32,968.                               |  | 254,850.                                     |
| SEP + / 7037     | 1        | 27       | Subtract line 26 from line 12:   |   |                                       |  |  |
| <b>-</b>         |          | a        | Excess of revenue over expenses and disbursements  | <36,044.>                                       |                                       |  |  |
|                  |          | b        | Net investment income (if negative, enter -0-)   |   | 236,606.                              |  |  |
|                  |          | C        | Adjusted net income (if negative, enter -0-)   |   |                                       | N/A  |  |

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16-1502229 C/O THOMAS R. HYDE Form 990-PF (2019) Partil Balance Sheets Allached schedules and amounts in the description Beginning of year End of year column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 200,893. 82,168. 82,168 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 374,515. 10a Investments - U.S. and state government obligations STMT 99,582. 375,643 3,281,233. 3,138,733. 5,683,405. STMT 7 b Investments - corporate stock 1,056,535. 1,006,783. 1,021,054. STMT 8 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 ▶ 16 Total assets (to be completed by all filers - see the 4,602,199. 4,638,243. 7,162,270 instructions. Also, see page 1, item I) Accounts payable and accrued expenses 17 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. 24 Net assets without donor restrictions 25 Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check here 🕨 🔀 Fund and complete lines 26 through 30. 1,803,710. 1,803,710. 26 Capital stock, trust principal, or current funds 27 Paid-in or capital surplus, or land, bldg., and equipment fund 2,834,533. 2.798.489. 28 Retained earnings, accumulated income, endowment, or other funds 4,602,199. 4,638,243. 29 Total net assets or fund balances Net 4,602,199 4,638,243 30 Total liabilities and net assets/fund balances Partill Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 4,638,243. (must agree with end-of-year figure reported on prior year's return) <36,044.> 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 4 0. Decreases not included in line 2 (itemize)

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

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Page 3

| Part IV Capital Gains ar   | nd Losses for Tax on In  | vestment                               | Income                               |               |                                     |                     |                                 |                                       |  |
|--|--|--|--------------------------------------|---------------|-------------------------------------|---------------------|---------------------------------|---------------------------------------|--|
|  | ne kınd(s) of property sold (for exame<br>ehouse; or common stock, 200 shs |  | te,                                  | ( <b>b)</b> H | ow acquired<br>Purchase<br>Donation | (c) Date<br>(mo., c | acquired<br>day, yr.)           | (d) Date sold<br>(mo., day, yr.)      |  |
| 1a PUBLICLY TRADED   | SECURITIES   |  |                                      |               | P                                   |                     |                                 |                                       |  |
| <u>b</u>   |  |  |                                      | <u> </u>      |                                     |                     |                                 |                                       |  |
|  |  |  |                                      |               |                                     |                     |                                 |                                       |  |
| _d   |  |  |                                      | -             |                                     |                     |                                 |                                       |  |
| <u>e</u>   |  | 1                                      |                                      | ١             |                                     |                     |                                 | <u> </u>                              |  |
| (e) Gross sales price  | (f) Depreciation allowed (or allowable)                                    |  | st or other basis<br>expense of sale |               | <u></u>                             |                     | Sain or (loss)<br>s (f) minus ( | (g))                                  |  |
| a 1,065,329.   |  |  | 904,04                               | 8.            | <del></del>                         |                     |                                 | 161,281.                              |  |
| <u>b</u>   |  |  |                                      |               |                                     |                     |                                 |                                       |  |
| <u> </u>   |  |  |                                      |               | <u> </u>                            |                     |                                 |                                       |  |
| d  |  |  |                                      | +             |                                     |                     |                                 |                                       |  |
| Complete only for assets showing   | gain in column (h) and owned by t  | he foundation                          | on 12/31/69                          | -             |                                     | II) Gaine //        | Col. (b) goin                   | minus                                 |  |
| Complete only for assets showing   |  | I                                      |                                      | $\dashv$      |                                     |                     | Col. (h) gain<br>not less thar  |                                       |  |
| (i) FMV as of 12/31/69   | (J) Adjusted basis<br>as of 12/31/69                                       |  | cess of col. (i)                     |               |                                     |                     | (from col. (                    | h)) ´                                 |  |
| a  |  |  |                                      |               | ···                                 |                     |                                 | 161,281.                              |  |
| b  |  |  |                                      | _             |                                     |                     |                                 |                                       |  |
| C  |  |  | <del></del>                          |               |                                     |                     |                                 |                                       |  |
| d  |  | <del></del>                            |                                      | -             |                                     |                     |                                 |                                       |  |
| <u>e</u>   |  |  |                                      | $\overline{}$ |                                     |                     |                                 | · · · · · · · · · · · · · · · · · · · |  |
| 2 Capital gain net income or (net capi   | If gain, also enter $\{f(loss), enter -0\}$                                | r in Part I, line<br>- in Part I, line | 7<br>7                               | }             | 2                                   |                     | ····                            | 161,281.                              |  |
| 3 Net short-term capital gain or (loss)  | ) as defined in sections 1222(5) an  | id (6):                                |                                      |               |                                     |                     |                                 |                                       |  |
| If gain, also enter in Part I, line 8, co  | olumn (c).   |  |                                      |               |                                     |                     | /-                              |                                       |  |
| If (loss), enter -0- in Part I, line 8   | der Section 4940(e) for  | Daduand                                | Toy on Not 1                         | 1             | 3                                   | <u> </u>            | N/A                             |                                       |  |
|  |  |  |                                      |               |                                     | OHIE                |                                 |                                       |  |
| (For optional use by domestic private for  | oundations subject to the section 4  | 1940(a) tax on                         | net investment inc                   | come.)        |                                     |                     |                                 |                                       |  |
| If section 4940(d)(2) applies, leave this  | s part blank.  |  |                                      |               |                                     |                     |                                 |                                       |  |
|  |  |  |                                      | 40            |                                     |                     |                                 | Yes X No                              |  |
| Was the foundation liable for the section<br>If "Yes," the foundation doesn't qualify it |  |  | •                                    | 1007          |                                     |                     |                                 | Yes _A_ No                            |  |
| 1 Enter the appropriate amount in each   |  |  |                                      | ntries.       | <u></u>                             |                     |                                 | <del></del>                           |  |
| (a)  |  |  | or o making any on                   | (c)           |                                     |                     |                                 | (d)<br>oution ratio                   |  |
| Base periód years<br>Calendar year (or tax year beginning                                | (b)<br>Adjusted qualifying dis   | tributions                             | Net value of no                      |               | table-use assets                    | ;                   | Distrib                         | oùtión ratio<br>rided by col. (c))    |  |
| 2018   | 7  | 9,724.                                 | _                                    | 6.            | 260,251                             |                     | (001: (0) 014                   | .012735                               |  |
| 2017   | 31   | 2,568.                                 |                                      |               | 669,280                             |                     |                                 | .055134                               |  |
| 2016   |  | 4,900.                                 |                                      |               | 180,783                             |                     |                                 | .020248                               |  |
| 2015   |  | 7,732.                                 |                                      |               | 281,856                             |                     |                                 | .026076                               |  |
| 2014   |  | 4,916.                                 |                                      |               | 195,711                             |                     |                                 | .058686                               |  |
|  |  | · <del></del> -                        |                                      | -             |                                     |                     |                                 |                                       |  |
| 2 Total of line 1, column (d)  |  |  |                                      |               |                                     | 2                   | İ                               | .172879                               |  |
| 3 Average distribution ratio for the 5-  | year base period - divide the total of                                     | on line 2 by 5.0                       | ), or by the numbe                   | er of ye      | ars                                 |                     |                                 |                                       |  |
| the foundation has been in existence   |  | ·                                      |                                      | •             |                                     | 3                   |                                 | .034576                               |  |
|  | •  |  |                                      |               |                                     |                     |                                 |                                       |  |
| 4 Enter the net value of noncharitable   | -use assets for 2019 from Part X, I  | ine 5                                  |                                      |               |                                     | 4                   |                                 | 6,758,218.                            |  |
|  |  |  |                                      |               |                                     |                     |                                 |                                       |  |
| 5 Multiply line 4 by line 3  |  |  |                                      |               |                                     | 5                   |                                 | 233,672.                              |  |
|  |  |  |                                      |               |                                     |                     |                                 | 0 266                                 |  |
| 6 Enter 1% of net investment income  | (1% of Part I, line 27b)   |  |                                      |               |                                     | 6                   |                                 | 2,366.                                |  |
|  |  |  |                                      |               |                                     |                     |                                 | 226 220                               |  |
| 7 Add lines 5 and 6  |  |  |                                      |               |                                     |                     |                                 | 7 4 to 11 4 M                         |  |
|  |  |  |                                      |               |                                     | 7                   |                                 | 236,038.                              |  |
| 8 Enter qualifying distributions from F  | Part XII, line 4   |  |                                      |               |                                     | 8                   |                                 | 254,850.                              |  |

| THE HYDE FAMILY CHARITABLE I   | rund 3                         |             |                   | •            |
|--|--------------------------------|-------------|-------------------|--------------|
| Form 990-PF (2019) C/O THOMAS R. HYDE  |                                |             | -1502229.         | Page 4       |
| Part VI Excise Tax Based on Investment Income (Section 4                               | i940(a), 4940(b), 4940(e       | e), or 4948 | - see instruction | ons)         |
| 1a Exempt operating foundations described in section 4940(d)(2), check here            | and enter "N/A" on line 1.     | )           |                   |              |
| Date of ruling or determination letter: (attach copy of letter                         | if necessary-see instructions) |             |                   |              |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check her | e 🕨 🗓 and enter 1%             | <u> </u>    | . 2,              | <u>,366.</u> |

| 1a  | Exempt operating foundations described in section 4940(d)(2), check here \[ \bigsquare \bigsquare \bigsquare \bigsquare \limits \limits \limits \limits \text{and enter "N/A" on line 1.} |  |         |
|-----|---|--|---------|
|     | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)   | ************************************** |         |
| b   | Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%  | 1_                                     | 2,366.  |
|     | of Part I, line 27b   |  |         |
| C   | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)  |  |         |
| 2   | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)  | 2                                      | . 0.    |
| 3   | Add lines 1 and 2 '   | 3                                      | 2,366.  |
| 4   | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)  | 4                                      | ; 0.    |
|     | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-   | 5                                      | 2,366.  |
| 6   | Credits/Payments:   |  |         |
| a   | 2019 estimated tax payments and 2018 overpayment credited to 2019 6a . 11,161.  |  |         |
| b   | Exempt foreign organizations - tax withheld at source 6b 0.   |  |         |
| , c | Tax paid with application for extension of time to file (Form 8868) 6c 6.   |  |         |
| ď   | Backup withholding erroneously withheld 6d 0.   |  |         |
| 7 . | Total credits and payments. Add lines 6a through 6d   | 7                                      | 11,161. |
|     | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached  | 8                                      | . 0.    |
|     | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed   | 9                                      |         |
|     | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid   | 10'                                    | 8,795.  |
| 11  | Enter the amount of line 10 to be: Credited to 2020 estimated tax   | 11                                     | 0.      |
| D'n | ut∜VII™® Statements Regarding Activities  |  | •       |

| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene | ın  |
|--|-----|
| any political campaign?  |     |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the defini   | tıo |
| If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or                 |     |
| distributed by the foundation in connection with the activities.   |     |

c Did the foundation file Form 1120-POL for this year?

| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the | year: |
|--|-------|
|--|-------|

| (1) On the foundation. | . 🗩 🤉    | δ <sub></sub>                  | <ul> <li>(2) Off four</li> </ul> | noation managers.          | <u> р </u>               | <u> </u> |
|------------------------|----------|--------------------------------|----------------------------------|----------------------------|--------------------------|----------|
| Enter the reimburseme  | nt`(ıf a | any) paid by the foundation du | ring the year fo                 | r political expenditure ta | ax imposed on foundation |          |
| managers. > \$         |          | 0.                             | •                                | •                          |                          | •        |

2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.

3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes

4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?

b If "Yes," has it filed a tax return on Form 990-T for this year?

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?

· If "Yes," attach the statement required by General Instruction T '

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:

8a Enter the states to which the foundation reports or with which it is registered. See instructions.

By language in the governing instrument, or

 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?

7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV

| <u>WI</u>          | · · · · · · · · · · · · · · · · · · ·  |                    |
|--------------------|--|--------------------|
| b If the answer is | es" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gene | ral (or designate) |

of each state as required by General Instruction G2 If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If. "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If Yes, attach a schedule listing their names and

Yes No 1b 3 4a N/A

Form **990-PF** (2019)

|        | 990-PF (2019) · C/O THOMAS R. HYDE   | 16             | <u>5-1502</u>   | 2229          |   | Page .            |
|--------|--|----------------|-----------------|---------------|---|-------------------|
| Pá     | int 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 ad           | visory privile | eges?           |               | ·                                       |                   |
|        | If "Yes," attach statement. See instructions   |                |                 | 12            |   | х                 |
| 13     | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?                | ,              |                 | 13            | Х                                       |                   |
| 10     | Website address ► N/A  |                |                 |               |   |                   |
| 1.6    | The books are in care of THOMAS R. HYDE  | one no.        | 716-84          | 8-1           | 358                                     |                   |
| 14     | Located at > 109 CHAPIN PARKWAY, BUFFALO, NY   |                | P+4 <b>\</b> 14 |               |   |                   |
| 45     | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here                                |                | <u> </u>        | 1203          |   | $\overline{\Box}$ |
| 15     |  | <b>.</b>       | 5               | N             | /A                                      |                   |
| 40     | and enter the amount of tax-exempt interest received or accrued during the year  | . —            | <u> </u>        |               | Yes                                     | No                |
| 16     | At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank        | ζ,             |                 | 40            | 103                                     | X                 |
|        | securities, or other financial account in a foreign country?   | ,              |                 | 16            | \$25,25000                              | 788 US            |
|        | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the                   | ••             |                 |               |   |                   |
| ēΩ-    | foreign country  |                |                 | 36666 ·       | 14 × 15 × 15 × 15 × 15 × 15 × 15 × 15 × | 800000            |
| \$1,00 | Statements Regarding Activities for Which Form 4720 May Be Required  |                | •               | - Door 1, 53e |   |                   |
|        | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  |                |                 | 300-2000      | 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?   | Yes            | X No            |               |   |                   |
|        | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  |                |                 |               |   |                   |
|        | a disqualified person?   |                | X No            |               |   |                   |
|        | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?   |                | 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)?  | Yes            | X No            |               |   |                   |
|        | (6) Agree to pay money or property to a government official? (Exception. Check "No"  |                |                 |               |   |                   |
|        | if the foundation agreed to make a grant to or to employ the official for a period after   |                |                 |               |   |                   |
|        | termination of government service, if terminating within 90 days.)   | Yes            | X No            |               |   |                   |
| b      | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations             |                |                 |               |   |                   |
|        | section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions,                                       |                | N/A             | 1b            |   |                   |
|        | Organizations relying on a current notice regarding disaster assistance, check here  |                | ightharpoons    |               |   |                   |
|        | E Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corre      | cted           |                 |               |   |                   |
|        | before the first day of the tax year beginning in 2019?  |                |                 | 1c            |   | X                 |
| 2      | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating four         | ndation        |                 |               |   | \$ <b>3</b>       |
| -      | defined in section 4942(j)(3) or 4942(j)(5)):  |                |                 |               |   |                   |
|        | 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 \(\sigma_{  |                |                 |               |   |                   |
| ~~,    | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to | ncorrect       |                 |               |   |                   |
|        | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" at       |                |                 |               |   |                   |
|        | •  | iu attacii     | N/A             | 2b            |   | 1400000000        |
|        | statement - see instructions.)   |                | 14, 11          | ~~~           | 36.555.64                               | 3.80.80           |
| C      | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.                   |                |                 |               |   |                   |
|        |  |                | •               |               |   |                   |
| 38     | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time                          |                | <b>V</b>        |               |   |                   |
|        | during the year?   |                | X No            |               |   |                   |
| t      | of f"Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified per      |                |                 |               |   |                   |
|        | May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c))             |                | se              |               |   |                   |
|        | 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,          | 37 / 3          |               |   |                   |
|        | Schedule C, to determine if the foundation had excess business holdings in 2019.)  |                | N/A             | 3b            |   | 7.7               |
|        | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                    |                |                 | 4a            | XXXX~VX                                 | X                 |
| t      | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable          | purpose tha    | t               |               |   |                   |
|        | had not been removed from jeonardy before the first day of the tay year beginning in 2019?   |                |                 | I 4h          | · [                                     | X                 |

| Form 89-PF (2019) Extratements Regarding Activities for Which Form 4720 May Be Required Continued to Sa Dump the year, did the foundation by or more any amount to:  (1) Carry or morphisms of the processing of t      | . THE HYDE FAMILY CHARITAB  | LE FUND  |                  |                              |                           |
|---|---|--|------------------|------------------------------|---------------------------|
| Sa During the year, did the foundation by or incur any amount for (1) Carry on prospecing, or other week attempt to influence the outcome of any special public election (see section 4855); or to carry on, directly or indirectly, any voter registration draw?    (3) Provide a grant to an organization other than a charitable, etc., organization described in section 495(5); (7) Provide a grant to an organization other than a charitable, etc., organization described in section 495(5); (7) Provide a grant to an organization other than a charitable, etc., organization described in section 495(5); (7) Provide a grant to an organization other than a charitable, etc., organization described in section 495(5); (7) Provide a grant to an organization other than a charitable, etc., organization described in section 495(5); (7) Provide a grant to an organization of the nation of cruely to office or animals?    (5) Provide for any purpose where than religious, charitable, scentific, lineary, or deducational purposes, or for the prevention of cruely to office or animals?   (6) If the server is "Yes" to gestion 5(4), does the foundations of am extractions or a current notice regarding desselve assessment? See interactions   (7)   |   | -<br>  |                  | 16-15022                     | 229 Page (                |
| (1) Carry on prospagands, or otherwise attempt to effigence legislation (section 4945(s))? (2) Influence the outcome of any specific public electrics (see section 4955); or to carry on, directly, any other regislation drive? (3) Provide a grant to an individual for triavel, study, or other semilar purposes? (4) Provide a grant to an individual for triavel, study, or other semilar purposes? (5) Provide for any purpose other than religious, charitable, etc., organization described in section 4945(c)(4)(A)? See instructions (5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of cutely to children or ammiss?  b) If any instructions (5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of cutely to children or ammiss?  b) If any instructions (5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of cutely to children or ammission or section SA-945 or in a current notice regarding disaster assistance, facts, here  if the prevention of cutely to children or ammission or section SA-945 or in a current notice regarding disaster assistance, facts, here  if the answer is "Yes" to custion SA(4), does the foundation comester for section SA-9445-5(d).  if yes, a tach the slatiment required by Peoplations section SA-9445-5(d).  if yes, a that the slatiment required by Peoplations section SA-9445-5(d).  if yes, a that the slatiment required by Peoplations section SA-9445-5(d).  if yes, a that the slatiment required by Peoplations section SA-9445-5(d).  if yes, a that the slatiment required by Peoplations section SA-9445-5(d).  if yes, a that the slatiment required by Peoplations section SA-9445-5(d).  if yes, a that the slatiment required by Peoplations section SA-9445-5(d).  if yes, a thirty of the constitution, during the year, year peoplations section SA-945-5(d).  if yes, a thirty of the constituti      | Part VII-B Statements Regarding Activities for Which F                    | orm 4720 May Be R                                | equired (contin  | ued)                         |                           |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter segratation driver.  (3) Provide a grant to an individual for fravel, study, or other sendar purposes?  (4) Provide a grant to an individual for fravel, study, or other sendar purposes?  (5) Provide for any purpose other than religious, charitable, etc., organization described in section  4945(c)(4)/47) See mirruction of circle for fulfiance or animals?  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of circle for fulfiance or animals?  5) If any answer is "Vest to \$41(-5), did any of the transactions lad to qualify under the exceptions described in Regulations section \$3.495 (-4), did not responsibility for the grant?  1) For the section of    | 5a During the year, did the foundation pay or incur any amount to:        |  |                  |                              | Yes No                    |
| any voter registration draw?  (3) Provide a grant to an organization devidual for fravel, study, or other similar purposes?  (4) Provide a grant to an organization other than a chanitable, etc., organization described in section  4945(0)(4)(A)? See institutions  (5) Provide to any purpose other than religious, chanitable, scenifile, literary, or educational purposes, or for the provention of circlety to children or ammets?  1) If any arraws et "Set 15 (51)(15) (did any of the transchores fall to quality under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance, such have a first the answer or "Set 15 (51)(15) (did any of the transchores fall to quality under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance, such have a first the answer or "Set 15 (51)(15) (did any of the transchore? See instructions of granications relying on a current notice regarding disaster assistance, such have a first the answer or "Set 15 (51)(15) (did any of the transchore? See instructions of granications relying on a current notice regarding disaster assistance, such have a first the answer or "Set 15 (51)(15) (did any of the transchore see any to receive the foundation of the condent of the section section 33,4945-5(d).  5) If the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes to Sk, the Form 87X,  7) A largy time during the law year, ways the foundation approach to the section 490 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachetic contract?  1) If the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  1) If the foundation during the year, year premiums, directly or indirectly, on a personal benefit contract?  1) If the foundation during the year, year premiums, directly or indirectly, on a personal benefit contract?  1) If the foundation during the transchores  1) If the foundation      | •                                   |  |                  | es 🔼 No 🔓                    |                           |
| (3) Proudes a grant to an individual for fravel, study, or other similar purposes?  (4) Proudes to grant to an organization other than a charitable, etc., organization described in section  445(d)(4)(A)? See instructions  (5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of rurely to other or arismatics.  8) It are any answer is "set to \$45(1)(5), did any of the transactions fall to qually under the exceptions described in Regulations section \$3.495 or in a carrent induce regarding diseaster assistance, check here if the answer is "set to question \$4(4), dose the foundation cliam exemption for time that because it maintained expanditure responsibility for the grant?  If "res," table the statement required by, Regulations section \$3.4945-5(1), 6a by the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "yes to de, the Form 8870.  8) It the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  If "yes," did the foundation guilding the year?  Yes \( \begin{align*} \begin{align*} \text{ No.} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\   | • • •   | or to carry on, directly or indire               |                  | [8]                          |                           |
| (4) Provide a grant to an organization other than a chantable, etc., organization described in section  4945()(4)(A)? See instructions (5) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  If they are served to S4(19), dot any of the transactions fall to qualify under the exceptions described in Regulations section S4(4), dots the foundation capital diseases asserting, check here  If the answer is "Yes" to Question S4(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes" a taken this statement required by Regulations section S4, 4945-5(0).  6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to S6, the Form 870.  7 a Al any time during the tax year, was the foundation or apply to a prohibited tax sheller transaction?  8 Is the foundation subject to the section 4960 tax on paymen(s) of more than \$1,000,000 in remuneration or excess parachite payments) during the year.  9 Information About Officers, Directors, Trustees, Foundation Managers, Highly Pald Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address  1 List all officers, directors, trustees, and foundation managers and their compensation.  (b) Tig, and average hours provided to the section 4960 tax on paymen(s) of more than \$1,000,000 in remuneration or excess parachite payments) during the year.  FRUSTEE  1. List all officers, directors, trustees, and foundation managers and their compensation.  (e) Name and address of excellent payments of the payment payments of the payment payments of the payments of the payment payments of the    | , ,   |  |                  |                              |                           |
| 4945(d)(4)(A) Se instructions  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals?  b If any answer is "Yes" to Sa(1)-(5), do any of the transactions fail to qualify under the exceptions described in Regulations section S.64-(85) or in a current notice regarding diseaster assistance? See instructions Organizations relying on a current notice regarding diseaster assistance, check here  of It the answers in "Yes" to Question Self-(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section S.4945-5(d).  6a Ib did the foundation, during the year, experiments, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes To Bit, the Form 8870.  7a All any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  9 Is the foundation scapetic to the section 4960 bits on payment(s) of more than \$1,000,000 in remuneration or excess paractivite poyment(s) during the year?  1 List all officiers, directors, trustees, and foundation managers and their compensation.  1 List all officiers, directors, trustees, and foundation managers and their compensation.  1 List all officiers, directors, trustees, and foundation managers and their compensation.  1 List all officiers, directors, trustees, and foundation managers and their compensation.  1 List all officiers, directors, trustees, and foundation managers and their compensation.  1 List all officiers, directors, trustees, and foundation managers and their compensation.  1 List all officiers, directors, trustees, and foundation managers and their compensation.  1 List all officiers, directors, trustees, and foundation managers and their compensation.  1 List all officiers, directors, trustees, and foundation managers and their compensation.  1 List all officiers, directors, trustees, and fou     | •                                   |  | Y                | es 🔼 No 🏻                    |                           |
| (6) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  If any answer is "Yes "to 53(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regolations section 53.49.5 or in a current notice regarding desaster assistance? See instructions Organizations religion on current notice regarding diseaster assistance? See instructions Organizations religion on current notice regarding diseaster assistance? See instructions Organizations religion on current notice regarding diseaster assistance? New Proceeds to religion to the fact of the fact of the fact of the septiment of the fact of       | •                                   | n described in section                           |                  | ( <del></del>                |                           |
| the prevention of cruelly to children or animals?  b If any answer is "Yes" to Sat (1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section \$3.4945 or in a current notice regarding dissater assistance? See instructions Organizations relying on a current notice regarding dissater assistance, check here of if the answers "Fee' to question \$54(), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes, a data the statement required by Regulations section \$5.4945-5(d).  6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, the Form \$870.  7 At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  9 If "Yes," did the foundation subject to the section 4960 tax or payment(s) of more than \$1,000,000 in remineration or excess paractule payment(s) during the year?  Part VIII.2  Flant Flant   Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address  (b) Tries, and everage (c) Compensation (c) Co |   |  |                  | es LALINO                    |                           |
| b II ary answer is Yes' to Set (1-1/5), did any of the transactions fall to qualify under the exceptions described in Regulations serving on a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions of the answer is Yes' to question 5x(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the gran? If Yes, attach the statement required by Regulations section \$3.4945.5(q). 6a Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If Yes's took, fireform 870. 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  b If Yes's took fireform 870. 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  b If Yes's took fireform 870. 7a It is you found to the foundation section 4960 fax on payment(s) of more than \$1,000,000 in remuneration or excess parachetic payment(s) during the year?  Part VIII.  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  (a) Name and address  (b) Title, and average (c) Compensation  (b) Title, and average (c) Compensation  (c) Compensation  (d) Compensation  (e) Compensation  (d) Compensation  (e) Compensation  (d) Compensation  (e) Compensation  (d) Compensation  (e) Compensation  (f) Compensation  (g) Rap In Name And address  (g) Name and address  (g) Name and address  (g) Name and address  (g) Name and address of each employee paid more than \$50,000  (g) Name and address of each employee paid more than \$50,000  (g) Name and address of each employee paid more than \$50,000  (g) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (g) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "None."  (g) Compensation of five highe | • •   | or educational purposes, or f                    |                  | [37]                         |                           |
| section 53.4945 or in a current notice regarding desaler assistance, See instructions Organizations relying on a current notice regarding disaster assistance, check here c if the answer is "Yes" to question 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Dut the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes 10 66, the Form 8870. 7 At all my time during the tax year, was the foundation a party to a prohibited tax shelter transaction? It is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachulae payment(s) during the year?  Part Will Information About Officers, Directors, Trustees, Foundation Managers, Highly Pald Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  1 List all officers, directors, trustees, and foundation managers and their compensation.  1 Compensation (if not paid)  1 Light and werage hours per views devolved to position (if not paid)  1 Light and werage hours per views devolved to position (if not paid)  1 Light and werage hours per views devolved to position (if not paid)  1 Light and werage hours per views devolved to position (if not paid)  1 Light and werage hours per views devolved to position (if not paid)  1 Light and werage hours per views devolved to position (if not paid)  2 Compensation of five highest-paid employees (other than those included on fine 1). If none, enter "NONE."  2 Compensation of five highest-paid employees (other than those included on fine 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devolved to position (c) Compensation (d) Compensation (d) Compensation (d) Compensation (d) Compensation (d) Compensation (d) Compensation        | •   |  |                  | es 🔼 No                      |                           |
| Organizations relying on a current notice reparding disaster assistance, check here  of it the answer is "Yes" to quistion 53(4) does the foundation dam exemption from the tax because it maintained expenditure responsibility for the grant?  It "Yes," attach the statement required by Regulations section 53.4945-5(d).  But the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  It "Yes to 86, the Farm 8870.  To Al any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  To Al any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  To Al any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  To Al any time during the tax year, was the foundation and arrity to a prohibited tax shelter transaction?  To All any time during the tax year, was the foundation and arrity to a prohibited tax shelter transaction?  To All any time during the tax year, was the foundation and arrity to a prohibited tax shelter transaction?  To All any time for the foundation received arrity to the transaction?  To All any time foundation subject to the transaction?  To All any time foundation subject to the section 4960 tax on payments, of more than \$1,000,000 in remuneration or excess paradule symmetry.  To All any time foundation subject to the transaction?  To All any time foundation subject to the transaction?  To All any time foundation subject to the transaction?  To All any time foundation subject to the transaction?  To All any time foundation subject to the transaction?  To All any time foundation subject to the transaction?  To All any time foundation subject to the transaction?  To All any time foundation subject to the transaction?  To All any time foundation subject to the transaction?  To All any time foundation subject to the transaction?  To All any time foundation subject to the transaction?  To All any time foundation subject to th     |   |  | n Regulations    | NT / N                       |                           |
| c. If the answer is "es" to question Saf4), does the foundation claim exemption from the tax because it mainfained expenditure responsibility for the grain?  If "es," after the statement required by Regulations section 53.4945-5(d).  6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "ess' to 6b, the Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  b If "ess', did the foundation receive any proceeds on have any net income attributable to the transaction?  b If the second with 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?  Rart VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  1 List all officers, directors, trustees, and foundation managers and their compensation.  1 List all officers, directors, trustees, and foundation managers and their compensation.  1 List all officers, directors, trustees, and foundation managers and their compensation.  1 List all officers, directors, trustees, and foundation managers and their compensation.  1 List all officers, directors, trustees, and foundation managers and their compensation.  1 List all officers, directors, trustees, and foundation managers and their compensation.  1 List all officers, directors, trustees, and foundation managers and their compensation.  1 List all officers, directors, trustees, and foundation managers and their compensation.  1 List all officers, directors, trustees, and foundation managers and their compensation.  1 List all officers, directors, trustees, and foundation foundation managers and their compensation.  1 List all officers,     |   |  |                  | N/A                          | 30  <br>%:36333.66   4.75 |
| expenditure responsability for the grant?  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 pay premiums on a personal benefit contract?  B Did the foundation, during the year, receive any funds, directly or indirectly, on a personal benefit contract?  B If Yes, 10 6b, Ne Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  8 Is the foundation subject to the section 4800 tax on payment(s) of more than \$1,000,000 in remuneration or excess paractive payment(s) during the year?  Part MIL.  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address  (b) Title, and average (c) Compensation (fl not paid, enter-0-1) (fl not paid,      |   |  |                  |                              |                           |
| If "yes," attach the statement required by Regulations section 53.4945-5(d).  6a Did the foundation, during the year, review any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "yes 's to 6b, the Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  b If "yes," and the foundation receives any proceeds on have any net income attributable to the transaction?  It 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?  Reart VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours per week devoted to position  (fin not paid, enter-0-)  TRUSTEE  10.9 CHAPIN PARKWAY  BUFFALO, NY 14209  1.00  0.0.  7RUSTEE  12.34 WASHINGTON AVE.  OSHKOSH, WI 54901  0.25  0.0.  0.0.  MARGARRT H. WACHTEL  TRUSTEE  10.30 WASHINGTON AVE.  OSHKOSH, WI 54901  0.25  0.0.     |   |  | - /              | 🗀 <b></b> 🎼                  |                           |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If 'Yes' to 6b, the Form 8870.  If Yes' to 6b, the Form 870.  If Yes is 80.  If Yes is 80      |   | T.   | I/A Y            | es No                        |                           |
| a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If Yes's Cob, the Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  8 Is the foundation subject to the section 4980 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  Part VIII.  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours per week devoted to position  THOMAS R. HYDE  TRUSTEE  109 CHAP IN PARKWAY  BUFFALO, NY 14209  1.00  0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.  |   | 0.014.014.000.000                                |                  |                              |                           |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes to 6b, the Form 8870.  A Hany time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If yes to 6b, the Form 8870.  A Hany time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If yes to 6b, the Form 8870.  N/A  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address  (b) Title, and average house prevention of the foundation managers and their compensation.  (b) Title, and average house prevention of the foundation managers and their compensation.  (c) Compensation  (d) Compensation of the foundation of the foundation managers and their compensation.  (d) Compensation of the foundation of the foundation managers and their compensation.  (e) Expense a Cocount, other allows a celerical section of the foundation of the foundation managers and their compensation.  (b) Title, and average house prevention of the foundation managers and their compensation.  (c) Compensation  (d) Compensation of the foundation managers and their compensation.  (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (e) Expense and address of each employee paid more than \$50,000  (b) Title, and average house and address of each employee paid more than \$50,000  (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (e) Expense and address of each employee paid more than \$50,000  (b) Title, and average house and address of each employee paid more than \$50,000  (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE  | ,                                   | pay premiums on                                  |                  | a 🔽 na 🖁                     |                           |
| If "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  N/A  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?  Reart VIII.  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address  (a) Name and address  (a) Name and address  (a) Name And Address  (b) Titls, and average to compensation (if not paid, enter 4).  THOMAS R. HYDE  TRUSTEE  109 CHAPIN PARKWAY  BUFFALO, NY 14209  1.00  0.0  0.0  0.0  0.0  0.0  0.0   |   | varcanal hanafit contract?                       | 11               | S A NO                       | ch Y                      |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  b if "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  B 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?    Part VIII.   Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.    (a) Name and address   (b) Titls, and average hours per week devoted per week devo     |   | ersonal benefit contract?                        |                  | <u> </u>                     | THE EAST SAME             |
| b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess paradhule payment(s) during the year?    Part VIII.   |   | halter transaction2                              |                  | s V No                       |                           |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or secess parachute payment(s) during the year?    Rant VIII   |   |  | ·                |                              | 7h                        |
| Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address (b) Title, and average hours per week devoted to position  (a) Name and address (b) Title, and average hours per week devoted to position  THOMAS R. HYDE TRUSTEE  109 CHAPIN PARKWAY  BUFFALO, NY 14209 1.00 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.  |   |  |                  | 3                            |                           |
| Rart VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors   1 List all officers, directors, trustees, and foundation managers and their compensation.   (b) Title, and average hours per week devoted to position (if not paid, enter 4)   (d) Certibulers to (if not paid, enter 4)   (e) Expense to position (if not paid, enter 4)   (if        |   | n,ooo,ooo iii romanci attori or                  |                  | s X Na 🖺                     |                           |
| Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address (a) Name and address (b) Title, and average hours per week devoted to position (finot paid, to position) (finot paid, to paid, to position) (finot paid, to paid, to position) (finot paid, to paid,      |   | es. Foundation Mar                               |                  | 20 [22] 100_ [22             | 21. 5 1 35. 2 6 m 20      |
| (a) Name and address (b) Title, and average hours per week devoted to position of the paid, enter -0;  THOMAS R. HYDE  TRUSTEE  TRUSTEE  TRUSTEE  TRUSTEE  TRUSTEE  TRUSTEE  1.00 0.0.0.0.0.0.0.  JOYCE W. HYDE  1.234 WASHINGTON AVE.  OSHKOSH, WI 54901 0.25 0.0.0.  OSHKOSH, WI 54901 0.25 0.0.0.  OSHKOSH, WI 54901 0.25 0.0.0.0.  DOUGLAS W. HYDE  PRUSTEE  1030 WASHINGTON AVE.  OSHKOSH, WI 54901 0.25 0.0.0.0.0.  CSHKOSH, WI 54901 0.25 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.   |   |  |                  |                              |                           |
| THOMAS R. HYDE  109 CHAPIN PARKWAY  BUFFALO, NY 14209  1.00  0.0.0.0.  JOYCE W. HYDE  TRUSTEE  1234 WASHINGTON AVE.  OSHKOSH, WI 54901  0.25  0.0.0.0.  MARGARET H. WACHTEL  1030 WASHINGTON AVE.  OSHKOSH, WI 54901  0.25  0.0.0.0.0.  OSHKOSH, WI 54901  0.25  0.0.0.0.0.  ODUGLAS W. HYDE  P.O. BOX 1108  BOCA GRANDE, FL 33921  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee account, other allowances  (e) Expense account, other allowances   | 1 List all officers, directors, trustees, and foundation managers and the | neir compensation.                               |                  |                              |                           |
| THOMAS R. HYDE  109 CHAPIN PARKWAY  BUFFALO, NY 14209  1.00  0.0.0.0.  JOYCE W. HYDE  TRUSTEE  1234 WASHINGTON AVE.  OSHKOSH, WI 54901  0.25  0.0.0.0.  MARGARET H. WACHTEL  1030 WASHINGTON AVE.  OSHKOSH, WI 54901  0.25  0.0.0.0.0.  OSHKOSH, WI 54901  0.25  0.0.0.0.0.  OCHOCALS W. HYDE  P.O. BOX 1108  BOCA GRANDE, FL 33921  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position (c) Compensation of line 1). If none, enter "NONE."  (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (b) Title, and average hours per week devoted to position (c) Compensation (c) Co     |   | (b) Title, and average                           |                  | (d) Contributions to         | (e) Expense               |
| 1.00  | (a) Name and address  |  | enter -0-)       | and deterred<br>compensation | allowances                |
| ### BUFFALO, NY 14209   | THOMAS R. HYDE  | TRUSTEE  |                  |                              |                           |
| JOYCE W. HYDE   | 109 CHAPIN PARKWAY  |  |                  |                              |                           |
| 1234 WASHINGTON AVE. OSHKOSH, WI 54901  O.25  O.0.  MARGARET H. WACHTEL  1030 WASHINGTON AVE. OSHKOSH, WI 54901  O.25  O.0.  O.0.  DOUGLAS W. HYDE P.O. BOX 1108  BOCA GRANDE, FL 33921  O.25  O.0.  Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  NONE  (c) Compensation  (e) Expense account, other allowances  (e) Expense account, other allowances  | BUFFALO, NY 14209   | 1.00   | 0.               | _0.                          | 0.                        |
| OSHKOSH, WI 54901  MARGARET H. WACHTEL  TRUSTEE  1030 WASHINGTON AVE.  OSHKOSH, WI 54901  O.25  O. 0.  O. 0.  DOUGLAS W. HYDE  P.O. BOX 1108  BOCA GRANDE, FL 33921  O.25  O. 0.  Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances   | JOYCE W. HYDE   | TRUSTEE  |                  |                              |                           |
| MARGARET H. WACHTEL  1030 WASHINGTON AVE.  OSHKOSH, WI 54901  DOUGLAS W. HYDE  P.O. BOX 1108  BOCA GRANDE, FL 33921  Canpensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  TRUSTEE  D. 25  O. 0. 0.  O. 0.  (b) Title, and average hours per week devoted to position  (c) Compensation  (c) Compensation  (d) Contributions temployee benefit plans and deletied compensation  (e) Expense account, other allowances   | 1234 WASHINGTON AVE.  |  |                  |                              |                           |
| 1030 WASHINGTON AVE.  OSHKOSH, WI 54901  DOUGLAS W. HYDE P.O. BOX 1108 BOCA GRANDE, FL 33921  Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans account, other allowances  (e) Expense account, other allowances   |   |  | 0.               | 0.                           | 0.                        |
| OSHKOSH, WI 54901  DOUGLAS W. HYDE  P.O. BOX 1108  BOCA GRANDE, FL 33921  Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit data and deferred compensation  (e) Expense account, other allowances  | <del></del>   | TRUSTEE  |                  |                              |                           |
| DOUGLAS W. HYDE P.O. BOX 1108 BOCA GRANDE, FL 33921 O.25 O. 0. 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  TRUSTEE  O. 0. 0.  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances  |   |  |                  |                              |                           |
| P.O. BOX 1108 BOCA GRANDE, FL 33921 O.25 Compensation of five highest-paid employees (other than those included on fine 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans account, other allowances  (e) Expense account, other allowances   |   |  | 0.               | 0.                           | 0.                        |
| BOCA GRANDE, FL 33921  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and defined compensation  (e) Expense account, other allowances   |   | TRUSTEE  |                  |                              |                           |
| 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans account, other allowances  account, other allowances   |   |  |                  |                              | _                         |
| (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee entitle and account, other allowances  (e) Expense account, other allowances  |   |  | <del></del>      | 0.                           | 0.                        |
| NONE    Constitution       | 2 Compensation of five highest-paid employees (other than those incl      |  | enter "NONE."    | (d) Contributions to         |                           |
| NONE devoted to position compensation allowances  | (a) Name and address of each employee paid more than \$50,000             | hours per week                                   | (c) Compensation | employee benefit plans       | account, other            |
|   | 170178  | devoted to position                              |                  | compensation                 | allowances                |
| Testel number of other ampleyage and over \$50,000  | NONE  |  | [                |                              | [                         |
| Testel number of other ampleyage and over \$50,000  |   |  |                  |                              | <del> </del>              |
| Testel number of other ampleyage and over \$50,000  |   |  |                  |                              | }                         |
| Testel number of other employees and over \$50,000  |   |  |                  | <u></u>                      | <del></del>               |
| Testel number of other ampleyage and over \$50,000  |   |  | ŀ                |                              |                           |
| Tetal number of other ampleyage and over \$50,000   |   | <del>                                     </del> | <del></del>      |                              | <del></del>               |
| Testel number of other ampleyage and over \$50,000  |   |  |                  |                              | [                         |
| Total number of other ampleyage and over \$50,000   |   |  | -                |                              |                           |
| Total number of other ampleyage paid ever \$50,000  |   |  |                  |                              |                           |
| TAXABLE DECEMBER OF COORSE PRODUCE PRODUCE PRODUCE AND CORP. AND C      |   |  | <u> </u>         |                              | <u> </u>                  |

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## THE HYDE FAMILY CHARITABLE FUND

| Form 990-PF (2019) C/O THOMAS R. HYDE   | 16-1                                     | 502229 Page 7                         |
|---|--|---------------------------------------|
| Part VIII Information About Officers Directors Trustees Founda  |  | JUZZZJ rage /                         |
| Paid Employees, and Contractors (continued)   |  |                                       |
| 3 Five highest-paid independent contractors for professional services. If none, enter   |  |                                       |
| (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   |  | <u>▶</u>   0                          |
|   |  |                                       |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers prod | tical information such as the uced, etc. | Expenses                              |
| 1 N/A   |  |                                       |
|   |  |                                       |
|   |  |                                       |
| 2   |  |                                       |
|   |  |                                       |
|   |  | <del></del>                           |
| 3   |  |                                       |
|   |  |                                       |
|   |  |                                       |
| 4   |  |                                       |
|   | <del></del>                              |                                       |
| 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   | illes I allu Z.                          | Amount                                |
| 1N/A  |  |                                       |
|   |  |                                       |
| 2   | _ <del></del>                            |                                       |
|   |  |                                       |
|   |  |                                       |
| All other program-related investments. See instructions.  |  |                                       |
| 3   |  |                                       |
| - <u> </u>  |  |                                       |
|   |  |                                       |
|   |  |                                       |
|   |  |                                       |
|   |  |                                       |

Total. Add lines 1 through 3

C/O THOMAS R. HYDE

16-1502229

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| <u>P</u> | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four                              | idations,    | see instructions) |
|----------|--|--------------|-------------------|
| 1        | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:                  |              |                   |
| а        | Average monthly fair market value of securities  | 1a           | 4,996,611.        |
| b        | Average of monthly cash balances   | 1b           | 96,713.           |
| C        | Fair market value of all other assets  | 1c           | 1,767,811.        |
| d        | Total (add lines 1a, b, and c)   | 1d           | 6,861,135.        |
| е        | Reduction claimed for blockage or other factors reported on lines 1a and   |              |                   |
|          | 1c (attach detailed explanation) 1e 0 •  |              |                   |
| 2        | Acquisition indebtedness applicable to line 1 assets   | 2            | 0.                |
| 3        | Subtract line 2 from line 1d   | 3            | 6,861,135.        |
| 4        | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)                    | 4            | 102,917.          |
| 5        | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4                         | 5            | 6,758,218.        |
| 6_       | Minimum investment return. Enter 5% of line 5  | 6            | 337,911.          |
| LP       | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an               | d certain    |                   |
| _        | foreign organizations, check here 🕨 🔲 and do not complete this part.)  |              |                   |
| 1        | Minimum investment return from Part X, line 6  | 1            | 337,911.          |
| 2a       | Tax on investment income for 2019 from Part VI, line 5   |              |                   |
| b        | Income tax for 2019. (This does not include the tax from Part VI.)   |              |                   |
| C        | Add lines 2a and 2b  | 2c           | 2,366.            |
| 3        | Distributable amount before adjustments. Subtract line 2c from line 1  | 3            | 335,545.          |
| 4        | Recoveries of amounts treated as qualifying distributions  | 4            | 0.                |
| 5        | Add lines 3 and 4  | 5            | 335,545.          |
| 6        | Deduction from distributable amount (see instructions)   | 6            | 0.                |
| 7_       | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1                           | 7            | 335,545.          |
| P        | art XII Qualifying Distributions (see instructions)  |              |                   |
| 1        | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:                                   |              |                   |
| a        | Expenses, contributions, gifts, etc total from Part I, column (d), line 26   | 1a           | 254,850.          |
| b        | Program-related investments - total from Part IX-B   | 1b           | 0.                |
| 2        | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes                    | 2            |                   |
| 3        | Amounts set aside for specific charitable projects that satisfy the:   |              |                   |
| a        | Suitability test (prior IRS approval required)   | 3a           |                   |
| b        | Cash distribution test (attach the required schedule)  | 3b           |                   |
| 4        | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4                   | 4            | 254,850.          |
| 5        | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment                                 |              |                   |
|          | income. Enter 1% of Part I, line 27b   | 5            | 2,366.            |
| 6        | Adjusted qualifying distributions. Subtract line 5 from line 4   | 6            | 252,484.          |
|          | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q | ualifies for | the section       |
|          | 4940(e) reduction of tax in those years.   |              |                   |

Form **990-PF** (2019)

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Part XIII Undistributed Income (see instructions)

|  | (a)<br>Corpus | (b)<br>Years prior to 2018            | (c)<br>2018                           | (d)<br>2019 |
|--|---------------|---------------------------------------|---------------------------------------|-------------|
| Distributable amount for 2019 from Part XI, line 7   | · · · · · ·   | ·                                     | · · · · · · · · · · · · · · · · · · · | 335,545.    |
| 2 Undistributed income, if any, as of the end of 2019  |               |                                       |                                       |             |
| a Enter amount for 2018 only   |               |                                       | 247,831.                              |             |
| b Total for prior years:   |               |                                       |                                       |             |
| , ,  |               | 0.                                    |                                       |             |
| 3 Excess distributions carryover, if any, to 2019:   |               |                                       |                                       |             |
| a From 2014  |               |                                       |                                       |             |
| <b>b</b> From 2015   |               |                                       |                                       |             |
| c From 2016  |               |                                       |                                       |             |
| d From 2017  |               |                                       |                                       |             |
| e From 2018  |               | · · · · · · · · · · · · · · · · · · · |                                       |             |
| f Total of lines 3a through e  | 0.            |                                       |                                       |             |
| 4 Qualifying distributions for 2019 from   |               |                                       |                                       |             |
| Part XII, line 4: ► \$ 254,850.  |               |                                       |                                       |             |
| a Applied to 2018, but not more than line 2a   |               |                                       | 247,831.                              |             |
| <b>b</b> Applied to undistributed income of prior  |               |                                       |                                       |             |
| years (Election required - see instructions)   |               | 0.                                    |                                       |             |
| c Treated as distributions out of corpus   |               |                                       |                                       |             |
| (Election required - see instructions)   | 0.            |                                       |                                       |             |
| d Applied to 2019 distributable amount   |               |                                       | ·                                     | 7,019.      |
| e Remaining amount distributed out of corpus   | 0.            |                                       |                                       |             |
| 5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0.            |                                       |                                       | 0.          |
| 6 Enter the net total of each column as indicated below:   |               |                                       |                                       |             |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5  | 0.            |                                       |                                       |             |
| b Prior years' undistributed income. Subtract  |               |                                       |                                       |             |
| line 4b from line 2b   |               | 0.                                    |                                       |             |
| c Enter the amount of prior years'   |               |                                       |                                       |             |
| undistributed income for which a notice of deficiency has been issued, or on which   |               |                                       |                                       |             |
| the section 4942(a) tax has been previously  |               |                                       |                                       |             |
| assessed   |               | 0.                                    |                                       |             |
| d Subtract line 6c from line 6b. Taxable   |               | _                                     |                                       |             |
| amount - see instructions  |               | 0.                                    |                                       |             |
| e Undistributed income for 2018. Subtract line   |               |                                       | _                                     |             |
| 4a from line 2a. Taxable amount - see instr.   |               |                                       | 0.                                    |             |
| f Undistributed income for 2019. Subtract  |               |                                       |                                       |             |
| lines 4d and 5 from line 1. This amount must   |               |                                       |                                       | 200 506     |
| be distributed in 2020   |               |                                       |                                       | 328,526.    |
| 7 Amounts treated as distributions out of  |               |                                       |                                       |             |
| corpus to satisfy requirements imposed by  |               |                                       |                                       |             |
| section 170(b)(1)(F) or 4942(g)(3) (Election   | _             | 1                                     |                                       |             |
| may be required - see instructions)  | 0.            |                                       |                                       |             |
| 8 Excess distributions carryover from 2014   | _             |                                       |                                       |             |
| not applied on line 5 or line 7  | 0.            | <u>-</u>                              |                                       |             |
| 9 Excess distributions carryover to 2020.  | 0.            |                                       |                                       |             |
| Subtract lines 7 and 8 from line 6a  | U •           |                                       |                                       |             |
| 10 Analysis of line 9:   |               |                                       |                                       |             |
| a Excess from 2015   |               |                                       |                                       |             |
| b Excess from 2016   |               |                                       |                                       |             |
| c Excess from 2017<br>d Excess from 2018   |               |                                       |                                       |             |
| <del></del>  |               |                                       |                                       |             |
| e Excess from 2019   | 1             | <u></u>                               |                                       |             |

## THE HYDE FAMILY CHARITABLE FUND

16-1502229 Form 990-PF (2019) C/O THOMAS R. HYDE Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling 4942(j)(3) or 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years 2 a Enter the lesser of the adjusted net Tax year (b) 2018 (c) 2017 (d) 2016 (a) 2019 (e) Total income from Part I or the minimum investment return from Part X for each year listed b 85% of line 2a c Qualifying distributions from Part XII, line 4, for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) THOMAS R. HYDE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here \( \bigcup \ | \bigcup \ | \bigcup | \ | \bigcup | if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

## THE HYDE FAMILY CHARITABLE FUND

Form 990-PF (2019) C/O THOMAS R. HYDE

Part XV Supplementary Information (continued)

C/O THOMAS R. HYDE 16-1502229

| 4 C - 49 A - 5                                | (COMMINGEO)  |                     |                                  | ·            |
|---|--|---------------------|----------------------------------|--------------|
| 3 Grants and Contributions Paid During the Ye | ar or Approved for Future I  | Payment             | <u> </u>                         |              |
| Recipient                                     | If recipient is an individual,   | Foundation          | Purpose of grant or              |              |
| Name and address (home or business)           | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | status of recipient | Purpose of grant or contribution | Amount       |
| a Paid dunng the year                         |  |                     |                                  |              |
| o ,   |  |                     |                                  |              |
|   |  |                     |                                  |              |
|   |  |                     |                                  |              |
|   | .,,  | DIEDI I G GUNDIMY   | SEE ATTACHED SCHEDULE            |              |
| SEE ATTACHED SCHEDULE                         | N/A  | PUBLIC CHARITI      | SEE ATTACHED SCHEDULE            | 253,600.     |
|   |  | _                   |                                  |              |
|   |  |                     |                                  |              |
|   |  | 1                   |                                  |              |
|   |  |                     |                                  |              |
|   |  |                     |                                  |              |
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|   |  |                     |                                  | •            |
|   |  |                     |                                  |              |
| Total   |  | <u> </u>            | <b>▶</b> 3a                      | 253,600.     |
| b Approved for future payment                 |  |                     |                                  |              |
| - The reserve to retain payment               |  |                     |                                  |              |
|   |  |                     |                                  |              |
| NONE  |  |                     |                                  |              |
|   |  |                     |                                  |              |
|   |  |                     |                                  |              |
|   |  |                     |                                  |              |
|   | :  |                     |                                  |              |
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|   | -  |                     |                                  |              |
|   |  |                     |                                  |              |
|   | -  |                     |                                  | <del> </del> |
|   |  |                     |                                  |              |
|   | 1  |                     |                                  |              |
|   |  |                     |                                  | 1            |
|   |  |                     |                                  |              |
|   |  |                     |                                  |              |
| Total   |  |                     | <b>&gt;</b> 3b                   | 0.           |

Page 11

Unrelated business income

Excluded by section 512, 513, or 514

(e)

Form 990-PF (2019)

Enter gross amounts unless otherwise indicated.

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

| Program converse revenue:                                       | (a)<br>Business<br>code | (b)<br>Amount           | (C)<br>Exclu-<br>sion<br>code                    | (d)<br>Amount                          | (e) Related or exempt function income |
|---|-------------------------|-------------------------|--|--|---------------------------------------|
| 1 Program service revenue:                                      | Code                    |                         | 10000  |  |                                       |
| a   | <del></del>             |                         |  |  |                                       |
| · · · · · · · · · · · · · · · · · · ·                           |                         |                         |  |  |                                       |
| d   |                         |                         |  |  |                                       |
|   |                         |                         |  |  |                                       |
| e   |                         |                         |  |  |                                       |
| g Fees and contracts from government agencies                   |                         | ·                       |  |  |                                       |
| 2 Membership dues and assessments                               |                         | ····                    |  |  |                                       |
| 3 Interest on savings and temporary cash                        |                         | <del></del>             |  | ,                                      |                                       |
| investments   |                         |                         | 14   | 36,731.                                |                                       |
| 4 Dividends and interest from securities                        | 1                       | <del></del>             | 14   | 36,731.<br>71,562.                     |                                       |
| 5 Net rental income or (loss) from real estate:                 | <u> </u>                | ····                    |  | ,                                      |                                       |
| a Debt-financed property  |                         |                         | 1  |  |                                       |
| b Not debt-financed property                                    |                         |                         |  |  |                                       |
| 6 Net rental income or (loss) from personal                     |                         |                         |  |  |                                       |
| property  |                         |                         |  |  |                                       |
| 7 Other investment income                                       | <del></del>             |                         |  |  |                                       |
| 8 Gain or (loss) from sales of assets other                     |                         |                         |  |  |                                       |
| than inventory  |                         |                         | 18   | 161,281.                               |                                       |
| 9 Net income or (loss) from special events                      |                         |                         | 1  |  |                                       |
| 10 Gross profit or (loss) from sales of inventory               |                         |                         | <del>                                     </del> | ·····                                  |                                       |
| 11 Other revenue:   |                         |                         |  |  |                                       |
| a   |                         |                         |  |  |                                       |
| b   |                         |                         |  |  |                                       |
| c   |                         |                         |  |  |                                       |
| d   |                         |                         |  |  |                                       |
| e   |                         |                         |  |  |                                       |
| 12 Subtotal. Add columns (b), (d), and (e)                      |                         | 0.                      |  | 269,574.                               | 0.                                    |
| 13 Total. Add line 12, columns (b), (d), and (e)                | <u> </u>                |                         | <u> </u>   | 13                                     | 269,574.                              |
| (See worksheet in line 13 instructions to verify calculations.) |                         |                         |  | _                                      | •                                     |
| Part XVI-B Relationship of Activities to                        | the Accom               | nlishment of Eve        | mnt  | Purnoses                               |                                       |
| Telationship of Activities to                                   | THE ACCOUNT             | —                       | .mpt   |  |                                       |
| Line No. Explain below how each activity for which incom        | ne is reported in c     | olumn (e) of Part XVI-A | contribi   | uted importantly to the accom          | plishment of                          |
| ▼ the foundation's exempt purposes (other than b                | y providing funds       | for such purposes).     |  |  | ·····                                 |
| N/A   |                         |                         |  |  |                                       |
|   |                         |                         |  |  | <del></del>                           |
|   |                         | ····                    |  |  |                                       |
|   |                         |                         |  |  |                                       |
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|   |                         | **                      |  |  | <u></u>                               |
|   |                         |                         |  |  |                                       |
| 923621 12-17-19   |                         |                         |  |  | Form <b>990-PF</b> (2019)             |

| orm 990-PF (20 | 019)   | C/0    | THOMAS     | R.  | HYDE          |                  |                    | 16-1502229    | Page |
|----------------|--------|--------|------------|-----|---------------|------------------|--------------------|---------------|------|
| Part XVII      | Inform | ation  | Regarding  | Tra | nsfers to and | Transactions and | Relationships With | Noncharitable |      |
|                | Exem   | pt Org | anizations |     |               |                  |                    |               |      |

| 1    | Did the or   | ganization directly or indir        | rectly engage in any     | of the followin  | g with any other organization  | on described in sect  | tion 501(c)                       |                 | Yes      | No     |
|------|--------------|-------------------------------------|--------------------------|------------------|--|-----------------------|-----------------------------------|-----------------|----------|--------|
|      | (other tha   | n section 501(c)(3) organ           | izations) or in sectio   | n 527, relating  | to political organizations?  |                       |                                   |                 | ,        |        |
| a    | Transfers    | from the reporting founda           | ation to a noncharital   | ole exempt org   | ganization of:   |                       |                                   |                 |          |        |
|      | (1) Cash     |                                     |                          |                  |  |                       |                                   | 1a(1)           |          | X      |
|      | (2) Other    | assets                              |                          |                  |  |                       |                                   | 1a(2)           |          | X      |
| b    | Other tran   | sactions:                           |                          |                  |  |                       |                                   |                 |          |        |
|      | (1) Sales    | of assets to a noncharitat          | ble exempt organizat     | ion              |  |                       |                                   | 1b(1)           |          | _X_    |
|      | (2) Purch    | ases of assets from a nor           | ncharitable exempt o     | rganization      |  |                       |                                   | 1b(2)           |          | _X_    |
|      | (3) Renta    | d of facilities, equipment,         | or other assets          |                  |  |                       |                                   | 1b(3)           |          | X      |
|      | (4) Reiml    | bursement arrangements              |                          |                  |  |                       |                                   | 1b(4)           |          | X      |
|      | (5) Loans    | s or loan guarantees                |                          |                  |  |                       |                                   | 1b(5)           |          | _X_    |
|      | (6) Perfo    | rmance of services or mei           | mbership or fundrais     | sing solicitatio | ns   |                       |                                   | 1b(6)           |          | _X_    |
| C    | Sharing of   | facilities, equipment, mai          | iling lists, other asse  | ts, or paid em   | ployees  |                       |                                   | 1c              |          | _X_    |
| d    | If the answ  | ver to any of the above is          | "Yes," complete the f    | ollowing sche    | dule. Column (b) should alv  | ways show the fair i  | market value of the goods         | , other ass     | ets,     |        |
|      | or services  | s given by the reporting fo         | oundation. If the four   | idation receive  | ed less than fair market valu  | ie in any transaction | or sharing arrangement,           | show in         |          |        |
|      | column (d    | ) the value of the goods, o         | other assets, or serv    | ces received.    |  |                       |                                   |                 |          |        |
| a)∟ı | ne no        | (b) Amount involved                 | (c) Name of              | noncharitable    | exempt organization  | (d) Description       | n of transfers, transactions, and | sharing arra    | ıngemen  | ts     |
|      |              |                                     |                          | N/A              |  |                       |                                   |                 |          |        |
|      |              |                                     |                          |                  |  |                       |                                   |                 |          |        |
|      |              |                                     |                          |                  |  |                       |                                   |                 |          |        |
|      |              |                                     |                          |                  |  |                       |                                   |                 |          |        |
|      |              |                                     |                          |                  |  |                       | <del></del>                       |                 |          |        |
|      |              |                                     |                          |                  |  |                       |                                   |                 |          |        |
|      |              |                                     |                          |                  |  |                       |                                   |                 |          |        |
|      |              |                                     |                          |                  |  |                       |                                   |                 |          |        |
|      |              |                                     |                          |                  | ····   |                       | ·····                             |                 |          |        |
|      |              |                                     |                          |                  | ·  |                       |                                   |                 |          |        |
|      |              |                                     |                          |                  |  |                       |                                   |                 |          |        |
|      |              |                                     |                          |                  |  |                       |                                   |                 |          |        |
|      |              |                                     |                          |                  |  |                       |                                   |                 |          |        |
|      |              |                                     |                          |                  |  |                       |                                   |                 |          |        |
|      |              |                                     |                          |                  |  |                       |                                   |                 |          |        |
|      |              |                                     |                          |                  |  |                       |                                   |                 |          |        |
| 2a   | Is the four  | dation directly or indirect         | ly affiliated with, or r | elated to, one   | or more tax-exempt organi  | zations described     |                                   |                 |          |        |
|      | ın section   | 501(c) (other than section          | n 501(c)(3)) or in se    | ction 527?       |  |                       |                                   | Yes             | X        | No     |
| b    | If "Yes," co | implete the following sche          | edule.                   |                  |  |                       |                                   |                 |          |        |
|      |              | (a) Name of org                     | anızatıon                |                  | (b) Type of organization   |                       | (c) Description of relation       | ship            |          |        |
|      |              | N/A                                 |                          |                  |  |                       |                                   |                 |          |        |
|      |              |                                     |                          |                  |  |                       |                                   |                 |          |        |
|      |              |                                     |                          |                  |  |                       | . <u> </u>                        |                 |          |        |
|      |              |                                     |                          |                  |  |                       |                                   |                 |          |        |
|      |              | ··································· |                          |                  |  |                       |                                   |                 |          |        |
|      |              |                                     |                          |                  | accompanying schedules and sta<br>taxpayer) is based on all informat |                       | no onu knowlodeo                  | lay the IRS d   |          |        |
| Siç  | gn   📞       |                                     | 7 11 1                   |                  | 16-15-20   |                       | si                                | turn with the   | See inst |        |
| He   | re 🖳         | Momori                              | City ex                  | <u></u>          | 16-15-20   | IKUSII                | EE                                | X Yes           |          | J No □ |
|      | Sign         | ature of officer or trustee         | <u>V</u>                 |                  | Date   | Title                 | <b>L</b>                          |                 |          |        |
|      |              | Print/Type preparer's na            | me                       | Preparer's si    | gnature  | Date                  | Check if PTIN                     |                 |          |        |
| _    |              | _                                   |                          | 701              | 500,000  | 6/4/20                | self- employed                    | 4040            | ~ ~ =    |        |
| Pa   |              | MARIA T. S                          | CAROZZA                  |                  | a Scarozza   |                       |                                   | 1240            |          |        |
|      | eparer       | Firm's name > SZY                   | MKOWIAK &                | ASSOC:           | IATES CEAS, I  | P.C.                  | Firm's EIN ► 16-1                 | .60004          | £ 5      |        |
| US   | e Only       |                                     | <del></del>              |                  |  |                       | <u> </u>                          |                 |          |        |
|      |              | Firm's address ► 63                 |                          |                  |  |                       |                                   |                 |          |        |
|      |              | <u> </u>                            | LLIAMSVIL                | LE, NY           | 14221  | <del></del>           | Phone no. 716 – 6                 |                 |          |        |
|      |              |                                     |                          |                  |  |                       |                                   | Form <b>990</b> | J-PF (   | 2019)  |

| FORM 990-PF INTER                      | EST ON SAVI     | INGS AND TEM                 | PORARY CASH                       | INVESTMENTS                 | STATEMENT 1                     |
|--|-----------------|------------------------------|-----------------------------------|-----------------------------|---------------------------------|
| SOURCE                                 |                 | (A<br>REVE<br>PER B          | NUE NET                           | (B)<br>INVESTMENT<br>INCOME | (C)<br>ADJUSTED<br>NET INCOME   |
| FIDELITY INVESTMENT WILLIAM BLAIR & CO |                 |                              | 11.                               | 11.<br>36,720.              |                                 |
| TOTAL TO PART I, L                     |                 |                              | 6,731.                            | 36,720.                     |                                 |
| TOTAL TO PART 1, L                     | INE 3           | <del></del>                  |                                   | 30,731.                     |                                 |
| FORM 990-PF                            | DIVIDEND        | S AND INTER                  | EST FROM SE                       | CURITIES                    | STATEMENT 2                     |
| SOURCE                                 | GROSS<br>AMOUNT | CAPITAL<br>GAINS<br>DIVIDEND | REVENUI                           |                             | <del>-</del>                    |
| WILLIAM BLAIR & COMPANY                | 71,562          | 2.                           | 0. 71,56                          | 52. 71,56                   | 2.                              |
| TO PART I, LINE 4                      | 71,562          | 2.                           | 0. 71,56                          | 52. 71,56                   | 2.                              |
| FORM 990-PF                            |                 | ACCOUNTI                     | NG FEES                           |                             | STATEMENT 3                     |
| DESCRIPTION                            |                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME |                             |                                 |
| ACCOUNTING FEES                        | <del>-</del>    | 2,500.                       | 1,250                             | ).                          | 1,250.                          |
| TO FORM 990-PF, PG                     | 1, LN 16B       | 2,500.                       | 1,250                             | ).                          | 1,250.                          |
|  |                 |                              |                                   |                             |                                 |
| FORM 990-PF                            |                 | TAX                          | ES                                |                             | STATEMENT 4                     |
| DESCRIPTION                            |                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME |                             | (D)<br>CHARITABLE<br>E PURPOSES |
| FEDERAL TAXES                          | _               | 17,800.                      | (                                 | ).                          | 0.                              |
| TO FORM 990-PF, PG                     | 1, LN 18        | 17,800.                      | (                                 | ).                          | 0.                              |
|  | _               |                              |                                   |                             |                                 |

| FORM 990-PF                 | OTHER EXPENSES STATEME       |                                   |                               |                               |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
| INVESTMENT FEES             | 31,718.                      | 31,718.                           |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 23 | 31,718.                      | 31,718.                           |                               | 0.                            |

| FORM 990-PF U.S. AND STATE/C        | CITY GOV      | ERNMENT        | OBLIGATIONS | STATEMENT 6          |
|-------------------------------------|---------------|----------------|-------------|----------------------|
| DESCRIPTION                         | U.S.<br>GOV'T | OTHER<br>GOV'T | BOOK VALUE  | FAIR MARKET<br>VALUE |
| WILLIAM BLAIR & CO SEE ATTACHED     | X             |                | 374,515.    | 375,643.             |
| TOTAL U.S. GOVERNMENT OBLIGATIONS   |               | -              | 374,515.    | 375,643.             |
| TOTAL STATE AND MUNICIPAL GOVERNMEN | T OBLIG       | SATIONS        |             |                      |
| TOTAL TO FORM 990-PF, PART II, LINE | 10A           | =              | 374,515.    | 375,643.             |
| FORM 990-PF COR                     | PORATE        | STOCK          |             | STATEMENT 7          |
| DESCRIPTION                         |               |                | BOOK VALUE  | FAIR MARKET<br>VALUE |
| WILLIAM BLAIR & CO SEE ATTACHED     |               | -              | 3,138,733.  | 5,683,405.           |
| TOTAL TO FORM 990-PF, PART II, LINE | 3,138,733.    | 5,683,405.     |             |                      |
| FORM 990-PF COR                     | PORATE        | BONDS          |             | STATEMENT 8          |
| DESCRIPTION                         |               |                | BOOK VALUE  | FAIR MARKET<br>VALUE |
| WILLIAM BLAIR & CO SEE ATTACHED     |               | -              | 1,006,783.  | 1,021,054.           |
| WILLIAM BLAIR & CO SEE ATTACHED     |               |                |             |                      |