

Form **990-PF**
 Department of the Treasury
 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.**

OMB No. 1545-0052
2019
Open to Public Inspection

For calendar year 2019, or tax year beginning 01-01-2019 , and ending 12-31-2019

Name of foundation THE BERNARD AND PAMELA BARBASH FAMILY FOUNDATION		A Employer identification number 16-1743055	
Number and street (or P.O. box number if mail is not delivered to street address) BESSEMER TR1225 FRANKLIN AVE NO	Room/suite	B Telephone number (see instructions) (516) 508-9623	
City or town, state or province, country, and ZIP or foreign postal code GARDEN CITY, NY 11530		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here..... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <u>13,252,048</u>		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis.)</i>			

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	1,024,151			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	164,296	164,296		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	572,101			
	b Gross sales price for all assets on line 6a	1,908,577			
	7 Capital gain net income (from Part IV, line 2)		572,101		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	1,760,548	736,397			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	743	0		743
	b Accounting fees (attach schedule)	2,875	0		2,875
	c Other professional fees (attach schedule)	33,696	22,460		11,236
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	4,546	1,359		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	200	0		200
	24 Total operating and administrative expenses. Add lines 13 through 23	42,060	23,819		15,054
	25 Contributions, gifts, grants paid	505,854			505,854
26 Total expenses and disbursements. Add lines 24 and 25	547,914	23,819		520,908	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	1,212,634				
b Net investment income (if negative, enter -0-)		712,578			
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	67	59,085	47,585
	3 Accounts receivable ▶ <u>692</u>			
	Less: allowance for doubtful accounts ▶ _____	218	692	692
	4 Pledges receivable ▶ _____			
	Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____			
	Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	10,129,501	9,950,565	12,192,324
	c Investments—corporate bonds (attach schedule)	0	1,003,561	1,011,447
	11 Investments—land, buildings, and equipment: basis ▶ _____			
Less: accumulated depreciation (attach schedule) ▶ _____				
12 Investments—mortgage loans				
13 Investments—other (attach schedule)				
14 Land, buildings, and equipment: basis ▶ _____				
Less: accumulated depreciation (attach schedule) ▶ _____				
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	10,129,786	11,013,903	13,252,048	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable	77,231	11,500	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	77,231	11,500	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> 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 ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	10,052,555	11,002,403	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	0	0	
	29 Total net assets or fund balances (see instructions)	10,052,555	11,002,403	
30 Total liabilities and net assets/fund balances (see instructions) .	10,129,786	11,013,903		

Part III 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 (must agree with end-of-year figure reported on prior year's return)	1	10,052,555
2 Enter amount from Part I, line 27a	2	1,212,634
3 Other increases not included in line 2 (itemize) ▶ _____	3	187,958
4 Add lines 1, 2, and 3	4	11,453,147
5 Decreases not included in line 2 (itemize) ▶ _____	5	450,744
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	11,002,403

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a SEE SCHEDULE ATTACHED	D		
b CAPITAL GAINS DIVIDENDS	P		
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 1,665,852		1,336,476	329,376
b 242,725			242,725
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			329,376
b			242,725
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	572,101
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	482,182	10,290,610	0.046857
2017	370,166	8,700,471	0.042546
2016	277,731	7,112,069	0.039051
2015	229,784	5,957,444	0.038571
2014	247,089	4,720,180	0.052347

2 Total of line 1, column (d)	2	0.219372
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.043874
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	11,541,696
5 Multiply line 4 by line 3	5	506,380
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	7,126
7 Add lines 5 and 6	7	513,506
8 Enter qualifying distributions from Part XII, line 4	8	520,908

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculation. Includes questions about exempt foundations, tax under section 511, and total tax due. Total tax due is 7,255.

Part VII-A Statements Regarding Activities

Table with 10 rows for statements regarding activities. Includes questions about political campaigns, political expenditures, and state reporting. Includes Yes/No columns.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, distributions, public inspection requirements, and books in care.

Located at 1225 FRANKLIN AVE SUITE 500 GARDEN CITY NY ZIP+4 11530

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here and enter the amount of tax-exempt interest received or accrued during the year 15

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in foreign countries.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to:		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	5b		
Organizations relying on a current notice regarding disaster assistance check here.			<input type="checkbox"/>
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
<i>If "Yes" to 6b, file Form 8870.</i>			
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
BERNARD M BARBASH C/O BESSEMER TRUST 1225 FRANKLIN AVENUE SUITE 500 GARDEN CITY, NY 11530	PRESIDENT, TREASURER 1.00	0	0	0
PAMELA J BARBASH C/O BESSEMER TRUST 1225 FRANKLIN AVENUE SUITE 500 GARDEN CITY, NY 11530	VICE PRESIDENT 1.00	0	0	0
MICHAEL G SCHWARTZ C/O BESSEMER TRUST 1225 FRANKLIN AVENUE SUITE 500 GARDEN CITY, NY 11530	SECRETARY 1.00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(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
NONE				

Total number of other employees paid over \$50,000. ▶ 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ▶		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	11,573,142
b	Average of monthly cash balances.	1b	144,316
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	11,717,458
e	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	11,717,458
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	175,762
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	11,541,696
6	Minimum investment return. Enter 5% of line 5.	6	577,085

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	577,085
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	7,126
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	7,126
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	569,959
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	569,959
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	569,959

Part 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	520,908
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	520,908
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. See instructions.	5	7,126
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	513,782

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				569,959
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			135,208	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
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: ▶ \$ <u>520,908</u>				
a Applied to 2018, but not more than line 2a			135,208	
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.				385,700
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2019.	0			0
<i>(If an amount appears in column (d), the same amount must be shown in column (a).)</i>				
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 instructions			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				184,259
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9:				
a Excess from 2015.				
b Excess from 2016.				
c Excess from 2017.				
d Excess from 2018.				
e Excess from 2019.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a 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. ▶

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
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					

3 Complete 3a, b, or c for the alternative test relied upon:

a "Assets" alternative test—enter:

(1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "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

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 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).) See Additional Data Table

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.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here 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. See instructions

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:

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	505,854
b <i>Approved for future payment</i>				
Total			▶ 3b	0

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part XVII

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
a Transfers from the reporting foundation to a noncharitable exempt organization of:
(1) Cash.
(2) Other assets.
b Other transactions:
(1) Sales of assets to a noncharitable exempt organization.
(2) Purchases of assets from a noncharitable exempt organization.
(3) Rental of facilities, equipment, or other assets.
(4) Reimbursement arrangements.
(5) Loans or loan guarantees.
(6) Performance of services or membership or fundraising solicitations.
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation.

Table with 4 columns: (a) Line No., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? [] Yes [x] No

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.
Sign Here [Signature] 2020-10-12 [Title]
May the IRS discuss this return with the preparer shown below (see instr.) [] Yes [] No

Paid Preparer Use Only
Print/Type preparer's name: KEVIN M BARRY
Preparer's Signature
Date: 2020-10-09
Check if self-employed []
PTIN: P00369984
Firm's name: BESSEMER TRUST COMPANY NA
Firm's EIN: 13-2792165
Firm's address: 630 FIFTH AVENUE, NEW YORK, NY 10111
Phone no. (212) 708-9100

Form 990PF Part XV Line 1a - 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).

BERNARD M BARBASH

PAMELA J BARBASH

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ADATH ISRAEL 250 N HIGHLAND AVENUE MERION STATION, PA 19066	N/A	PUBLIC CHARITY	GENERAL PURPOSE	26,965
ADL605 THIRD AVENUE NEW YORK, NY 10158	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
ALPERT JEWISH FAMILY & CHILDREN'S SERVICE 5841 CORPORATE WAY 200 WEST PALM BEACH, FL 33407	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BOYS AND GIRLS CLUBS OF GREATER CINCINNATI 600 DALTON AVENUE CINCINNATI, OH 45203	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
BUSCH WILDLIFE SANCTUARY 2500 JUPITER PARK DRIVE JUPITER, FL 33458	N/A	PUBLIC CHARITY	GENERAL PURPOSE	5,000
CHABAD JEWISH CENTER 770 EASTERN PARKWAY SUITE 405 BROOKLYN, NY 11213	N/A	PUBLIC CHARITY	GENERAL PURPOSE	20,000
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHABAD OF PALM BEACH GARDENS 7026 FAIRVIEW LANE PALM BEACH, FL 33418	N/A	PUBLIC CHARITY	GENERAL PURPOSE	10,000
CINCINNATI CHILDREN'S HOSPITAL 333 BURNET AVENUE CINCINNATI, OH 45229	N/A	PUBLIC CHARITY	GENERAL PURPOSE	2,500
CRAYONS TO COMPUTER 1350 TENNESSEE AVENUE CINCINNATI, OH 45229	N/A	PUBLIC CHARITY	GENERAL PURPOSE	2,500
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DOWN SYNDROME ASSOC OF CINCINNATI 4623 WESLEY AVENUE CINCINNATI, OH 45212	N/A	PUBLIC CHARITY	GENERAL PURPOSE	5,000
DRESS FOR SUCCESS CINCINNATI 208 MC FARLAND ST CINCINNATI, OH 45202	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
FERNSIDE CENTER FOR GRIEVING CHILDREN 4360 COOPER ROAD 100 CINCINNATI, OH 45242	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FREESTORE FOODBANK 112 E LIBERTY STREET CINCINNATI, OH 45202	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
HEBREW UNION COLLEGE 3101 CLIFTON AVENUE CINCINNATI, OH 45220	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
INTER PARISH MINISTRY 8509 DEBOLT STREET CINCINNATI, OH 45244	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JEWISH COMMUNITY CENTER 5221 HOOD ROAD PALM BEACH, FL 33418	N/A	PUBLIC CHARITY	GENERAL PURPOSE	2,425
JEWISH FEDERATION OF CINICINNATI 8499 RIDGE ROAD CINCINNATI, OH 45236	N/A	PUBLIC CHARITY	GENERAL PURPOSE	372
JEWISH NATIONAL FUND 9918 CARVER ROAD CINCINNATI, OH 45242	N/A	PUBLIC CHARITY	GENERAL PURPOSE	5,000
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KID SANCTUARY CAMPUS 700 S DIXIE HWY 101 PALM BEACH, FL 33401	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
LIVE LIKE JAKEPO BOX 31652 PALM BEACH GARDENS, FL 33420	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,500
MADEIRA INDIAN HILL FIRE CO 6475 DRAKE ROAD CINCINNATI, OH 45243	N/A	PUBLIC CHARITY	GENERAL PURPOSE	100
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MAKE-A-WISH SOUTHERN FLORIDA 3655 BONITA BEACH ROAD SE4 BONITA SPRINGS, FL 34134	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
MARINE TOYS FOR TOTS 18251 QUANTICO GATEWAY DRIVE TRIANGLE, VA 22172	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
MAYERSON JCC8485 RIDGE ROAD CINCINNATI, OH 45236	N/A	PUBLIC CHARITY	GENERAL PURPOSE	11,000
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MOST VALUABLE KIDS 135 MADISON AVENUE NEW YORK, NY 10016	N/A	PUBLIC CHARITY	GENERAL PURPOSE	10,000
NATIONAL 911 MEMORIAL AND MUSEUM 180 GREENWICH STREET NEW YORK, NY 10007	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
NEEDIEST KIDS OF ALL 312 ELM STREET 20 CINCINNATI, OH 45202	N/A	PUBLIC CHARITY	GENERAL PURPOSE	5,000
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PALM BEACH COUNTY FOOD BANK 525 GATOR DRIVE LANTANA, FL 33462	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
R DELANEY TOKES MEMORIAL FDN 10185 CAMEILLA ST PARKLAND, FL 33076	N/A	PUBLIC CHARITY	GENERAL PURPOSE	22,000
ROCKWERN ACADEMY 8401 MONTGOMERY ROAD CINCINNATI, OH 45236	N/A	PUBLIC CHARITY	GENERAL PURPOSE	18,300
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RONALD MCDONALD HOUSE CHARITIES 350 ERKENBRECHER AVENUE CINCINNATI, OH 45229	N/A	PUBLIC CHARITY	GENERAL PURPOSE	5,000
SIMON WIESENTHAL CENTER 1399 ROXBURY DR LOS ANGELES, CA 90035	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
THE HOLOCAUST & HUMANITY CENTER 8401 MONTGOMERY ROAD CINCINNATI, OH 45236	N/A	PUBLIC CHARITY	GENERAL PURPOSE	5,000
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE USOPO BOX 96860 WASHINGTON, DC 20077	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
UNITED STATES HOLOCAUST MEMORIAL MUSEUM 100 RAOUL WALLENBERG PL WASHINGTON, DC 20024	N/A	PUBLIC CHARITY	GENERAL PURPOSE	10,000
UNITED WAY OF GREATER CINCINNATI 2400 READING ROAD CINCINNATI, OH 45202	N/A	PUBLIC CHARITY	GENERAL PURPOSE	25,000
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WORLD JEWISH CONGRESS 2501 MADISON AVENUE NEW YORK, NY 10022	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
BIRTHRIGHT ISRAEL P O BOX 21615 NEW YORK, NY 10087	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
CAMERAP O BOX 35040 BOSTON, MA 02135	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CINCINNATI BALLET 1555 CENTRAL PKWY CINCINNATI, OH 45214	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
CINCINNATI MUSEUM CENTER 1301 WESTERN AVE CINCINNATI, OH 45203	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
FRIENDS OF JCC KRAKOW 74 LAFAYETTE AVE SUFFERN, NY 10901	N/A	PUBLIC CHARITY	GENERAL PURPOSE	5,400
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KK ADATH ISRAEL 3201 GALBRAITH ROAD CINCINNATI, OH 45236	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
LIGHTHOUSE YOUTH & FAMILY SERVICES 401 E MCMILLAN CINCINNATI, OH 45206	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
MENORAH PARK 27100 CEDAR ROAD CLEVELAND, OH 44122	N/A	PUBLIC CHARITY	GENERAL PURPOSE	5,000
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ONE SOURCE CENTER 3610 PARK 42 DRIVE SHARONVILLE, OH 45241	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
PEGGY ADAMS ANIMAL RESCUE LEAGUE 3100 N MILITARY TRAIL WEST PALM BEACH, FL 33409	N/A	PUBLIC CHARITY	GENERAL PURPOSE	500
PRO KIDS2605 BURNET AVE CINCINNATI, OH 45219	N/A	PUBLIC CHARITY	GENERAL PURPOSE	1,000
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SHELTER HOUSE 2499 READING ROAD CINCINNATI, OH 45202	N/A	PUBLIC CHARITY	OPERATIONAL	1,000
THE FELLOWSHIP OF CHRISITANS AND JEWS P O BOX 96105 WASHINGTON, DC 96105	N/A	PUBLIC CHARITY	OPERATIONAL	1,000
WOUNDED WARRIOR PROJECT 4899 BELFORT ROAD JACKSONVILLE, FL 32256	N/A	PUBLIC CHARITY	OPERATIONAL	500
Total ▶ 3a				505,854

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN FRIENDS OF MAGAN DAVID ADOM 20 WEST 36TH STREET NEW YORK, NY 10018	N/A	PUBLIC CHARITY	OPERATIONAL	125,706
JEWISH FEDERATION OF CINCINNATI 8499 RIDGE ROAD CINCINNATI, OH 45236	N/A	PUBLIC CHARITY	OPERATIONAL	150,086
Total ▶ 3a				505,854

TY 2019 Accounting Fees Schedule

Name: THE BERNARD AND PAMELA BARBASH FAMILY
FOUNDATION

EIN: 16-1743055

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FIDUCIARY TAX SERVICE FEE	2,875	0		2,875

TY 2019 Investments Corporate Bonds Schedule

Name: THE BERNARD AND PAMELA BARBASH FAMILY
FOUNDATION

EIN: 16-1743055

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
89114.353 OW FIXED INCOME FUND - 680414406	1,003,561	1,011,447

TY 2019 Investments Corporate Stock Schedule

Name: THE BERNARD AND PAMELA BARBASH FAMILY
FOUNDATION

EIN: 16-1743055

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
650 ACTIVISION BLIZZARD INC - 00507V109	40,912	38,623
85 ADVANCE AUTO PARTS - 00751Y106	11,383	13,613
426 ALIBABA GROUP HOLDINGS LTD - 01609W102	37,941	90,354
365 ALLEGION PLC ORD SHS - G0176J109	26,195	45,457
208 ALPHABET INC CLASS C - 02079K107	152,741	278,100
144 AMAZON.COM INC - 023135106	115,401	266,088
500 AMEREN CORP - 023608102	32,682	38,400
240 AMERICAN TOWER CORP - 03027X100	38,745	55,156
425 AMERICAN WATER WORKS CO - 030420103	31,963	52,211
410 AMPHENOL CORP - 032095101	38,798	44,374
60 ANSYS INC - 03662Q105	6,417	15,444
240 APPLE INC - 037833100	41,963	70,476
75 APTARGROUP INC - 038336103	7,597	8,671
145 AXALTA COATING - G0750C108	4,511	4,408
3135 BANK OF AMERICA CORP - 060505104	96,573	110,414
53 BLACKROCK INC - 09247X101	27,874	26,643
14 BOOKING HLDGS INC - 09857L108	21,403	28,752
45 BURLINGTON STORES INC - 122017106	7,978	10,261
75 CABOT MICROELECTRONICS - 12709P103	10,827	10,824
80 CDW CORP/DE - 12514G108	8,200	11,427
110 CHARTER COMMUNICATIONS INC - 16119P108	51,892	53,358
380 CHUBB LIMITED - H1467J104	49,081	59,150
270 CINTAS CORP - 172908105	44,003	72,651
1645 CITIGROUP INC - 172967424	81,325	131,419
160 CME GROUP INC - 12572Q105	29,196	32,115
950 CONOCOPHILLIPS - 20825C104	47,725	61,778
115 COOPER COS INC - 216648402	22,835	36,948
190 CORELOGIC INC - 21871D103	7,875	8,304
1105 DANAHER CORP - 235851102	88,580	169,595
1260 DISCOVER FINANCIAL SVCS - 254709108	68,732	106,873

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
250 DOLLARAMA INC - 25675T107	8,888	8,600
310 DOVER CORP - 260003108	19,716	35,730
65 EQUIFAX INC - 294429105	8,849	9,107
545 FACEBOOK INC-A - 30303M102	93,205	111,861
1210 FIDELITY NATL INFO SVCS - 31620M106	111,016	168,298
560 FORTIVE CO - 34959J108	34,807	42,778
675 HEALTH CARE SELECT SPDR - 81369Y209	64,246	68,755
620 HOME DEPOT - 437076102	84,026	135,395
635 IAA INC - 449253103	18,291	29,883
135 IDEX CORP - 45167R104	12,524	23,220
85 INGREDION INC - 457187102	10,731	7,900
440 IQVIA HOLDINGS INC - 46266C105	64,956	67,984
195 KAR AUCTION SERVICE - 48238T109	3,377	4,249
40 L3 HARRIS TECHNOLOGIES INC - 502431109	5,650	7,914
55 LAB CORP OF AMER HLDGS NEW - 50540R409	7,821	9,304
2421 MICROSOFT CORP - 594918104	175,994	381,791
130 MSCI INC - 55354G100	30,415	33,563
150 NASDAQ INC. - 631103108	10,354	16,065
845 NIKE INC CL B - 654106103	46,100	85,606
299604.844 OW LARGE CAP STRATEGIES FD - 680414109	3,918,097	4,515,045
149056.759 OW MULTI-ASSET OPPS FUND - 680414802	1,088,886	1,126,869
97644.662 OW SMALL & MIDCAP STRAT FD - 680414604	1,501,065	1,521,303
435 PEPSICO INC - 713448108	44,959	59,451
165 PIONEER NATURAL RESOURCES - 723787107	30,421	24,976
1625 RENTOKIL INITIAL PLC -	8,380	9,746
110 S&P GLOBAL INC. - 78409V104	28,964	30,035
420 SAFRAN SA -	52,769	64,947
270 SALESFORCE COM - 79466L302	33,492	43,912
4335 SAMSONITE INTERNATIONAL SA -	13,166	10,403
225 SERVICENOW INC - 81762P102	38,300	63,522

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
150 SIX FLAGS ETTMENT CORP - 83001A102	9,059	6,766
210 SMITH A O CORP - 831865209	10,480	10,004
205 STERIS PLC - G8473T100	14,517	31,246
105 SYNOPSIS INC - 871607107	9,467	14,616
40 TELEFLEX INC - 879369106	10,553	15,057
1005 TENCENT HOLDINGS LTD -	42,187	48,445
500 TEXAS INSTRUMENTS INC - 882508104	50,223	64,145
270 THERMO FISHER SCIENTIFIC - 883556102	38,159	87,714
585 UNION PACIFIC CORP - 907818108	100,692	105,762
150 UNITEDHEALTH GROUP INC - 91324P102	39,503	44,097
12100 VANGUARD FTSE DEVL ETF - 921943858	497,904	533,126
60 VERISK ANALYTICS INC-CL A - 92345Y106	6,832	8,960
1330 VISA INC - 92826C839	109,420	249,907
260 WALT DISNEY CO - 254687106	30,243	37,603
400 WASTE MANAGEMENT INC NEW - 94106L109	41,020	45,584
141 WEST PHARMACEUTICAL SVC - 955306105	12,495	21,196
255 WYNDHAM HOTELS & RESORTS - 98311A105	13,402	16,016
1375 ZOETIS INC - 98978V103	93,596	181,981

TY 2019 Legal Fees Schedule

Name: THE BERNARD AND PAMELA BARBASH FAMILY
FOUNDATION

EIN: 16-1743055

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	743	0		743

TY 2019 Other Decreases Schedule

Name: THE BERNARD AND PAMELA BARBASH FAMILY
FOUNDATION

EIN: 16-1743055

Description	Amount
TRUNCATION	22
TO RECORD STOCK CONTRIBUTIONS AT TAX COST BASES	443,453
WASH SALE	7,269

TY 2019 Other Expenses Schedule

Name: THE BERNARD AND PAMELA BARBASH FAMILY
FOUNDATION

EIN: 16-1743055

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OHIO ANNUAL REPORT	200	0		200

TY 2019 Other Increases Schedule

Name: THE BERNARD AND PAMELA BARBASH FAMILY
FOUNDATION

EIN: 16-1743055

Description	Amount
DIFFERENCE BETWEEN FMV AND TAX COST BASES ON DONATED SECURITIES	187,958

TY 2019 Other Professional Fees Schedule

Name: THE BERNARD AND PAMELA BARBASH FAMILY
FOUNDATION

EIN: 16-1743055

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	33,696	22,460		11,236

TY 2019 Taxes Schedule

Name: THE BERNARD AND PAMELA BARBASH FAMILY
FOUNDATION

EIN: 16-1743055

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	1,546	1,359		0
EXCISE TAX	3,000	0		0

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors
▶ Attach to Form 990, 990-EZ, or 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047
2019

Name of the organization
THE BERNARD AND PAMELA BARBASH FAMILY
FOUNDATION

Employer identification number
16-1743055

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

- 501(c)() (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
 THE BERNARD AND PAMELA BARBASH FAMILY
 FOUNDATION

Employer identification number

16-1743055

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	See Additional Data Table	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)

Name of organization
 THE BERNARD AND PAMELA BARBASH FAMILY
 FOUNDATION

**Employer identification
 number**

16-1743055

Part II **Noncash Property** (see Instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
—	See Additional Data Table	\$ _____	_____
—	Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
—		\$ _____	_____
—	Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
—		\$ _____	_____
—	Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
—		\$ _____	_____
—	Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
—		\$ _____	_____
—	Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
—		\$ _____	_____

Name of organization THE BERNARD AND PAMELA BARBASH FAMILY FOUNDATION	Employer identification number 16-1743055
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Part III *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	

Additional Data

Software ID:

Software Version:

EIN: 16-1743055

Name: THE BERNARD AND PAMELA BARBASH FAMILY
FOUNDATION

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BERNARD AND PAMELA BARBASH <hr/> C/O BESSEMER TRUST 1225 FRANKLIN AV <hr/> GARDEN CITY, NY 11530	<hr/> \$ 25,244	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
2	BERNARD AND PAMELA BARBASH <hr/> C/O BESSEMER TRUST 1225 FRANKLIN AV <hr/> GARDEN CITY, NY 11530	<hr/> \$ 86,767	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
3	BERNARD AND PAMELA BARBASH <hr/> C/O BESSEMER TRUST 1225 FRANKLIN AV <hr/> GARDEN CITY, NY 11530	<hr/> \$ 16,294	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
4	BERNARD AND PAMELA BARBASH <hr/> C/O BESSEMER TRUST 1225 FRANKLIN AV <hr/> GARDEN CITY, NY 11530	<hr/> \$ 21,813	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
5	BERNARD AND PAMELA BARBASH <hr/> C/O BESSEMER TRUST 1225 FRANKLIN AV <hr/> GARDEN CITY, NY 11530	<hr/> \$ 67,322	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
6	BERNARD AND PAMELA BARBASH <hr/> C/O BESSEMER TRUST 1225 FRANKLIN AV <hr/> GARDEN CITY, NY 11530	<hr/> \$ 32,266	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	BERNARD AND PAMELA BARBASH	\$ 68,246	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
	C/O BESSEMER TRUST 1225 FRANKLIN AV		
	GARDEN CITY, NY 11530		
8	BERNARD AND PAMELA BARBASH	\$ 20,426	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
	C/O BESSEMER TRUST 1225 FRANKLIN AV		
	GARDEN CITY, NY 11530		
9	BERNARD AND PAMELA BARBASH	\$ 108,364	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
	C/O BESSEMER TRUST 1225 FRANKLIN AV		
	GARDEN CITY, NY 11530		
10	BERNARD AND PAMELA BARBASH	\$ 51,948	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
	C/O BESSEMER TRUST 1225 FRANKLIN AV		
	GARDEN CITY, NY 11530		
11	BERNARD AND PAMELA BARBASH	\$ 21,058	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
	C/O BESSEMER TRUST 1225 FRANKLIN AV		
	GARDEN CITY, NY 11530		
12	BERNARD AND PAMELA BARBASH	\$ 76,098	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
	C/O BESSEMER TRUST 1225 FRANKLIN AV		
	GARDEN CITY, NY 11530		

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	BERNARD AND PAMELA BARBASH	\$ 88,539	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
	C/O BESSEMER TRUST 1225 FRANKLIN AV		
	GARDEN CITY, NY 11530		
14	BERNARD AND PAMELA BARBASH	\$ 13,997	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
	C/O BESSEMER TRUST 1225 FRANKLIN AV		
	GARDEN CITY, NY 11530		
15	BERNARD AND PAMELA BARBASH	\$ 13,460	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
	C/O BESSEMER TRUST 1225 FRANKLIN AV		
	GARDEN CITY, NY 11530		
16	BERNARD AND PAMELA BARBASH	\$ 119,219	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
	C/O BESSEMER TRUST 1225 FRANKLIN AV		
	GARDEN CITY, NY 11530		
17	BERNARD AND PAMELA BARBASH	\$ 37,569	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
	C/O BESSEMER TRUST 1225 FRANKLIN AV		
	GARDEN CITY, NY 11530		
18	BERNARD AND PAMELA BARBASH	\$ 25,032	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
	C/O BESSEMER TRUST 1225 FRANKLIN AV		
	GARDEN CITY, NY 11530		

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<p><u>19</u></p>	<p>BERNARD AND PAMELA BARBASH</p>		<p>Person <input type="checkbox"/></p> <p>Payroll <input type="checkbox"/></p> <p>Noncash <input checked="" type="checkbox"/></p> <p>(Complete Part II for noncash contribution.)</p>
	<p>C/O BESSEMER TRUST 1225 FRANKLIN AV</p>	<p>\$ 18,047</p>	
	<p>GARDEN CITY, NY 11530</p>		
<p><u>20</u></p>	<p>BERNARD AND PAMELA BARBASH</p>		<p>Person <input type="checkbox"/></p> <p>Payroll <input type="checkbox"/></p> <p>Noncash <input checked="" type="checkbox"/></p> <p>(Complete Part II for noncash contribution.)</p>
	<p>C/O BESSEMER TRUST 1225 FRANKLIN AV</p>	<p>\$ 12,037</p>	
	<p>GARDEN CITY, NY 11530</p>		
<p><u>21</u></p>	<p>BERNARD AND PAMELA BARBASH</p>		<p>Person <input type="checkbox"/></p> <p>Payroll <input type="checkbox"/></p> <p>Noncash <input checked="" type="checkbox"/></p> <p>(Complete Part II for noncash contribution.)</p>
	<p>C/O BESSEMER TRUST 1225 FRANKLIN AV</p>	<p>\$ 100,405</p>	
	<p>GARDEN CITY, NY 11530</p>		

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<u>1</u>	205 SHS OF ALLEGION PLC	<u>\$ 25,244</u>	<u>2019-12-18</u>
<u>2</u>	64 SHS ALPHABET INC CLASS C	<u>\$ 86,767</u>	<u>2019-12-18</u>
<u>3</u>	135 SHS AMERICAN WATER WORKS CO	<u>\$ 16,294</u>	<u>2019-12-18</u>
<u>4</u>	85 SHS ANSYS INC	<u>\$ 21,813</u>	<u>2019-12-18</u>
<u>5</u>	240 SHS APPLE INC	<u>\$ 67,322</u>	<u>2019-12-18</u>
<u>6</u>	120 SHS CINTAS CORP	<u>\$ 32,266</u>	<u>2019-12-18</u>
<u>7</u>	875 SHS CITIGROUP INC	<u>\$ 68,246</u>	<u>2019-12-18</u>
<u>8</u>	64 SHS COOPER COS INC	<u>\$ 20,426</u>	<u>2019-12-18</u>
<u>9</u>	720 SHS DANAHER CORP	<u>\$ 108,364</u>	<u>2019-12-18</u>
<u>10</u>	600 SHS DISCOVER FINANCIAL SVCS	<u>\$ 51,948</u>	<u>2019-12-18</u>

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<u>11</u>	185 SHS DOVER CORP	<u>\$ 21,058</u>	<u>2019-12-18</u>
<u>12</u>	550 SHS FIDELITY NATL INFO SVCS	<u>\$ 76,098</u>	<u>2019-12-18</u>
<u>13</u>	405 SHS HOME DEPOT INC	<u>\$ 88,539</u>	<u>2019-12-18</u>
<u>14</u>	310 SHS IAA INC	<u>\$ 13,997</u>	<u>2019-12-18</u>
<u>15</u>	80 SHS IDEX CORP	<u>\$ 13,460</u>	<u>2019-12-18</u>
<u>16</u>	770 SHS MICROSOFT	<u>\$ 119,219</u>	<u>2019-12-18</u>
<u>17</u>	375 SHS NIKE INC CL B	<u>\$ 37,569</u>	<u>2019-12-18</u>
<u>18</u>	90 SHS SERVICENOW INC	<u>\$ 25,032</u>	<u>2019-12-18</u>
<u>19</u>	120 SHS STERIS PLC	<u>\$ 18,047</u>	<u>2019-12-18</u>
<u>20</u>	81 SHS WEST PHARMACEUTICAL SVC	<u>\$ 12,037</u>	<u>2019-12-18</u>

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<u>21</u>	790 SHS ZOETIS INC	<u>\$ 100,405</u>	<u>2019-12-18</u>