Return of Private Foundation

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990PF for instructions and the latest information

Form **990-PF**

| Fo | or calen | ndar year 2019 or tax year beginning | | 9, and | ending | | , 20 |
|----------------------------|-----------|--|-----------------------|-------------|---------------------------------------|--|----------------------------|
| | me of fou | | , | | | er Identification number | |
| s | ARAH | J. <u>CARS</u> ON CHARITABLE FOUNDATION | | | 20-6 | 452533 | |
| | | street (or P.O. box number if mail is not delivered to street address) | Roor | n/suite | | ne number (see instructi | ons) |
| 3 | 750 G | ALT OCEAN DR. | 150 | 2 | (954 | 306-2988 | |
| Cit | y or town | , state or province, country, and ZIP or foreign postal code | | _ | | tion application is pend | ıng check here ▶ □ |
| | | AUDERDALE FL 33308 | | | · ii cxcp | uon appiloanon io pone | |
| _ | | | of a former public | charity | D 1. Foreig | n organizations, check | here ▶□ |
| | | Final return Amended | | Í | _ | | |
| | | Address change | nge | | | n organizations meeting here and attach compu | |
| H | Check | type of organization: X Section 501(c)(3) exempt p | rivate foundation | : 7/) | | foundation status was | |
| | Section | on 4947(a)(1) nonexempt charitable trust Other tax | able private found | | section 5 | 07(b)(1)(A), check here | . ▶□ |
| հ T | Fair m | narket value of all assets at J Accounting method | : 🛛 Cash 🗌 A | ccrual | F If the fou | ndation is in a 60-mont | h termination |
| /_ | end o | f year (from Part II, col. (c), Other (specify) | | | under se | ction 507(b)(1)(B), check | chere . ▶ 🗌 |
| <u> </u> | line 16 | 6) ► \$ 144, 697. (Part I, column (d), must be | e on cash basis.) | | | | |
| $\mathcal{M}_{\mathbf{L}}$ | Part I | | (a) Revenue and | # N N I - A | 1 | (a) A durate de est | (d) Disbursements |
| ` | | amounts in columns (b), (c), and (d) may not necessarily equal | expenses per books | | investment come | (c) Adjusted net income | for charitable purposes |
| | | the amounts in column (a) (see instructions).) | DOOKS | | | | (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received (attach schedule) | 7,649. | | | | |
| | 2 | Check ► ☐ if the foundation is not required to attach Sch B | | | ય | | 1 |
| | 3 | Interest on savings and temporary cash investments | | | | | |
| | 4 | Dividends and interest from securities | 6,645. | | 6,645. | 6,645. | |
| | 5a | Gross rents | | | | | |
| | b | Net rental income or (loss) | | | · · · · · · · · · · · · · · · · · · · | | |
| ā | 6a | Net gain or (loss) from sale of assets not on line 10 | | | | | l |
| Revenue | b | Gross sales price for all assets on line 6a RECEIVE | | | | | |
| Š | 7 | Capital gain net income (from Partity, line 2) | ာင္စ | | 3,654. | | |
| α | 8 | Net short-term capital gain . Rel MAY 1 3 202 | n Ö | | | | |
| | 9 | 1 1. | S | | | | |
| | 10a | Gross sales less returns and allowances | | ļ | | | |
| | b | Less: Cost of goods sold OGDEN, | <u> </u> | | | | |
| | C | Gross profit or (loss) (attach schedule) | | | | | |
| | 11 | Other income (attach schedule) | | ļ | | | |
| _ | 12 | Total. Add lines 1 through 11 | 14,294. | | 10,299. | 6,645. | |
| Ø. | 13 | Compensation of officers, directors, trustees, etc. | | | | | |
| enses | 14 | Other employee salaries and wages | | | | | |
| | | Pension plans, employee benefits | | | | | |
| × | 16a b | Legal fees (attach schedule) | 27.5 | | 275 | 275 | |
| 8 % ddv dans: | C | Other professional fees (attach schedule) | 375. | | 375. | 375. | |
| ַלָּ ל | 17 | Interest | | | | | |
| > # | 18 | Taxes (attach schedule) (see instructions) See. Stmt | 532. | | 166. | 166. | |
| ğ : | 19 | Depreciation (attach schedule) and depletion | 332. | | 100. | 100. | 1 |
| <u>ي</u> و | 20 | Occupancy | | ļ | | | |
| ∞ ₹ | 21 | Travel, conferences, and meetings | | | | | |
| 20 | 22 | Printing and publications | | | | | |
| <u> </u> 2 | 23 | Other expenses (attach schedule) | | | | - | |
| 2 | 24 | Total operating and administrative expenses. | | | | | |
| \$ 202) Operating and | | Add lines 13 through 23 | 907. | | 541. | 541. | |
| 2 | 25 | Contributions, gifts, grants paid | 5,512. | , | | | 5,512. |
| O | 26 | Total expenses and disbursements. Add lines 24 and 25 | 6,419. | | 541. | 541. | 5,512. |
| | 27 | Subtract line 26 from line 12: | | | | | |
| | a | Excess of revenue over expenses and disbursements | 7,875. | <u></u> _ | | | |
| | b | Net investment income (if negative, enter -0-) . | | | 9,758. | | 1 |
| | C | Adjusted net income (if negative, enter -0-) | | , , | | 6,104. | -1 |

| Pa | rt IIs | Balance Sheets Attached schedules and amounts in the description column | Beginning of year | | End o | f year |
|-------------|-------------|---|------------------------|---------------|-------|-----------------------|
| | | should be for end-of-year amounts only. (See instructions.) | (a) Book Value | (b) Book Valu | е | (c) Fair Market Value |
| | 1 | Cash-non-interest-bearing | 1,611. | 3,8 | 85. | 3,885. |
| | 2 | Savings and temporary cash investments | | | | |
| | 3 | Accounts receivable ▶ | | | | |
| | | Less: allowance for doubtful accounts ▶ | | | | |
| | 4 | Pledges receivable ► | i | | | |
| | | 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 ▶ | | • | | |
| ठ | 8 | Inventories for sale or use | | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | | |
| As | 10a | Investments – U.S. and state government obligations (attach schedule) | | <u> </u> | | |
| - | ь | Investments—corporate stock (attach schedule) L-10b Stmt | 149,858. | 156,8 | 72. | 140,812. |
| | С | Investments—corporate bonds (attach schedule)L-10c Stmt | 1,290. | | 20. | 0. |
| | 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 | | | | |
| | | ınstructions. Also, see page 1, item l) | 152,759. | 160,8 | 77. | 144,697. |
| | 17 | Accounts payable and accrued expenses | | | | |
| (A) | 18 | Grants payable | | | | |
| <u>ë</u> | 19 | Deferred revenue | | • | | |
| Ę | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | |
| Liabilities | 21 | Mortgages and other notes payable (attach schedule) | | | | |
| _ | 22 | Other liabilities (describe >) | | | | |
| | 23 | Total liabilities (add lines 17 through 22) | | | | |
| S | | Foundations that follow FASB ASC 958, check here | | | | • |
| alances | | and complete lines 24, 25, 29, and 30. | | | | |
| <u>ā</u> | 24 | Net assets without donor restrictions | | | | |
| | 25 | Net assets with donor restrictions | | | | |
| or Fund B | | Foundations that do not follow FASB ASC 958, check here ▶ 🗵 | | | | |
| Ŀ | | and complete lines 26 through 30. | | | | |
| ō | 26 | Capital stock, trust principal, or current funds | | | | |
| ts | 27 | Paid-in or capital surplus, or land, bldg., and equipment fund | | | | |
| ŝ | 28 | Retained earnings, accumulated income, endowment, or other funds | 152,759. | 160,8 | | |
| As | 29 | Total net assets or fund balances (see instructions) | 152 , 759. | 160,8 | 77. | |
| Net Assets | 30 | Total liabilities and net assets/fund balances (see | | | | |
| | | instructions) | 152,759. | 160,8 | 77. | |
| | rt III | Analysis of Changes in Net Assets or Fund Balances | (-) !! #** 1 | | - | |
| 1 | | al net assets or fund balances at beginning of year—Part II, colu | | | _ | 150 350 |
| _ | | -of-year figure reported on prior year's return) | | | 1 | 152,759. |
| _ | | er amount from Part I, line 27a | | | 2 | 7,875. |
| 3 | | er increases not included in line 2 (itemize) UNREALIZED APE | | | 3 | 243. |
| 4 | _ | lines 1, 2, and 3 | | | 5 | 160,877. |
| 5 | Tota | reases not included in line 2 (Itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)— | Part II column (b) Irr | ne 29 | 6 | 160,877. |
| | , , , , , , | in the access of faile balances at one of year time 4 filling line of | , oolanni (b), iii | | , | 100,077. |

| Part | M Capital Gains and | d Losses for Tax on Investn | nent Income | | | |
|----------|---|---|--------------------------------------|--|--|---|
| | | ind(s) of property sold (for example, real e use; or common stock, 200 shs. MLC Co | | (b) How acquired P—Purchase D—Donation | (c) Date acqui (mo., day, yr | |
| 1a | FEDERATED INVESTOR | S INC | | P | 11/01/20 | 16 08/26/2019 |
| b | FIRSTENERGY CORP | | | P | 07/03/20: | |
| <u>C</u> | PENGROWTH ENERGY C | ORP | | P | 06/21/20 | |
| | ALTABA INC | | | D | 07/07/20 | 08 04/26/2019 |
| <u>е</u> | See Statement | - | | | | |
| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | 1 .0, | or other basis ense of sale | | h) Gain or (loss) plus (f) minus (g)) |
| <u>a</u> | 6,279. | | | 5,334. | | 945. |
| b | 6,100. | | | 5,515. | | 585. |
| <u>c</u> | 4. | | | 5,793. | | <u>-5,789.</u> |
| d | 7,492. | | | 2,372. | | 5,120. |
| e | 6, 334. | owing gain in column (h) and owned | by the foundation | 3,541. | | 2,793. |
| | (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Exce | ess of col. (i) ol. (j), if any | col (k), t | ns (Col. (h) gain minus out not less than -0-) or sses (from col. (h)) |
| а | | | | | | 945. |
| b | | | | | | 585. |
| <u>c</u> | | | | | | -5,789. |
| d | | | | | | 5,120. |
| е | | | | | ļ | 2,793. |
| 2 | Capital gain net income o | ir mei cabilal iossi 🔞 🧸 🦠 | also enter in P , enter -0- in Pa | | 2 | 3,654. |
| 3 | If gain, also enter in Part | in or (loss) as defined in sections t I, line 8, column (c). See instru | actions. If (loss | | 3 | |
| Part | | der Section 4940(e) for Red | | Net Investmen | t Income | |
| Was t | s," the foundation doesn't | e section 4942 tax on the distribu qualify under section 4940(e). Do | o not complete | this part. | | ☐ Yes ☐ No |
| _1_ | Enter the appropriate am | ount in each column for each ye | ar; see the inst | ructions before m | aking any ent | ries. |
| Cale | Base period years endar year (or tax year beginning ir | (b) Adjusted qualifying distribution | ns Net value | (c) of noncharitable-use a | ussets (co | Distribution ratio ol. (b) divided by col. (c)) |
| | 2018 | | 000. | 120,4 | | 0.041519 |
| | 2017 | | 365. | 107,2 | | 0.040690 |
| | 2016 | | 30. | 90,7 | | 0.043290 |
| | 2015 | | 918. | 80,9 | | 0.048388 |
| | 2014 | 3,8 | 185. | 83,5 | 521. | 0.046515 |
| 2 | Total of line 1, column (d |) | | | . 2 | 0.220402 |
| 3 | | o for the 5-year base period—difoundation has been in existence | | | | 0.044080 |
| 4 | Enter the net value of nor | ncharitable-use assets for 2019 | from Part X, line | e 5 | . 4 | 135,983. |
| 5 | Multiply line 4 by line 3 | | | | . 5 | 5,994. |
| 6 | Enter 1% of net investme | ent income (1% of Part I, line 27t | o) | | . 6 | 98. |
| 7 | Add lines 5 and 6 | | | | . 7 | 6,092. |
| 8 | · · · · · · | ons from Part XII, line 4 | | | | 5,512. g a 1% tax rate. See the |
| | Part VI instructions. | - · , - · · - · · · · · · · · · · · · · · · | , | | | - |

| Part | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see it | nstru | ction | ns) |
|------|---|-------|-------|-------------|
| | 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 | | 1 | 95. |
| _ | here ▶ □ and enter 1% of Part I, line 27b | | | <u> </u> |
| С | 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-) | | | 0. |
| 3 | Add lines 1 and 2 | | 1 | 95. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | | | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | | 1 | 95. |
| 6 | Credits/Payments: | | | \neg |
| а | 2019 estimated tax payments and 2018 overpayment credited to 2019 6a | | | - 1 |
| b | Exempt foreign organizations—tax withheld at source | | | (|
| C | Tax paid with application for extension of time to file (Form 8868) 6c | | | - 1 |
| d | Backup withholding erroneously withheld 6d | | | |
| 7 | Total credits and payments. Add lines 6a through 6d | | | |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | 1 | 95. |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10 | | | 0. |
| 11 | Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11 | | | |
| Part | VII-A Statements Regarding Activities | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | Yes | No |
| - | participate or intervene in any political campaign? | 1a | | × |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the | | | |
| | instructions for the definition | 1b | | × |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | \neg |
| | published or distributed by the foundation in connection with the activities. | | | |
| С | Did the foundation file Form 1120-POL for this year? | 1c | | × |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | |
| | (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$ | | | - 1 |
| е | Enter the reimbursement (If any) paid by the foundation during the year for political expenditure tax imposed | | | - 1 |
| | on foundation managers. ► \$ | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | _×_ |
| | If "Yes," attach a detailed description of the activities. | | | 1 |
| 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 . | 3 | | <u> </u> |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | × |
| | If "Yes," attach the statement required by General Instruction T. | | | - 1 |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | |
| | By language in the governing instrument, or | | | ١, ١ |
| | • 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? | 6 | X_ | |
| 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 | 7 | × | |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ | | | j |
| | PA | | |] |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | | |
| | (or designate) of each state as required by General Instruction G? If "No," attach explanation | 8b | × | |
| 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 | 9 | | <u>×</u> |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | |
| | names and addresses | 10 | × | |

| Part | 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 | | × |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions | 12 | | × |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | × | |
| | Website address ► N/A | | | |
| 14 | The books are in care of ► SARAH J. CARSON Telephone no. ► (954). | 306- | 2988 | |
| | Located at ▶ 3750 GALT OCEAN DRIVE APT. 1502 FORT LAUDERDALE FL ZIP+4 ▶ 33308 | | | |
| 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 | | | |
| 16 | At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority | | Yes | No |
| | over a bank, securities, or other financial account in a foreign country? | 16 | | × |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶ | | | |
| Parl | VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a | During the year, did the foundation (either directly or indirectly): | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No No Yes No | | | |
| | disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for | | | |
| | the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the | | | - |
| | foundation agreed to make a grant to or to employ the official for a period after | 1 | | |
| | termination of government service, if terminating within 90 days.) | | | i |
| b | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions . | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance, check here ▶ □ | | | |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that | | | |
| | were not corrected before the first day of the tax year beginning in 2019? | 1c | | × |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| а | At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines | | | |
| | 6d and 6e) for tax year(s) beginning before 2019? | | | |
| | If "Yes," list the years ▶ 20, 20, 20, 20 | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.) | | | |
| _ | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | 2b | | × |
| | ▶ 20 , 20 , 20 , 20 | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | | | |
| b | If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the | | | |
| | Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the | | | |
| | foundation had excess business holdings in 2019.) | 3b | - | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | × |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | | | |
| _ | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019? | 4h | | × |

| Pa | ae | 6 |
|----|----|---|
| | | |

| Part | VII-B Statements Regarding Activities | s for W | hich Form | 4720 | May Be R | equire | d (conti | nued) | | | |
|----------------------|--|------------|---|--------------------------------|------------------------|----------|--------------|--|-----------|--------------------|-----|
| 5a | During the year, did the foundation pay or incur | | | | | | | | | Yes | No |
| | (1) Carry on propaganda, or otherwise attempt | | | | | | ☐ Yes | ⊠ No | | ļ | . [|
| | (2) Influence the outcome of any specific publi | | on (see secti | on 495 | 5); or to ca | arry on | | | | | |
| | directly or indirectly, any voter registration di | | | | | | Yes Yes | ⊠ No | | | |
| | (3) Provide a grant to an individual for travel, stu | | | | | | Yes | ⊠ No | | | |
| | (4) Provide a grant to an organization other than | | | - | | ribed in | | | | | |
| | | | | | | • • | ☐ Yes | ⊠ No | | | |
| | (5) Provide for any purpose other than religious | | | | | | _ | 6 7 | | | |
| | purposes, or for the prevention of cruelty to | | | | | | Yes | No 🔀 | | | |
| b | If any answer is "Yes" to 5a(1)–(5), did any of the in Regulations section 53.4945 or in a current no | | | | | | | scribea | <u></u> | | |
| | Organizations relying on a current notice regardi | | | | | | | | 5b | | |
| С | If the answer is "Yes" to question 5a(4), does to | _ | | | | | | | | | |
| · | because it maintained expenditure responsibility | | | | | | ∏Yes | □No | | | |
| | If "Yes," attach the statement required by Regul | | _ | | | | | | | | |
| 6a | Did the foundation, during the year, receive any | | | | | emiums | | | - | | |
| | on a personal benefit contract? | | | | | | ☐ Yes | ⊠ No | | | |
| b | Did the foundation, during the year, pay premiur | ns, dire | ctly or indire | ctly, on | a personal | benefi | contract | ? . | 6b | | × |
| | If "Yes" to 6b, file Form 8870. | | | | | | | | | | |
| 7a | At any time during the tax year, was the foundation | a party | to a prohibit | ed tax s | helter trans | action? | ☐ Yes | ⊠ No | | | |
| b | If "Yes," did the foundation receive any proceed | | | | | | | n? . | 7b | | |
| 8 | Is the foundation subject to the section 4960 ta | | | | | | | _ | | | |
| | remuneration or excess parachute payment(s) d | | | | | | | | <u> </u> | | |
| Part | VIII Information About Officers, Direct | tors, 1 | Trustees, F | ounda | tion Mana | agers, | Highly I | Paid Er | nploy | ees, | |
| _ | and Contractors List all officers, directors, trustees, and found | lation r | managare ar | d thair | compane | ation (| Saa instri | ıotione | | | |
| | List all Officers, directors, trustees, and found | · | e, and average | | mpensation | | Contribution | | | | |
| | (a) Name and address | | rs per week | | ot paid, | l emplo | yee benefit | plans | (e) Expe | nse acc allowan | |
| | | | | | | | | ensation | other | anowan | 003 |
| SAR | I CARSON | devot | ed to position | | ter -0-) | | erred compe | ensation | other | allowall | |
| | AH J. CARSON GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 | devot | | | | | | ensation 0. | other | allowall | |
| 3750 | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 | devot | ed to position RUSTEE | | ter`-0-) | | | | other | anowan | 0. |
| 3750 MICI | | devot | ed to position RUSTEE 1.00 | | ter`-0-) | | | | other | anowan | |
| 3750 MICI | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS | devot | ed to position RUSTEE 1.00 RUSTEE | | 0 . | | | 0. | other | allowall | 0. |
| 3750 MICI | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS | devot | ed to position RUSTEE 1.00 RUSTEE | | 0 . | | | 0. | other | allowall | 0. |
| 3750 MICI | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS | devot | ed to position RUSTEE 1.00 RUSTEE | | 0 . | | | 0. | other | allowall | 0. |
| 3750 MICH 1 GH | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS RAHAM PLACE PITTSBURGH PA 15232 | CO-T | ed to position RUSTEE 1.00 RUSTEE 1.00 | en | 0. 0. | and def | erred compe | 0. | | | 0. |
| 3750 MICI | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS RAHAM PLACE PITTSBURGH PA 15232 Compensation of five highest-paid employed | CO-T | ed to position RUSTEE 1.00 RUSTEE 1.00 | en | 0. 0. | and def | erred compe | 0. | | | 0. |
| 3750 MICH 1 GH | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS RAHAM PLACE PITTSBURGH PA 15232 | CO-T | ed to position RUSTEE 1.00 RUSTEE 1.00 | en | 0. 0. | and def | see instr | 0. | | | 0. |
| 3750 MICI 1 GI | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS RAHAM PLACE PITTSBURGH PA 15232 Compensation of five highest-paid employer "NONE." | devot CO-T | ed to position RUSTEE 1.00 RUSTEE 1.00 er than thos | se inclu | 0. 0. uded on li | and def | see instr | 0. 0. uctions | 6). If no | one, (| 0. |
| 3750 MICI 1 GI | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS RAHAM PLACE PITTSBURGH PA 15232 Compensation of five highest-paid employed | devot CO-T | ed to position RUSTEE 1.00 RUSTEE 1.00 | se incluverage | 0. 0. | and def | see instr | 0. 0. uctions | 6). If no | one, (| 0. |
| 3750 MICI 1 GH | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS RAHAM PLACE PITTSBURGH PA 15232 Compensation of five highest-paid employer "NONE." | devot CO-T | ed to position RUSTEE 1.00 RUSTEE 1.00 er than those (b) Title, and a hours per view. | se incluverage | 0. 0. uded on li | and def | see instr | 0. 0. uctions | 6). If no | one, (| 0. |
| 3750 MICI 1 GI | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS RAHAM PLACE PITTSBURGH PA 15232 Compensation of five highest-paid employer "NONE." | devot CO-T | ed to position RUSTEE 1.00 RUSTEE 1.00 er than those (b) Title, and a hours per view. | se incluverage | 0. 0. uded on li | and def | see instr | 0. 0. uctions | 6). If no | one, (| 0. |
| 3750 MICI 1 GH | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS RAHAM PLACE PITTSBURGH PA 15232 Compensation of five highest-paid employer "NONE." | devot CO-T | ed to position RUSTEE 1.00 RUSTEE 1.00 er than those (b) Title, and a hours per view. | se incluverage | 0. 0. uded on li | and def | see instr | 0. 0. uctions | 6). If no | one, (| 0. |
| 3750 MICI 1 GH | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS RAHAM PLACE PITTSBURGH PA 15232 Compensation of five highest-paid employer "NONE." | devot CO-T | ed to position RUSTEE 1.00 RUSTEE 1.00 er than those (b) Title, and a hours per view. | se incluverage | 0. 0. uded on li | and def | see instr | 0. 0. uctions | 6). If no | one, (| 0. |
| 3750 MICI 1 GH | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS RAHAM PLACE PITTSBURGH PA 15232 Compensation of five highest-paid employer "NONE." | devot CO-T | ed to position RUSTEE 1.00 RUSTEE 1.00 er than those (b) Title, and a hours per view. | se incluverage | 0. 0. uded on li | and def | see instr | 0. 0. uctions | 6). If no | one, (| 0. |
| 3750 MICI 1 GH | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS RAHAM PLACE PITTSBURGH PA 15232 Compensation of five highest-paid employer "NONE." | devot CO-T | ed to position RUSTEE 1.00 RUSTEE 1.00 er than those (b) Title, and a hours per view. | se incluverage | 0. 0. uded on li | and def | see instr | 0. 0. uctions | 6). If no | one, (| 0. |
| 3750 MICI 1 GH | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS RAHAM PLACE PITTSBURGH PA 15232 Compensation of five highest-paid employer "NONE." | devot CO-T | ed to position RUSTEE 1.00 RUSTEE 1.00 er than those (b) Title, and a hours per view. | se incluverage | 0. 0. uded on li | and def | see instr | 0. 0. uctions | 6). If no | one, (| 0. |
| 3750 MICI 1 GH | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS RAHAM PLACE PITTSBURGH PA 15232 Compensation of five highest-paid employer "NONE." | devot CO-T | ed to position RUSTEE 1.00 RUSTEE 1.00 er than those (b) Title, and a hours per view. | se incluverage | 0. 0. uded on li | and def | see instr | 0. 0. uctions | 6). If no | one, (| 0. |
| 3750 MICI 1 GH | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS RAHAM PLACE PITTSBURGH PA 15232 Compensation of five highest-paid employer "NONE." | devot CO-T | ed to position RUSTEE 1.00 RUSTEE 1.00 er than those (b) Title, and a hours per view. | se incluverage | 0. 0. uded on li | and def | see instr | 0. 0. uctions | 6). If no | one, (| 0. |
| 3750 MICH 1 GH | GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 HAEL SAMUELS RAHAM PLACE PITTSBURGH PA 15232 Compensation of five highest-paid employer "NONE." | devot CO-T | ed to position RUSTEE 1.00 RUSTEE 1.00 er than those (b) Title, and a hours per widevoted to position | se inclusiverage veek position | 0. 0. uded on li | and def | see instr | 0. 0. uctions utions to benefit deferred sation | 6). If no | one, (| 0. |

| Part | | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued) | |
|-------------|-----------------------|---|-------------------|
| 3 | Five | nighest-paid independent contractors for professional services. See instructions. If none, enter "NOI | NE." |
| | | (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Compensation |
| NON | | | |
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| | | er of others receiving over \$50,000 for professional services | 0 |
| | IX-A | Summary of Direct Charitable Activities | <u>. T</u> |
| List org | the four anization | ndation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of is and other beneficianes served, conferences convened, research papers produced, etc. | Expenses |
| 1 | | | |
| | | | - |
| | | | |
| 2 | | | . |
| | | | - |
| | | | |
| 3 | | | |
| | | | |
| | | | |
| 4 | | | - |
| | | | - |
| Pari | IX-B | Summary of Program-Related Investments (see instructions) | <u> </u> |
| | | e two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
| 1 | | | |
| • | | | • |
| | | | - |
| 2 | | | |
| | | | |
| | | | |
| All | other pro | gram-related investments. See instructions | |
| 3 | | | _ |
| | | | |
| | | | |
| Total | . Add I | nes 1 through 3 | |
| | | | Form 990-PF (2019 |

| Part | Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.) | gn fou | ndations, |
|------|--|--|-------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | | |
| _ | purposes: | 4- | 125 206 |
| a | Average monthly fair market value of securities | 1a | 135,306. |
| b | Average of monthly cash balances | 1b | 2,748. |
| C | Fair market value of all other assets (see instructions) | 1c | 120.054 |
| d | Total (add lines 1a, b, and c) | 1d | 138,054. |
| е | · · · · · · · · · · · · · · · · · · · | | |
| _ | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 120.054 |
| 3 | Subtract line 2 from line 1d | 3 | 138,054. |
| 4 | Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see | | 0 071 |
| _ | instructions) | 4 | 2,071. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 135,983. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 6,799. |
| Part | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ► □ and do not complete this part.) | oundat | ions |
| 1 | <u> </u> | 1 | 6,799. |
| 2a | Minimum investment return from Part X, line 6 | | 07.733. |
| b | Income tax for 2019. (This does not include the tax from Part VI.) 2b | 1 | |
| c | Add lines 2a and 2b | 2c | 195. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 6,604. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0,004. |
| 5 | Add lines 3 and 4 | 5 | 6,604. |
| 6 | Deduction from distributable amount (see instructions) | 6 | - 0,0011 |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, | | |
| • | line 1 | 7 | 6,604. |
| 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 | 5,512. |
| b | Program-related investments—total from Part IX-B | 1b | |
| 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: | _ | |
| а | 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 | 5,512. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. | | 3/312. |
| - | Enter 1% of Part I, line 27b. See instructions | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 5,512. |
| - | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating | | |
| | qualifies for the section 4940(e) reduction of tax in those years. | ******** | |

| | | (a) Corpus | (b) Years prior to 2018 | (c) 2018 | (d) 2019 |
|----|--|---------------|----------------------------|-------------|--------------------|
| 1 | Distributable amount for 2019 from Part XI, line 7 | | | | 6,604. |
| 2 | Undistributed income, if any, as of the end of 2019: | | | | |
| а | Enter amount for 2018 only | | | 5,512. | |
| b | Total for prior years: 20 , 20 , 20 | | | | |
| 3 | Excess distributions carryover, if any, to 2019: | | | | |
| а | From 2014 | | | | |
| b | From 2015 0. | | | | |
| С | From 2016 0. | | | | • |
| d | From 2017 0. | | | | |
| e | From 2018 0 . | | | | |
| f | Total of lines 3a through e | 0. | | | |
| 4 | Qualifying distributions for 2019 from Part XII, line 4: ► \$5,512. | | | | |
| а | Applied to 2018, but not more than line 2a . | | | 5,512. | |
| b | Applied to undistributed income of prior years (Election required—see instructions) | | | | |
| С | Treated as distributions out of corpus (Election required—see instructions) | | | | |
| d | Applied to 2019 distributable amount | | | | |
| е | 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).) | | | | |
| 6 | Enter the net total of each column as indicated below: | | | | |
| а | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 0. | | | |
| b | Prior years' undistributed income. Subtract line 4b from line 2b | | 0. | | |
| С | Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | | , | |
| d | Subtract line 6c from line 6b. Taxable amount—see instructions | | 0. | | |
| е | 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 | i | | | 6,604. |
| 7 | Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions) | | | | |
| 8 | Excess distributions carryover from 2014 not 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: | | | | |
| а | Excess from 2015 0 . | | | | |
| b | Excess from 2016 0 . | | | | |
| С | Excess from 2017 0 . | | | | |
| d | Excess from 2018 0 . | | | | |
| е | Excess from 2019 0 . | | | | |

| -Part XV- Supplementary Information (con: 3 Grants and Contributions Paid During | tinued) the Year or Approv | ed for Fu | ture Payment | |
|--|---|------------|----------------------------------|-----------|
| Recipient | If recipient is an individual, | Foundation | | |
| | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| TEMPLE BAT-YAM 5151 NE 14TH TER | | | | |
| FORT LAUDERDALE FL 33334 | | | CHARITABLE | 5,512. |
| FORT DAODERDADE TO 33334 | | | | 0,522. |
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| | | <u> </u> | | 5 510 |
| Total | · · · · · · · · · · · · · · · · · · · | · · · · | <u> ▶ ;</u> | 3a 5,512. |
| b Approved for future payment | | | | |
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| Total | | | | 3b |

| | | Analysis of Income-Producing Ac | | | Trustudad bu acatu | m E10 E10 av E1 | <u> </u> |
|-------------------------|-------------------------------|--|-------------------------|--|--|-----------------|---|
| | | ss amounts unless otherwise ındicated. | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | (e) Related or exempt function income (See instructions.) |
| 1 | Prog | ram service revenue: | | | ļ | | (000 |
| | a _ | | | | | | |
| | b _ | | | | | | |
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| | e ¯ | | | | <u> </u> | | |
| | f | | · | | | | |
| | g F | ees and contracts from government agencies | | | | | |
| 2 | _ | bership dues and assessments | | | | | |
| 3 | Inter | est on savings and temporary cash investments | | | i i | | |
| 4 | Divid | dends and interest from securities | | | | | 6,645. |
| 5 | Net | rental income or (loss) from real estate: | | | | | |
| | | Debt-financed property | | | | - | |
| | | Not debt-financed property | | | | | |
| 6 | | rental income or (loss) from personal property | | | | | |
| 7 | | er investment income | | | | | |
| 8 | | or (loss) from sales of assets other than inventory | | | <u> </u> | | - |
| 9 | | income or (loss) from special events | | | 1 | | - |
| 10 | | ss profit or (loss) from sales of inventory | | | | | |
| 11 | | | - | | 1 | | |
| ••• | | er revenue: a | i . | | | | <u> </u> |
| | _ | | | | | | |
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| | | | | | + | | |
| 40 | е _ | total. Add columns (b), (d), and (e) | | | | | 4 4 . 4 |
| | Cule | | | | | | 1 6 6 1 5 |
| 12 | Subt | total. Add columns (b), (d), and (e) | | <u>. </u> | 1 | 40 | |
| 13 | Tota | II. Add line 12, columns (b), (d), and (e) | | | | 13 | |
| 13 (See | Tota work | al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation | 1s.) | | | 13 | |
| 13 (See Pa | Tota work | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | al. Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
| 13 (See Pa Lin | Tota work t XV e No. | Add line 12, columns (b), (d), and (e) | ns.) Accomplishm | ent of Exemp | ot Purposes | | 6,645. |
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| Part | XVII | Informa Organiz | | | ng Trai | nsfers t | o and Tr | ansactio | ns and | Relationsh | ips W | ith No | oncha | ritabl | e Exe | mpt |
|-------------------|----------------|--|------------|---------------|---------------|---------------|----------------|-----------------|--------------|--------------------|-----------|----------------|--------------------|-----------|------------|----------|
| 1 | in se organ | he organization ection 501(c) nizations? |) (othe | r than | section | 501(c)(3 | 3) organiz | ations) o | r in sec | tion 527, re | nizatio | on des to p | cribed olitical | | Yes | No |
| а | | sfers from the | • | _ | | | | | _ | | | | | 1a(1) | | × |
| | | ash | | | | | | | | | | | | 1a(1) | _ | × |
| b | | r transactions | | | • • • | | | | | | | | • • | Ta(Z) | | Ê |
| Б | | ales of assets | | oncharit | ahla av | empt ord | anization | | | | | | | 1b(1) | | × |
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| | | ental of facili | | | | | | | | | | | | 1b(3) | | × |
| | | eimbursemer | | | | | | | | | | | | 1b(4) | | × |
| | | oans or loan | | | | | | | | | | | • • | 1b(5) | | × |
| | | erformance o | | | | | | | | | | | • • | 1b(6) | | × |
| С | | ing of facilitie | | | | | _ | | | | | | | 1c | | × |
| _ | | answer to a | | | | | | | | | | | | | fair m | |
| • | | of the goods | | | | | | | | | | | | | | |
| | | in any transa | | | | | | | | | | | | | | |
| (a) Line | no. | (b) Amount involv | ved | (c) Nan | ne of nonc | haritable e | xempt organ | zation | (d) Des | cription of transf | ers, trar | nsactions | s, and sh | aring arr | angeme | ents |
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| 2a | | e foundation ribed in section | | | | | | | | nore tax-exe | empt c | organiz | ations | □ Ye | . Y | l No |
| ь | | es," complete | | | | | . (0)(0), 0. | 0001.01. | 027 | | • | • | • • | _ · · | 3 <u>(</u> | NO |
| | | (a) Name of o | | | | , T | (b) Type of | organization | 1 | 1 | (c) Des | scription | of relation | nship | | |
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| | | er penalties of pen | ury, I dec | lare that I h | ave examin | ed this retur | m, including a | ccompanying | schedules ar | nd statements, an | d to the | best of n | ny knowle | dge and | belief, it | is true, |
| Sign | Corre | ect, and complete | Declarati | on of prepa | rer (other th | nan taxpayer |) is based on | all information | of which pre | parer has any kno | owledge. | . [| May the | IRS discu | iss this | return |
| Here | 10 | Sour. | | r, (20 | Sal | | 2/6/ | <i>Z//</i> co | O-TRUST | 'EE | | | with the p | | | |
| | | nature of officer o | r trustee | | - | | Date | Titl | | | | — L | See instru | ictions. | ∐ res[| 740 |
| Paid | • | Print/Type prep | oarer's n | ame | | Prepare | s's signature | | | Date | / | Check | X ıf | PTIN | | |
| Prepare | arer | REBECCA | SPIE | GEL | | te | becci | a So | uge | 0 7/3/. | 20 | self-en | nployed | P003 | 4550 | 8 |
| Use (| | Firm's name | | EBECCA | SPIE | GEL | | | | | Firm's | s EIN ▶ | | | | |
| - 30 (| ~···y | | | | | | | | | | 1 - | - | 4101 | 01 0 | ^1^ | |

PA 15217

Phone no (412) 421-3213

Firm's address ▶

BAA

2306 SHADY AVE.

PITTSBURGH

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Employer identification number

SARAH J. CARSON CHARITABLE FOUNDATION 20-6452533 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 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

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization
SARAH J. CARSON CHARITABLE FOUNDATION

Employer identification number

20-6452533

| Part I | Contributors (see instructions). Use duplicate copies o | f Part I if additional space is | needed. |
|------------|--|---------------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | SARAH J. CARSON 3750 GALT OCEAN DR. APT. 1502 FORT LAUDERDALE FL 33308 | \$7,649. | Person 🗵 Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | · · · · · · · · · · · · · · · · · · · | \$ | Person |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person |

Name of organization
SARAH J. CARSON CHARITABLE FOUNDATION

Employer identification number

20-6452533

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 |
|---------------------------|--|---|----------------------|
| 1 | 100SHS ALTABA INC | | |
| | | \$7,649. | 04/25/2019 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | | |
| | | \$ | |

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

BAA

| SARAH J | . CARSON CHARITABLE FOUNDAT | | | 20-6452533 | |
|---------------------------|---|-------------|---------------------------------------|--------------------------------|------------------|
| Part III | Exclusively religious, charitable, et | | | | |
| | (10) that total more than \$1,000 for the following line entry. For organizat | | | | |
| | contributions of \$1,000 or less for th | | | | iaritable, etc., |
| | Use duplicate copies of Part III if add | | | | |
| (a) No. from | (b) Purpose of gift | (c) Use of | | (d) Description of how | gift is held |
| Part I | | | | | |
| | | | | | |
| | | | | | |
| - | | | | | |
| | | (e) Transfe | r of gift | | |
| | Transferee's name, address, ar | nd ZIP + 4 | Relatio | nship of transferor to transfe | eree |
| , | | | · | | |
| | | | | | |
| | | ••••• | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of | gift | (d) Description of how | gift is held |
| | | | | | |
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| | | | | | |
| - | | (a) Transfa | r of aift | 1 | |
| | | (e) Transfe | | | |
| | Transferee's name, address, ar | nd ZIP + 4 | Relatio | nship of transferor to transfe | eree |
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| | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of | gift | (d) Description of how | gift is held |
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| | | | | | |
| | | (e) Transfe | r of gift | | |
| | Transferee's name, address, a | | _ | nship of transferor to transfe | roo |
| L | Transieree S name, address, ar | | Ticiano | namp of dansieror to dansie | |
| ŀ | | | | | |
| | | | | | |
| (a) No | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of | gift | (d) Description of how | gift is held |
| | | | | | |
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| | | | | | |
| | | (e) Transfe | r of gift | | |
| | Transferee's name, address, a | | _ | nship of transferor to transfe | eree |
| | Transieree 3 name, address, al | | 11010110 | or autororor to trailsie | |
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REV 04/21/20 PRO

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Taxes

| Continu | ation | Statement |
|---------|-------|-----------|
|---------|-------|-----------|

| Description | Revenue and Expense per Book | Net Investment Income | Adjusted Net Income | Disbursement for charitable purpose |
|---------------|------------------------------------|-----------------------------|------------------------|-------------------------------------|
| TAXES FEDERAL | 366. | | | |
| FOREIGN TAXES | 166. | 166. | 166. | |
| Total | 532. | 166. | 166. | |

Additional information from your 2019 Federal Exempt Tax Return

Form 990-PF Part II Line 10, 12 and 13 Investments L-10b Stmt

Continuation Statement

| Line 10b Description | Line 10b Book | Line 10b FMV |
|---------------------------------------|---------------|--------------|
| ALLIANCEBERNSTEIN GLOBAL HIGH INCOME | 4,417. | 3,639. |
| CORECIVIC INC | 6,556. | 3,476. |
| AT&T INC | 11,414. | 13,678. |
| EQT CORPORATION | 1,335. | 1,090. |
| GLAXOSMITHKLINE PLC SPONS ADR | 5,674. | 5,874. |
| WILLIAMS COS INC | 9,776. | 7,116. |
| FIRST TR EXCHANGE TRADED FD VI MULTI | 3,635. | 3,758. |
| ALPS ETF TR ALERIAN MLP ETF | 8,679. | 6,800. |
| MACYS INC | 7,807. | 6,800. |
| PFIZER INC | 4,676. | 5,877. |
| VERIZON COMMUNICATIONS | 9,088. | 12,280. |
| JPMORGAN CHASE & CO ALERIAN MLP INDEX | 6,393. | 4,362. |
| ENBRIDGE INC | 10,006. | 11,931. |
| EQUITRANS MIDSTREAM CORP | 5,224. | 4,008. |
| GENERAL MILLS | 6,422. | 8,034. |
| OFS CREDIT CO | 10,861. | 9,126. |
| TUPPERWARE | 8,443. | 1,716. |
| NEWELL BRANDS INC | 5,682. | 7,688. |
| ROYAL DUTCH SHELL PLC | 8,796. | 8,996. |
| TAILORED BRANDS INC | 4,565. | 2,070. |
| Total | 139,449. | 128,319. |

| Name SARAH J. CARSON CHARITAE | BLE FOUNDATION | 4 | | | yer Identification No 452533 |
|---|---|---|----------------------------------|------------------------------|---|
| Line 10a - Investments - US and State Government Obligations: | End o State and Local Obligations Book Value | f Year State and Local Obligations FMV | US Govern Obligati Book Va | nment ons | f Year US Government Obligations FMV |
| | | | | | |
| Tot to Fm 990-PF, Pt II, Ln 10a | | | | | |
| Line 10b - Investme | ents - Corporate | Stock: | Book Value | • | f Year Fair Market Value |
| 200 SHS. PPL CORP CLEVELAND CLIFFS See L-10b Stmt Totals to Form 990-PF, Part II, L | ine 10b | | 11, 139, | 565. 858. 449. 872. | 7,176. 5,317. 128,319. 140,812. |
| Line 10c - Investme | nts - Corporate I | Bonds: | Book Value | • | f Year Fair Market Value |
| WELLS FARGO MTG BACKED | SECURITIES | | | 120. | 0. |
| Totals to Form 990-PF, Part II, L | ine 10c | | | 120. | 0. |
| Line 12 - Investme | ents - Mortgage I | oans: | Bool Value | • | f Year Fair Market Value |
| Totals to Form 990-PF, Part II, L | ine 12 | | | | |
| | | | | - | |
| Line 13 - Inve | estments - Other | : | Bool Value | < | f Year Fair Market Value |
| | | | | | |
| Totals to Form 990-PF, Part II, I | ine 13 | | | | |

SARAH J. CARSON CHARITABLE FOUNDATION

Form 990-PF: Return of Private Foundation

Part IV: Capital Gains and Losses for Tax on Investment Income

Continuation Statement

| (e.g., real estate, | e the kind(s) of proper 2-story brick warehous k, 200 shs. MLC Co.) | | (b) How acquired P-Purchase D-Donation | (c) Date | (d) Date sold |
|---------------------------|---|------------------|--|------------------------------------|------------------|
| WELLS FARGO MBS SER 20 | 06-12 | | P | 06/07/07 | 09/25/19 |
| ALTABA INC | | | P | 07/07/08 | 09/23/19 |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | st or other us expense of sale | (h) Gain ((e) plus (g | (f) minus |
| 1,184. | | | 1,169. | | 15. |
| 5,150. | | | 2,372. | | 2,778. |
| 6,334. | 0. | | 3,541. | | 2,793. |
| Complete only for ass | ets showing gain in co e foundation on 12/31/ | lumn (h) a 69 | | gain minus | |
| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | ess of col. col. (j), if any | but not less or Losses ((h) | from col. |
| | | | | | 15. |
| | | | | | 2,778. |
| 0. | 0. | - | 0. | | 2,793. |

SARAH J. CARSON CHARITABLE FOUNDATION

Form 990-PF: Return of Private Foundation

| Part XV, Line 2: Supplementary Information Regarding | g Contribution, Grant, Gift, Loan, Scholarship, etc. | ship, etc. | Continuation Statement |
|--|---|---------------------------|------------------------|
| Name and Address Information | Form Information | Submission Information | Restrictions |
| | FOUNDATION MAKES CHARITABLE CONTRIBUTIONS TO APPROVED CHARITABLE ORGANIZATIONS. | | |