Form 990-PF

EXTENDED TO NOVEMBER 16, 2020 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.

2019

► Go to www.irs.gov/Form990PF for instructions and the latest information. Internal Revenue Servic For calendar year 2019 or tax year beginning and ending Name of foundation A Employer identification number DARYL & STEVEN ROTH FOUNDATION 22-3339611 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number INTERSTATE PROP 210 ROUTE 4 EAST 201-587-1000 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here PARAMUS, NJ 07652 G Check all that apply: initial return initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test; check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation Check type of organization: If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust ____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: X Cash Accrual F If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 12, 276, 213. (Part I, column (d), must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements for charitable purpose (cash basis only) (b) Net investment (a) Revenue and (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) expenses per books income income 13,772,514 Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B Interest on savings and temporary 1.30 130 STATEMENT 726 67,726. STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 46,335 STATEMENT 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 3,859,015. 3,565, 7 Capital gain net income (from Part IV, line 2) RECIEVED 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) __ _ DGDEN. 3,633 886 Total Add lines 1 through 11 0. 13 Compensation of officers, directors, trustees, etc. 0. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees c Other professional fees 17 Interest 7.984 0 0 0 STMT 4 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 5 125 0 0 0. 23 Other expenses 24 Total operating and administrative 0 8,109 expenses. Add lines 13 through 23 2,062,650 2,062,650. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 2,070,759 0 2,062,650. Add lines 24 and 25 27 Subtract line 26 from line 12 11,815,946 & Excess of revenue over expenses and disbursements 3,633,066 b Net investment income (if negative, enter -0-) 0. C Adjusted net income (if negative, enter -0-)

22 Other liabilities (describe 0 0 23 Total liabilities (add lines 17 through 22) Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. Net Assets or Fund Balances 24 Net assets without donor restrictions 25 Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. 0 26 Capital stock, trust principal, or current funds 0. 27 Paid-in or capital surplus, or land, bldg., and equipment fund 504,295. 12,320,241. 28 Retained earnings, accumulated income, endowment, or other funds 504,295. 12,320,241. 29 Total net assets or fund balances

Part III Analysis of Changes in Net Assets or Fund Balances

20 Loans from officers, directors, trustees, and other disqualified persons

21 Mortgages and other notes payable

30 Total liabilities and net assets/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	504,295.
2	Enter amount from Part I, line 27a	2	11,815,946.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	12,320,241.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6_	12,320,241.

504,295.

12,320,241

Form 990-PF (2019)

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

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.

Form 990-PF (2019) DARYL & STEVEN ROTH FOUNDATION		<u> 22-33</u>			Page 4
Part VI Excise Tax Based on Investment Income (Section 49)		4948 - se	e instru	ctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here and	d enter "N/A" on line 1.				
Date of ruling or determination letter: (attach copy of letter if n		}			
b Domestic foundations that meet the section 1940(e) requirements in Part V, check here		1	7	2,6	61.
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter	4% of Part I, line 12, col. (b)				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only;		2			- O .
3 Add lines 1 and 2		3	7	2,6	61.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	r; others, enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, order -0-	, , ,	5	7	2,6	61.
6 Credits/Payments:	1 11 1		·	<u>-</u>	<u> </u>
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a 97,984	_		_	
b Exempt foreign organizations - tax withheld at source	6b 0		•	-	
c Tax paid with application for extension of time to file (Form 8868)	6c 0	⊣ ।			
d Backup withholding erroneously withheld	6d 0	- 1			
7 Total credits and payments. Add lines 6a through 6d		7 I	a	7,9	ΩΛ
-	· · ·	7		1,3	0.
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is a 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	macheu .	8			<u> </u>
				5,3	2.2
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	25,323. Refunded	10		3,3	
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax Part VII-A Statements Regarding Activities	25,323. Ketunded	11			0.
				Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local le	gislation or did it participate or interver	ie in		103	X
any political campaign?			1a		<u> </u>
b Did it spend more than \$100 during the year (either directly or indirectly) for political purp	•	Inition	1b		<u> </u>
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copie	is of any materials published or		}		
distributed by the foundation in connection with the activities.					
c Did the foundation file Form 1120-POL for this year?	·		1c		<u>X</u> _
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during			j.]		
(1) On the foundation. > \$ 0 . (2) On foundation manage		<u>.</u>	\		
e Enter the reimbursement (if any) paid by the foundation during the year for political expe	nditure tax imposed on foundation				
managers. ► \$0.					
2 Has the foundation engaged in any activities that have not previously been reported to the	e IRS?	• •	2		X
If "Yes," attach a detailed description of the activities.					
3. Has the foundation made any changes, not previously reported to the IRS, in its governing	og instrument, articles of incorporation,	, nr	1		_2
hylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	The second section of the second	and the state of the	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the y			-4a		_X_
b If "Yes," has it filed a tax return on Form 990 T for this year?	ing a company of the first of	N/A			
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	ar?		5_		X
If "Yes," attach the statement required by General Instruction T					
6 Arc the requirements of section 508(c) (relating to sections 4941 through 4945) satisfied	d either:				
 By language in the governing instrument, or 	-				
 By state legislation that effectively amends the governing instrument so that no manda 	tory directions that conflict with the sta	ite 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," co	mplete Part II, col. (c), and Part XV		7	_X	
			1		
8a Enter the states to which the foundation reports or with which it is registered. See instruc	ctions.		-		
NJ			_		(
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	e Attorney General (or designate)				ł
of each state as required by General Instruction G? If "No," attach explanation		* ,	86	<u> </u>	
9 Is the foundation claiming status as a private operating foundation within the meaning of	****	lendar			
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," c			9		X 4
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a sch	edute listing their names and addresses	STMT 7	10	X	<u></u>
			Form 99 0)-PF	(2019)

Pa	irt 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	ł		
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	l		
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13_	X	
	Website address NONE			
14	The books are in care of ► STEVEN ROTH Telephone no. ► 201-58			
	Located at ► 210 ROUTE 4 EAST, PARAMUS, NJ ZIP+4 ►07	652		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	لـــا
	and enter the amount of tax-exempt interest received or accrued during the year 15	N	/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	_
	securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		l I	
Do	foreign country	L		
	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Yes	No
1.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	165	140
ıa	During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	}		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		}	
	a disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	1	1	
	(5) Transfer any income or assets to a disqualified person (or make any of either available	ĺ	[
	for the benefit or use of a disqualified person)?]		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		,	
	If the foundation agreed to make a grant to or to employ the official for a period after	}	} '	}
	termination of government service, if terminating within 90 days.)	}		
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		ļ '	
	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	l		}
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	ļ	([
	before the first day of the tax year beginning in 2019?	1c	ļ	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	ļ]
	defined in section 4942(j)(3) or 4942(j)(5)):	ļ	Ì	
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	ļ		ļ
	6d and 6c) for tax year(s) beginning before 2019?		ł	ł
	If "Yes," list the years , , , , , , , , , , , , , , , , , . , , , , , , , , , , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , . , .	}		1
u	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	İ	ì	(
	statement - see instructions.) N/A	2b	1	ĺ
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		 	
٠		1]].
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	-	}	
-	during the year?	1	ļ	1
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	1	{	ł
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,	1	1	1
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		<u> </u>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	1		
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	<u></u>	X
	Fo	rm 99	U-PF	(2019)

Form 990-PF (2019) DARYL & STEVEN ROTH FOUN			<u> 22-333961</u>	1	Page 6
Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be F	Required (continu	Jed)	IV	I NIa
 5a During the year, did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section) (2) Influence the outcome of any specific public election (see section 4955); or 		•	s X No	Yes	No
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? See instructions		• • -	s 🗓 No 📗		
 (5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und 		Ye	s X No		
section 53.4945 or in a current notice regarding disaster assistance? See instri Organizations relying on a current notice regarding disaster assistance, check l	uctions nere		N/A- 5	-	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).			s 🗀 No		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?	-	Ye	s X No		
 b Did the foundation, during the year, pay premiums, directly or indirectly, on a plif "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax s 		 [s X No	b	<u>X</u>
 b if "Yes," did the foundation receive any proceeds or have any net income attributed is the foundation subject to the section 4960 tax on payment(s) of more than \$ 	table to the transaction? .		. N/A 7	b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma		s X No		
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.				
(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) Exp account allowa	t, other
STEVEN ROTH 107 APAQUOGUE ROAD	TRUSTEE				
E. HAMPTON, NY 11937	0.00	0.	0.		0.
				_	
				,	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	<u> </u>		
(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) Exp account allowa	t, other
NONE					
Total number of other employees paid over \$50,000			Form	990-PF	(2019)

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	<u>3339611 </u>	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Con	npensation
NONE		
	}	
	4	
	l	
Total number of others receiving over \$50,000 for professional services	<u> </u>	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.	Expense	:S
1 CONTRIBUTIONS TO RECOGNIZED CHARITIES.		
	2,062	,650.
2		
3		
		
4	ı	
	1	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount	t
1 N/A		
	1	
	l	
2	 	
	<u></u>	
All other program-related investments. See instructions.	i	
3	I	
Total. Add lines 1 through 3		0.
	Form 990 -	-PF (2019)

22-3339611 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 784,923. a Average monthly fair market value of securities 1a 276,375. 1b Average of monthly cash balances c Fair market value of all other assets 1c 1,061,298. 1d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and O 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 3 1,061,298. Subtract line 2 from line 1d 15,919. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 1,045,379. 5 Net value of noncharitable use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 52,269. Minimum investment return. Enter 5% of line 5 6 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.) 52,269. Minimum investment return from Part X, line 6 72,661 Tax on investment income for 2019 from Part VI, line 5 2h Income tax for 2019, (This does not include the tax from Part VI.) 72.661. Add lines 2a and 2b 0. Distributable amount before adjustments. Subtract line 2c from line 1 3 0. Recoveries of amounts treated as qualifying distributions 4 5 0. Add lines 3 and 4 0. Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 2,062,650. 1a b Program-related investments - total from Part IX-B 16 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a Cach distribution test (attach the required schedule) 3b 2,062,650. 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2019)

4940(e) reduction of tax in those years.

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				
2 Undistributed income, if any, as of the end of 2019			<u></u>	
a Enter amount for 2018 only			0.	_
b Total for prior years:				,
		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014 1,430,206.			•	
b From 2015 1,722,564.				
c From 2016 1,389,449.				•
d From 2017 1,680,817.				
e From 2018 1,112,939.				
f Total of lines 3a through e	7,335,975.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$ 2,062,650.	. [
a Applied to 2018, but not more than line 2a	•		0.	•
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		·	•	0.
c Remaining amount distributed out of corpus	2,062,650.		·	
· ,				
5 Excess distributions carryover applied to 2019 (if an amount appears in column (d), the same amount must be shown in column (a))	0.		·	0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	9,398,625.			
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			3	
assessed	· · ·	0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		<u>0.</u>		<u> </u>
e Undistributed income for 2018. Subtract line	^			
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract	, • •			
lines 1d and 5 from line 1. This amount must		•		
be distributed in 2020				0.
7 Amounts treated as distributions out of	:			
corpus to satisfy requirements imposed by			·	
section 170(b)(1)(F) or 1912(g)(3) (Election	2			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014	4 420 006			
not applied on line 5 or line 7	1,430,206.		 	<u></u>
9 Excess distributions carryover to 2020.	D 060 410			
Subtract lines 7 and 8 from line 6a	7,968,419.			
10 Analysis of line 9:				
a Excess from 2015 1,722,564.				
b Excess from 2016 1,389,449.				
c Excess from 2017 1,680,817.	, -			
d Excess from 2018 1,112,939.				į
e Excess from 2019 2,062,650.			L	5 DOO DE (0040)

Part XIV Private Operating Fo		H FOUNDATIC			339611 Page 10
			I-A, question 9)	N/A	
1 a If the foundation has received a ruling or of					
foundation, and the ruling is effective for a	· \	-	> L	4040(1)(0)	10.40(.)(5)
b Check box to indicate whether the founda		ng toundation described		4942(j)(3) or4	942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2019	(b) 2018	Prior 3 years (c) 2017	(d) 2016	(a) Total
income from Part I or the minimum	(8) 2019	(0) 2016	(6) 2017	(0) 20 10	(e) Total
investment return from Part X for				{	
each year listed .				 	<u> </u>
b 85% of line 2a				ļ	
c Qualifying distributions from Part XII,					
line 4, for each year listed	<u>-</u>				
d Amounts included in line 2c not				./	1
used directly for active conduct of					<u> </u>
exempt activities -	·			<u> </u>	
e Qualifying distributions made directly	•	`			1
for active conduct of exempt activities.		ļ			
Subtract line 2d from line 2c	 			<u> </u>	<u> </u>
3 Complete 3a, b, or c for the alternative test relied upon:		ł			
a "Assets" alternative test - enter:				}	ŀ
(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			<u> </u>]
c "Support" alternative test - enter:	/				
(1) Total support other than gross],	}
investment income (interest,					
dividends, rents, payments on securities loans (section					1
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt		ĺ			
organizations as provided in section 4942(j)(3)(B)(fii)		(
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Infor	mation (Comple	te this part only	if the foundation	had \$5,000 or m	ore in assets
at any time during th	e year-see insti	ructions.)			
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who			tributions received by the	foundation before the cl	ose of any tax
year (but only if they have contributed mo	re than \$5,000). (See s	ection 507(d)(2))			
NONE					
b List any managers of the foundation who			(or an equally large porti	on of the ownership of a	partnership or
other entity) of which the foundation has	a 10% or greater interes	st			
NONE					
2 Information Regarding Contributio	n, Grant, Gift, Loan,	Scholarship, etc., P	rograms:		
Check here 🕨 🔀 if the foundation on					quests for funds. If
the foundation makes gifts, grants, etc., to	individuals or organiza	ations under other condi	tions, complete items 2a,	b, c, and d.	
a The name, address, and telephone number	er or email address of th	he person to whom appli	cations should be addres	sed:	
h The form in which applications should be	cub mutted and informa	tion and materials they s	porly include.		
b The form in which applications should be	annimico and imullia		modiu moluut,		
c Any submission deadlines:					
d Any restrictions or limitations on awards,	such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors:	

A T

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Recipient Purpose of grant or contribution Foundation Amount any foundation manager or substantial contributor status of Name and address (home or business) recipient a Paid during the year SEE SCHEDULE ATTACHED - MORGAN NONE PUBLIC RECOGNIZED CHARITIES CHARITIES STANLEY VARIOUS ADDRESSES FOR VARIOUS 2,062,650. CHARITIES PARAMUS NJ 07652 ▶ 3a Total 2 062 650 b Approved for future payment NONE

<u>l otál</u>

art XVI-A Analysis of Income-Produc	ing Activitie	∍s			
er gross amounts unless otherwise indicated.	Unrelated t	ousiness income		y section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exemp
Program service revenue:	code	Amount	code	Amount	function income
a					
b					
·		<u> </u>			
i					
·	 				
 _					
Fees and contracts from government agencies	 		+-+-		
Membership dues and assessments					·
nterest on savings and temporary cash nvestments	} {		14	130.	
Dividends and interest from securities	 		14	67,726.	
Net rental income or (loss) from real estate:	ļ		- - -	01,120.	
Debt financed property					
Not debt-financed property			1 1		
Net rental income or (loss) from personal					
property	_				
Other investment income					
Gain or (loss) from sales of assets other					
han inventory			14	46,335.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:	1 1			ľ	
	 				
· ————————————————————————————————————	 				
	 				
	—				
Subtotal. Add columns (b), (d), and (e)			0.1	114,191.	
Fotal. Add line 12, columns (b), (d), and (e)	L		<u>/ •1 </u>	13	114,1
e worksheet in line 13 instructions to verify calculations)	•			. 10	<u></u>
	- Ab - A	liebmant of	Evament Di		
art XVI-B Relationship of Activities to	une Accon	npiisiiinent oi	Exempt Pt		
ne No. Explain below how each activity for which inco				importantly to the accomp	lishment of
▼ the foundation's exempt purposes (other than	by providing fund	s for such purposes)		. _	
				 	
					

Form **990-PF** (2019)

Part	XVII	Information Re Exempt Organ	egarding Trans	sfers to a	nd Tr	ansactions a	nd Relations	hips With Nonch	naritable	ŧ	
1 Di	the or			of the followin	o with a	other organization	n described in sec	uon 501(c)		Yes	No
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?								į			
•		from the reporting founda	•	-							
							1a(1)	}	X_		
•	Other	assets	•	•					1a(2)		X
-		sactions:		•	••		, .		"		
(1	Sales	of assets to a noncharital	ble exempt organizat	ion					1b(1)		X_
-		ases of assets from a no	-				. , .		1b(2)		X_
•		l of facilities, equipment,							1b(3)		X
(4	Reimt	oursement arrangements		•					1b(4)		X
(5	Loans	or loan guarantees							1b(5)		X
(6) Perfoi	mance of services or me	mbership or fundrais	sing solicitatio	ns				1b(6)		<u>X</u>
c Sh	aring of	facilities, equipment, ma	uling lists, other asse	ts, or paid em	ployees				1c_		_X_
d lf	he answ	er to any of the above is	"Yes," complete the f	ollowing sche	dule. Co	lumn (b) should alv	ways show the fair i	market value of the good	ds, other ass	sets,	
or	Services	given by the reporting fo	oundation. If the four	idation receive	ed less ti	han fair market valu	ie in any transaction	or sharing arrangemen	nt, show in		
CO	<u>-</u> -) the value of the goods,									
(a) Line	ιυ <u> </u>	(b) Amount involved	(c) Name of	noncharitable	exempt	organization	(d) Descriptio	n of transfers, transactions,	and sharing ar	rangeme	ınts
			ļ	N/A			_}				
							<u> </u>				
		:	L								
			ļ								
											
											
											
							 				
							 	··			
											
							+				
	+	·									
	_	· 									
	\dashv		 					<u></u>			
22 5	the four	idation directly or indirect	tly affiliated with or r	elated to one	or more	tax-exempt organi	zations described				
		501(c) (other than section				tax exempt organi	200,000		Yes	X	ON [
		mplete the following sch						•			
		(a) Name of org			(b) Ty	oe of organization		(c) Description of relation	onship		
		N/A									
								· · · · · · · · · · · · · · · · · · ·			
	Under	perantes of perjury, I declare the it is true, correct, and con	that I have examined this	s return, includin	g accomp	anying schedules and	statements, and to the	best of my knowledge	May the IRS	discuss	this
Sign	1 .	ine it is due, correct, and con	A	sparer (other than	ii taxpaye	i is based on an unom			return with the	v7 Se <u>e⊪</u>	er istr
Here							TRUST	EE	X Yes	; <u> </u>	J No
<u> </u>	Sign	ature of officer or trustee	<u> </u>			ate	Title	 			
		Print/Type preparer's na	ame	Preparer's s	ignature		Date	Check if PT	IN		
Dei:				71.	. 1	C / A)		self- employed			
Paid		ALBERT E.				ETaylor	05/11/20		200098		
Prep Use		Firm's name > HUN	RATH, NAPO	LITANO	,QU	GLEX & T	AYLOR, LL	C Firm's EIN ► 27-	-26016	119	
USE	Cilly	Firm's address > 1 4	O MOIDING T	NT 31797		TTMP 201		 			
		Firm's address ► 14				JITE 201		Phone no. (732) / / 0 0)_ ^7	יחי
		L SP	RINGFIELD	U UM U	/UB.	L-1145		Phone no. (732	<u>, 47</u>	<u>-07</u>	<u> </u>

Schèdule 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

Employer identification number

2019

22-3339611 DARYL & STEVEN ROTH FOUNDATION Organization type (check one). Filers of: Section: ____ 501(c)(Form 990 or 990-EZ) (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 toundation 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 contributors. Special Bules For an organization described in section 501(c)(3) filing Form 990 or 990 EZ that met the 33 1/3% 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, 1Ca, 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 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).

Employer identification number

DARYL & STEVEN ROTH FOUNDATION

22-3339611

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STEVEN ROTH 107 APAQUOGUE ROAD E. HAMPTON, NY 11937	\$ <u>13,772,514.</u>	Person X Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Payroll Noncash Complete Part II for Homeash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for nuncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Payroll Poncash Complete Part II for Holicash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Payroll Noncash Complete Part II for noncash contributions.)

Employer identification number

DARYL & STEVEN ROTH FOUNDATION

22-3339611

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	16,368 SHARES CHARTER COMMUNICATIONS		
_1		\$ 7,600,849.	12/11/19
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
7	247,000 SHARES URBAN EDGE		
		\$ <u>4,966,553.</u>	12/11/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(ก) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(ā) 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
		\$	990, 990-EZ, or 990-PF) (

Name of organization

Employer identification number

DARYL	& STEVEN ROTH FOUNDATION	7		22-3339611			
Part III	Exclusively religious, charitable, etc., contributions from any one contributor. Complete columns (a) this completing Part III, enter the total of exclusively religious, char Use duplicate copies of Part III if additional spirits.	s to organizations described in section rough (e) and the following line entry following to the state of the section of the se	or organizations	that total more than \$1,000 for the year			
(a) No. from	(h) Dumano of side	(a) I loo of sift	(d) Doop	rinting of how gift is hold			
Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
		(e) Transfer of gift					
}	Transferee's name, address, and	ZIP + 4	Relationship of tra	nsferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription 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) Desc	ription of how gift is held			
<u> </u> 		(e) Transfér ôf gift					
	Transferee's name, address, and	ZIP + 4	Relationship of tra	nsferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
Part I	(b) i di pode oi giit	(6) 666 61 511	(0,200				
		(e) Transfer of gift					
	Transferee's name, address, and	ZIP + 4	Relationship of tra	nsferor to transferee			

FORM 990-PF	GAIN	OR (LOSS)	FROM S	ALE	OF A	ASSE	rs		STA	TEMEN'	r 1
(A) DESCRIPTION OF PROP	PERTY						MANNI CQUII		DA'		DATE	SOLI
CHARTER COMMUNICATI	ONS					PU	RCHA	SED	12/1	1/19	12/	19/19
(D) GROSS SALES PRIC	_	(C) COST HER B		EXPE	D) NSE ALE	OF	DI	(E) EPRE	с.	GAIN	(F) I OR L	oss
3,851,6	514.	3,81	2,680	•		0.			0.		38	,934.
CAPITAL GAINS DIVII	ENDS FRO	M PA	RT IV	•	_						7	,401.
TOTAL TO FORM 990-1	F, PART	I, L	INE 62	A					_		46	,335:
FORM 990-PF INTERE	EST ON SA	VING	S AND	TEMPOR	ARY	CAS	H IN	/ESTI	MENTS	STA	TEMEN	r 2
FORM 990-PF INTERE	est on sa	VAING	1	TEMPOR (A) REVENUE ER BOOK			r in	(B)		F	C) ADJUST	 ED
	est on sa	VING	1	(A) REVENUE ER BOOK			r in	(B) VESTI		F	(C)	 ED
SOURCE		AVING	1	(A) REVENUE ER BOOK	s		r in	(B) VESTI	MENT	F	(C)	ED OME
SOURCE MORGAN STANLEY	INE 3] Pl	(A) REVENUE ER BOOK	s 30.	NE"	r in	(B) VESTI	MENT 130.	NE	(C)	ED OME 130.
SOURCE MORGAN STANLEY TOTAL TO PART I, LI FORM 990-PF	INE 3	ENDS	AND I	(A) REVENUE ER BOOK 1	30. 30. FRO	NE"	I IN INC	(B) VESTICOME	MENT 130.	STA	(C) ADJUST T INC	ED OME 130.
SOURCE MORGAN STANLEY TOTAL TO PART I, LI	INE 3 DIVIDE	ENDS	AND I	(A) REVENUE ER BOOK 1 1 NTEREST ITAL INS	30. 30. FRO	NE' OM S: (A) EVENT	I IN INC	(B) VESTICOME	MENT 130. 130. S (B) INVE	ST-OME	(C) ADJUST: ATEMEN (C) ADJU- NET I	ED OME 130.

FORM 990-PF	TAX		STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOM		
FEDERAL INCOME TAXES	7,984.	0	•	0.	0.
TO FORM 990-PF, PG 1, LN 18	7,984.	0	•	0.	0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOM		
OFFICE EXPENSE	125.	0	•	0.	0.
TO FORM 990-PF, PG 1, LN 23	125.	0	•1	0.	0.
FORM 990-PF	E STOCK		STATEMENT	6	
DESCRIPTION		В	OOK VALUE	FAIR MARKE VALUE	т
CORPORATE STOCK		9,123,297.	9,079,269		
TOTAL TO FORM 990-PF, PART I	_	9,123,297.	9,079,269		

7 STATEMENT FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

NAME OF CONTRIBUTOR

ADDRESS

DARYL AND STEVEN ROTH

PO BOX 669 EAST HAMPTON, NY 11937