Form 990-PF

SCANNED MAY 1 0 2024/W

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

For calendar year 2019 or tax year beginning	···	, and ending	·	
Name of foundation			A Employer identification	n number
SHIRLEY & MILTON LEVY FAMI	ΓĂ		00 6400516	
CHARITABLE TRUST		10.00	22-6480716	<u> </u>
Number and street (or P O box number if mail is not delivered to street a	iddress)	Room/suite	B Telephone number (508) 390-	2210
P.O. BOX 9175	antol ando		<u> </u>	
City or town, state or province, country, and ZIP or foreign p FRAMINGHAM, MA 01701	ostal code		C If exemption application is p	bending, check here
G Check all that apply: Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organization	s check here
Final return	Amended return	or public charty		
Address change	Name change		2 Foreign organizations me check here and attach or	eeting the 85% test, omputation
H Check type of organization X Section 501(c)(3) ex	kempt private foundation	01)	E If private foundation sta	atus was terminated
Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ition 09	under section 507(b)(1	
I Fair market value of all assets at end of year J Accounti	ng method: X Cash	Accrual	F If the foundation is in a	60-month termination
	ther (specify)		under section 507(b)(1)(B), check here
8,986,852. (Part I, colur				(4) 0
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
necessarily equal the amounts in column (a))	308,225.		N/A	(cash basis only)
1 Contributions, gifts, grants, etc., received 2 Check I if the foundation is not required to attach Sch. B	300,223.		17/22	
Interest on savings and temporary cash investments	893.	893.		STATEMENT 1
4 Dividends and interest from securities	119,443.	119,443.		STATEMENT 2
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	441,910.			
Gross sales price for all 441,963.		444 040		
Capital gain net income (from Part IV, line 2)		441,910.		
.) SCC2 /1X				
9 Income modifications Gross sales less returns				
b Less Cost of goods sold				
c Gross profit or (loss)				
11 Other income Ogden, UT				
12 Total. Add lines 1 through 11	870,471.	562,246.		
13 Compensation of officers, directors, trustees, etc.	0.	0.		0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees b Accounting fees STMT 3	1,400.	0.		0.
	1,400.	<u> </u>		
c Other professional fees				-
18 Taxes STMT 4	12,899.	2,299.		0.
19 Depreciation and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses				
24 Total operating and administrative	14 200	2 200		
expenses. Add lines 13 through 23	14,299. 371,000.	2,299.		371,000.
** Committee of Descriptions	371,000.			3/1,000
26 Total expenses and disbursements. Add lines 24 and 25	385,299.	2,299.		371,000.
27 Subtract line 26 from line 12.	303,233.	2,255.		1 1
2 Excess of revenue over expenses and disbursements	485,172.			
b Net investment income (if negative, enter -0-)		559,947.		
C Adjusted net income (if negative, enter -0-)			N/A	
923501 12-17-19 LHA For Paperwork Reduction Act Notic	e, see instructions.	·	022	Form 990-PF (2019)

CHARITABLE TRUST

22-6480716

Page 2

1	Part II Balance Sheets Attached schedules and amounts in the description			Beginning of year	End o	f year
2 Samps and temporary cash mestments 3 Accounts convalte Less allowance for countries accounts Less allowance for countries described Less allowance for countries of the		art	column should be for end of year amounts only	(a) Book Value		
A Recovable Class allowance for doubtful accounts ▶ 4. Pledges receavable		1	Cash - non-interest-bearing	35,953.	52,017.	52,017.
Less allowance for doubtful accounts ▶ Less allowance for doubtful accounts ▶ S draws receivable B Receivables due from officers, directors, trustees, and either dequalified persons 7 dair use steam reseave 1 Prizond expenses and deferred charges 9 Prizond expenses and deferred charges 10 Investments - Us and state government obligations 11 Investments - Us and state government obligations 12 Investments - Corporate bonds 13 Investments - Corporate bonds 13 Investments - Corporate bonds 13 Investments - comporate bonds 13 Investments - comporate bonds 15 Investments - comporate bonds 15 Investments - comporate bonds 15 Other assist (so be completed by all filers - see the instructions. Also, see page 1, terms) 16 Other assist (so be completed by all filers - see the instructions. Also, see page 1, terms) 17 Accounts psyable and accrued expenses 18 Deterral or evenue 19 Deterral or evenue 20 Investments and other instructions. Also, see page 1, terms) 19 Deterral or evenue 21 Investments that (filer ARSB ASC 958, check here Instructions. Also, see page 1, terms) 22 Total Inabilities (add lines 17 through 22) 23 Total Inabilities (add lines 17 through 22) 24 Foundations that (filer ARSB ASC 958, check here Instructions that (filer are completed instructions that (filer are comp		2	Savings and temporary cash investments			
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Less altowarce for doubtul accounts		4	Pledges receivable ▶			
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By Trepade expenses and deferred charges 10a Investments - US and state government obligations 11b Investments - corporate stock 11b Investments - other bonds 11b Invest		7	Other notes and loans receivable			
Prepared expenses and deferred charges			Less, allowance for doubtful accounts			<u></u>
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Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30 24 Net assets with donor restrictions 25 Net assets with donor restrictions 26 Capital stock, frust principal, or current funds 27 Paid-in or capital surplus, or land, bldg, and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds 29 Total net assets or fund balances 29 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) 20 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) 5 Other increases not included in line 2 (itemize) 5 Other torceases not included in line 2 (itemize) 5 Other torceases not included in line 2 (itemize) 5 Other torceases not included in line 2 (itemize) 6 Other forceases not included in line 2 (itemize) 6 Other torceases not included in line 2 (itemize) 6 Other torceases not included in line 2 (itemize) 7 Other torceases not included in line 2 (itemize) 8 Other increases not included in line 2 (itemize) 9 Other increases not included in line 2 (itemize) 10 Other increases not included in line 2 (itemize) 10 Other increases not included in line 2 (itemize) 10 Other increases not included in line 2 (itemize) 10 Other increases not included in line 2 (itemize) 10 Other increases not included in line 2 (itemize) 11 Other increases not included in line 2 (itemize) 12 Other increases not included in line 2 (itemize) 13 Other increases not included in line 2 (itemize) 14 Other increases not included in line 2 (itemize) 15 Other increases not included in line 2 (itemize) 16 Other increases not included in line 2 (itemize) 17 Other increases not included in line 2 (itemize) 18 Other increases not included in line 2 (itemize) 19 Other increases not included in line 2 (itemize) 10 Ot		22	Other liabilities (describe 🕨)			
Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30 24 Net assets with donor restrictions 25 Net assets with donor restrictions 26 Capital stock, frust principal, or current funds 27 Paid-in or capital surplus, or land, bldg, and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds 29 Total net assets or fund balances 29 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) 20 Total net assets or fund balances at end of year (lime 4 minus line 5) - Part II, column (b), line 29 4 Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) 5 5 0.5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 6 2, 149, 918.						,
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24 Net assets without donor restrictions 25 Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check here 26 Capital stock, trust principal, or current funds 27 Paid-in or capital surplus, or land, bidg, and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds 29 Total net assets or fund balances 1 Total net assets or fund balances in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 29 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 29 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 29 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 29 6 2 2 149 9 918.			Foundations that follow FASB ASC 958, check here			
Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check here And complete lines 26 through 30. Capital stock, trust principal, or current funds 7 Paid-in or capital surplus, or land, bldg, and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds 29 Total net assets or fund balances 1,664,746. 2,149,918. Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 6 2, 149, 918.	S					
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30 Total liabilities and net assets/fund balances 1,664,746. 2,149,918. Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 O. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 6 2, 149, 918.	et/	29	Total net assets or fund balances	1,664,746.	2,149,918.	
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(must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Oc. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29					 	
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3 Other increases not included in line 2 (itemize) ► 3 O. 4 Add lines 1, 2, and 3 4 2, 149, 918. 5 Decreases not included in line 2 (itemize) ► 5 O. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 6 2, 149, 918.		•	•		- 1	1,004,740.
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 6 2, 149, 918.					F1	
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 2,149,918.	-		· · · · · · · · · · · · · · · · · · ·			
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 6 2,149,918.						
				alumn (h) line 20		
	<u>0</u>	iotal	net assets of fund balances at end of year (line 4 minus line 5) - Part II, co	Junia (D), line 29		Form 990-PF (2019)

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Part IV Capital Gains	and Lo	sses for Tax on Inv	vestment	Income						
		s) of property sold (for exan or common stock, 200 shs		te,	(b)	How ac - Purc - Dona	cquired hase ation		acquired ay, yr)	(d) Date sold (mo , day, yr)
1a 5000 SHS TJX CO	OS II	NC NEW						06/2	5/98	12/10/19
b CAPITAL GAINS I	DIVII	DENDS								
<u> </u>										
<u>d</u>		 .								
<u>e</u>	40		4.10						(1555	<u> </u>
(e) Gross sales price	(1)	Oepreciation allowed (or allowable)	10,	st or other basis expense of sale					ain or (loss s (f) minus	(g))
a 300,472.				5	3.					300,419.
ь 141,491.				 .						141,491.
<u>c</u>			_							
<u>d</u>										
Complete only for assets showing	10 03ID ID	column (h) and owned by t	he foundation	on 12/31/69				Gaine (C	ol (h) gain	minue
Complete only for assets showin		(ı) Adjusted basis		cess of col. (i)	_				not less tha	
(i) FMV as of 12/31/69		as of 12/31/69		col. (j), if any				Losses	(from col ((h)) ´
a						-				300,419.
<u> </u>	_		<u>.</u>							141,491.
C										
d								•		
е										
2 Capital gain net income or (net ca	pital loss	If gain, also enter If (loss), enter -0-	ın Part I, line ın Part I, line	7	}	2				441,910.
3 Net short-term capital gain or (los	es) as def									
If gain, also enter in Part I, line 8,			a (0).)					
If (loss), enter -0- in Part I, line 8					Ш	3	<u> </u>		N/A	•
Part V Qualification U	nder S	ection 4940(e) for	Reduced	lax on Net I	nve	estm	ent Inco	me		
(For optional use by domestic private	foundati	ons subject to the section 4	940(a) tax on	net investment ind	come)				
If section 4940(d)(2) applies, leave th	ns part hi	ank								
Was the foundation liable for the sect					od?					Yes X No
If "Yes," the foundation doesn't qualify 1 Enter the appropriate amount in 6					triac					
(a)	acii colu		311 0 0 110 113 0 0 1	ore making any er				1		(d)
Base period years	20 10)	(b) Adjusted qualifying dist	ributions	Net value of no	(c) nchai		use assets		Distrit	bùtión ratio vided by col. (c))
Calendar year (or tax year beginnii 2018	19 111)		5,000.		6	. 73	7,446		(00) (0) 011	.042301
2017			5,000.				3,071			.041134
2016			0,975.	***			3,219			.055597
2015			3,184.				4,795			.045497
2014			3,175.		5	,19	5,623			.046804
2 Total of line 1, column (d)								2		.231333
3 Average distribution ratio for the	5-year ba	se period - divide the total o	n line 2 by 5 (), or by the numbe	er of y	ears/				
the foundation has been in exister	nce if less	than 5 years						3		.046267
4 Enter the net value of noncharitab	le-use as	sets for 2019 from Part X, I	ine 5					4		<u>8,004,970.</u>
5 Multiply line 4 by line 3								5		370,366.
										F F00
6 Enter 1% of net investment incom	ie (1% of	Part I, line 27b)						6	_	5,599.
										275 OFF
7 Add lines 5 and 6								7		375,965.
O Falor analytics and a trace t	. De-43/11	lino A								371,000.
8 Enter qualifying distributions from	-		at	lata da e		v .	_4_	8	<u> </u>	3/1,000.
If line 8 is equal to or greater than See the Part VI instructions.	ı line 7, ci	neck the box in Part VI, line	1b, and comp	ilete that part using	g a 19	% tax r	ate.			
Occ the Last VI monuclions.										Corm QQQ-DF (2010)

SHIRLEY & MILTON LEVY FAMILY

Form 990-PF (2019) CHARITABLE TRUST		22-648	0716	Page 4	
Part VI Excise Tax Based on Investment Income (Section 49	940(a), 4940(b), 4940(e), or 494	48 - see	instruction	ıs)	
1a Exempt operating foundations described in section 4940(d)(2), check here	nd enter "N/A" on line 1			İ	
Date of ruling or determination letter (attach copy of letter if					
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	▶ ☐ and enter 1%	1	11,1	<u> 199.</u>	
of Part I, line 27b				1	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter	4% of Part I, line 12, col (b)				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only	; others, enter -0-)	2	<u> </u>	0.	
3 Add lines 1 and 2	_	3	11,1	<u> 199.</u>	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	y; others, enter -0-)	4		0.	
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	_	5	11,1	199.	
6 Credits/Payments:	_ , _ ,			1	
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a 8,400.	į		1	
b Exempt foreign organizations - tax withheld at source	6b 0.				
c Tax paid with application for extension of time to file (Form 8868)	6c 15,000.				
d Backup withholding erroneously withheld	6d 0.				
7 Total credits and payments Add lines 6a through 6d	-	7	23,4		
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is	attached	8		0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶	9			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	12,2		
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax	12,201. Refunded ▶	11		0.	
Part VII-A Statements Regarding Activities			1 152		
1a During the tax year, did the foundation attempt to influence any national, state, or local le	gislation or did it participate or intervene i	n	Yes		
any political campaign?			1a	X	
b Did it spend more than \$100 during the year (either directly or indirectly) for political pure		ion	1b	Х	
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copi	es of any materials published or				
distributed by the foundation in connection with the activities.				_ <u></u>	
c Did the foundation file Form 1120-POL for this year?			1c	X	
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	the year:			1 1	
(1) On the foundation \blacktriangleright \$ (2) On foundation manage	gers. ► \$0.			1 1	
e Enter the reimbursement (if any) paid by the foundation during the year for political expe	inditure tax imposed on foundation			1 1	
managers ▶ \$	1000			X	
2 Has the foundation engaged in any activities that have not previously been reported to the	e IRS7		2	+^	
If "Yes," attach a detailed description of the activities.				1 1	
3 Has the foundation made any changes, not previously reported to the IRS, in its governing	ig instrument, articles of incorporation, or			X	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	$\frac{X}{X}$	
4a Did the foundation have unrelated business gross income of \$1,000 or more during the	year /	N/A	48	+~	
b If "Yes," has it filed a tax return on Form 990-T for this year?	or?	N/A	4b 5	x	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the ye	ai'		-3	 ^^	
If "Yes," attach the statement required by General Instruction T	d author:			1 1	
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	Jenner.				
 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no manda 	story directions that conflict with the state i	2147			
remain in the governing instrument?	tory directions that connet with the state i	avv	6 X	-	
	omplete Part II col (c) and Part YV		7 X	+	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	implete Fait II, col. (c), and Fait Av		' '	1	
8a Enter the states to which the foundation reports or with which it is registered. See instru	ctions				
MA			⁻		
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)		·		
of each state as required by General Instruction G? If "No," attach explanation	or morning deficient (or designate)		8b X		
9 Is the foundation claiming status as a private operating foundation within the meaning of	f section 4942(i)(3) or 4942(i)(5) for calen	dar	 - - - - - - - - - 		ヘノ
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes," or			9	X	T
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a sch			10	Х	-
		F	orm 990-PF	(2019)	

At any brind during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 5(2)b) (13)? If 14%s, "attach schedule Seri instructions 2 bid the foundation make a ststribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 14%s, "attach slatement See instructions 2 bid the foundation comply with the public inspection requirements for its annual returns and examption application? Wester address > N/A 15 bid bids are in care of PHE FELDBERG OFFICE Telephone no (508) 390-2318 13 X Wester address > N/A 2 14 The books are in care of PHE FELDBERG OFFICE Telephone no (508) 390-2318 15 X Wester address > N/A 2 14 The books are in care of PHE FELDBERG OFFICE Telephone no (508) 390-2318 15 X X Wester address > N/A 2 14 The books are in care of PHE FELDBERG OFFICE Telephone no (508) 390-2318 15 X X Wester address > N/A 2 14 The books are in care of PHE FELDBERG OFFICE Telephone no (508) 390-2318 15 X X Wester address > N/A 2 15 X X Wester address > N/A 2 15 X X X X X X X X X	Pa	art VII-A Statements Regarding Activities (continued)			
section 572(N;17)21 fires," attach schedule. See instructions 11 Yes," attach statement. See instructions 12 Did the foundation make a distribution to a donor advest fund over which the foundation or a disqualified person had advisory privileges? 13 Did the foundation comply with the public inspection requirements for its anneal returns and exemption application? 14 The books are in care of PTHE FELDBERG OFFICE 15 Each 497(a)(1) inconsempt charitable trusts fring from 990-PP in less of Ferm 1041 - chick here and enter the amount of tax-everage interest received or accrued furning the year 15 Section 497(a)(1) inconsempt charitable trusts fring from 990-PP in less of Ferm 1041 - chick here and enter the amount of tax-everage interest received in accrued furning the year 16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securates, or other financial accounts in a foregon country? 16 Set the instructions for exceptions and fining requirements for fireft form 114. If Yes," enter the name of the foregon country P 16 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required 17 Fire Form 4720 if any items is checked in the "Yes" column, unless an exception applies. 18 Duming the year, did the foundation (either drestly or indirectly); 19 Form one priom, liter formonely, or leasning of property with a disqualified person? 20 Borrow money from, liter formonely, or clearance and credit for (or accept item from) a disqualified person? 30 Frunds hoods, services, or facilities to (or accept them from) a disqualified person? 41 Pay compensation to, or pay or remitting the expenses of, a disqualified person? 42 Ferman yancone or assets to a disqualified person? 43 Ferman yancone or assets to a disqualified person? 44 Pay compensation to, or pay or remitting with the distribution of the provision of the provis				Yes	No
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Located at P.P.O. BOX 9175, FRAMINGHAM, MA 15 Section 4947(a)(1) nonexempt charable trusts filing form 990-PF in lev of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year 16 At any time during calendary year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country. P Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly); (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept if from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them fron) a disqualified person? (4) Pay compensation to, or pay or reimburs the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person in the first any or reimburs the expenses 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,? (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.) (6) Agree to pay money or group at a many of the acts fall to qualify under the exceptions described in Regulations section 3444(16)-3 or in a current notice regarding disaster assistence? See mstructions Organizations relying on a current notice regarding disast	14		390	-23	18
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If the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(6)-3 or in a current notice regarding disaster assistance? See instructions N/A Organizations relying on a current notice regarding disaster assistance, check here 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 before the first day of the tax year beginning in 2019? 1c					l
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Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No	c	,			
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had not been removed from jeopardy before the first day of the tax year beginning in 2019?]
	•		4b		$\overline{\mathbf{x}}$
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Form 990-PF (2019) CHARITABLE TRUST			22-64807	16	Page 6
Part VII By Statements Regarding Activities for Which F	orm 4720 May Be Re	equired _{(contin}	ued)		
5a 'During the year, did the foundation pay or incur any amount to:				Ye	s No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y	es X No		
(2) Influence the outcome of any specific public election (see section 4955), o		ctly,		ll ll	
any voter registration drive?	• • •		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? See instructions	11 000011000 III 00011011	□ v	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or fo	 -			
the prevention of cruelty to children or animals?	or concatonal purposes, or it		es X No		
•	dor the executions described i		25 (24) 110		ı
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify universection 53 4945 or in a current notice regarding disaster assistance? See instru		n riegulations	N/A	5b	
				30	
Organizations relying on a current notice regarding disaster assistance, check h					H
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr			— "		
expenditure responsibility for the grant?	IN	I/A	es L No		h
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			i		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		(TZ)		
a personal benefit contract?		Y	es X No		
${f b}$ Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870				- 1	i i
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y ₁	es X No		
b if "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b	_
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or				
excess parachute payment(s) during the year?			es X No I		ال
IPartiVIII■ Information About Officers, Directors, Truste	es, Foundation Mar	nagers, Highly			
Paid Employees, and Contractors					
1 List all officers, directors, trustees, and foundation managers and the	neir compensation.	T	I (N		
(-) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) E	xpense nt, other
(a) Name and address	to position	enter -0-)	compensation	allov	vances
SHIRLEY LEVY	TRUSTEE				
150 NORTH OCEAN BOULEVARD			1		
PALM BEACH, FL 33480	5.00	0.	_0.		0.
JOHN F. LEVY	TRUSTEE				
6923 GREENTREE DRIVE					
NAPLES, FL 34108	1.00	0.	0.		0.
	TRUSTEE				
3001 SE ISLAND PT LANE, SAILFISH PT U	1				
STUART, FL 34996	1.00	0.	0.		0.
	1				
· · · · · · · · · · · · · · · · · · ·	1				
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none, o	enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) E	xpense nt, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	accour	nt, other vances
NONE	devoted to position		compensation	4,101	
1101111	1				
				 	
	1				
		ļ		-	
		i			

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

SHIRLEY & MILTON LEVY FAMILY

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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) Compensation
NONE		· · · · · · · · · · · · · · · · · · ·
Total number of others receiving over \$50,000 for professional services	>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the	,	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ļ	
1 N/A	4	
	-	
 		
2	-	
	4	
	 	
3	┪	
	1	
A		
	1	
	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
1 N/A		•
2	_	
	4	
	ļ	
All other program-related investments. See instructions		
3	-	
	-	
	1	
	1	
	1	
Total. Add lines 1 through 3	 	0.
Total. Add lines 1 unough 3	Form	990-PF (2019)
	1 01111	, • (2013)

(P)	artixa Minimum Investment Return (All domestic foundations must complete this part. Foreign for	ndations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	8,060,138. 66,735.
٠b	Average of monthly cash balances	1b	66,735.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	8,126,873.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	8,126,873.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	121,903.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	8,004,970.
6	Minimum investment return Enter 5% of line 5	6	400,249.
ĮP.	artXII Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	nd certain	
_	foreign organizations, check here 🕨 🔃 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	400,249.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI)		44 400
C	Add lines 2a and 2b	2c	11,199. 389,050.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	389,050.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7_</u>	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	389,050.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	371,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	371,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	371,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for t	the section
	4940(e) reduction of tax in those years		

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
Distributable amount for 2019 from Part XI,				200 050
line 7				389,050.
2 Undistributed income, if any, as of the end of 2019			222 070	
a Enter amount for 2018 only			322,970.	<u> </u>
b Total for prior years		^		
		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
b From 2015				
c From 2016				
d From 2017				
e From 2018	0.			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from Part XII, line 4: ►\$ 371,000.				
			322,970.	
a Applied to 2018, but not more than line 2a			322,310.	
b Applied to undistributed income of prior		0.	,	
years (Election required - see instructions)		V •		
c Treated as distributions out of corpus	0.		• •	
(Election required - see instructions)	0.			48,030.
d Applied to 2019 distributable amount	0.			40,030.
e Remaining amount distributed out of corpus	<u> </u>			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.	`		0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020			<u> </u>	341,020.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018	ļ			
e Excess from 2019				

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SHIRLEY & MILTON LEVY FAMILY 22-6480716 Form 990-PF (2019) CHARITABLE TRUST Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling 4942(j)(3) or b Check box to indicate whether the foundation is a private operating foundation described in section 4942(1)(5) Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (d) 2016 (a) 2019 (b) 2018 (c) 2017 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4, for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon; a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year c "Support" alternative test - enter; (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) (3) Largest amount of support from an exempt organization Gross investment income Part∤XV■ Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines. d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

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3 Grants and Contributions Paid During the Ye	ear or Approved for Future P	ayment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
• Faid during the year				
AMERICAN CIVIL LIBERTIES UNION	·		CONTRIBUTIONS TO ALL	
			RECIPIENTS WERE MADE	
			TO FURTHER TAX EXEMPT	
			STATUS UNDER	
<u> </u>			501(C)(3).	25,000
AMERICAN JEWISH COMMITTEE			CONTRIBUTIONS TO ALL	
			RECIPIENTS WERE MADE	
			TO FURTHER TAX EXEMPT	
			STATUS UNDER	
			501(C)(3).	30,000
B'NAI B'RITH - ANTI DEFAMATION LEAGUE			CONTRIBUTIONS TO ALL	
			RECIPIENTS WERE MADE TO FURTHER TAX EXEMPT	
			STATUS UNDER	
			501(C)(3).	40,000
	-			······································
BRENNAN CENTER FOR JUSTICE			CONTRIBUTIONS TO ALL	
			RECIPIENTS WERE MADE	
			TO FURTHER TAX EXEMPT	
			STATUS UNDER	
			501(C)(3).	30,000
DANA FARBER CANCER INSTITUTE			CONTRIBUTIONS TO ALL	
			RECIPIENTS WERE MADE	
			TO FURTHER TAX EXEMPT	
			STATUS UNDER	
			501(C)(3).	1,000
	TINUATION SHEET	r(S)	<u> </u>	371,000
b Approved for future payment				
NONE				
			+	
Total			▶ 3b	0

3 'Grants and Contributions Paid During the Y	ear (Continuation)	•		
Recipient	If recipient is an individual,	_		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
EQUAL JUSTICE INITIATIVE	or substantial contributor	Todipion	CONTRIBUTIONS TO ALL	
BOAD COSTICE INITIATIVE			RECIPIENTS WERE MADE	
			TO FURTHER TAX EXEMPT	
			STATUS UNDER	
			501(C)(3).	10,000
FACING HISTORY AND OURSELVES			CONTRIBUTIONS TO ALL	
			RECIPIENTS WERE MADE	
			TO FURTHER TAX EXEMPT	
			STATUS UNDER	
			501(C)(3).	30,000
HARVARD COLLEGE FUND-MEMORIAL GIFT			CONTRIBUTIONS TO ALL	30,000
MANVAND CODDECT FOND MEMORIAL CITY			RECIPIENTS WERE MADE	
			TO FURTHER TAX EXEMPT	
	1		STATUS UNDER	
			501(C)(3).	2,000
HEBREW SENIORLIFE	 		CONTRIBUTIONS TO ALL	2,000
MADRAW CANTONDITA			RECIPIENTS WERE MADE	
			TO FURTHER TAX EXEMPT	
			STATUS UNDER	
	1		501(C)(3).	20,000
HOSPICE FOUNDATION OF PALM BEACH			CONTRIBUTIONS TO ALL	20,000
COUNTY	ľ		RECIPIENTS WERE MADE	
COUNT			TO FURTHER TAX EXEMPT	
			STATUS UNDER	
			501(C)(3).	5,000
JEWISH FEDERATION OF PALM BEACH	+	·	CONTRIBUTIONS TO ALL	
OBNISH I EDERATION OF TABLE BEACH			RECIPIENTS WERE MADE	
			TO FURTHER TAX EXEMPT	
			STATUS UNDER	
			501(C)(3).	25,000
JFCS OF COLLIER COUNTY			CONTRIBUTIONS TO ALL	,
			RECIPIENTS WERE MADE	
			TO FURTHER TAX EXEMPT	
			STATUS UNDER	
			501(C)(3).	15,000
KRAVIS CENTER			CONTRIBUTIONS TO ALL	
			RECIPIENTS WERE MADE	
	1		TO FURTHER TAX EXEMPT	
	1		STATUS UNDER	
	1		501(C)(3).	5,000
MIAMI CITY BALLET	1		CONTRIBUTIONS TO ALL	
			RECIPIENTS WERE MADE	
	1		TO FURTHER TAX EXEMPT	
			STATUS UNDER	
			501(C)(3).	3,000
MORSE GERIATRIC CENTER			CONTRIBUTIONS TO ALL	3,000
TOROL OBRIGIRE CENTER		•	RECIPIENTS WERE MADE	
			TO FURTHER TAX EXEMPT	
			STATUS UNDER	E 000
			501(C)(3).	5,000

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient NARAL PROCHOICE AMERICA CONTRIBUTIONS TO ALL RECIPIENTS WERE MADE TO FURTHER TAX EXEMPT STATUS UNDER 501(C)(3). 10,000. PALM BEACH COMMUNITY CHEST CONTRIBUTIONS TO ALL RECIPIENTS WERE MADE TO FURTHER TAX EXEMPT STATUS UNDER 501(C)(3). 2,000. PHI BETA KAPPA CONTRIBUTIONS TO ALL RECIPIENTS WERE MADE TO FURTHER TAX EXEMPT STATUS UNDER 1,000. 501(C)(3). PLANNED PARENTHOOD CONTRIBUTIONS TO ALL RECIPIENTS WERE MADE TO FURTHER TAX EXEMPT STATUS UNDER 501(C)(3). 10,000. SAILFISH POINT FOUNDATION CONTRIBUTIONS TO ALL RECIPIENTS WERE MADE O FURTHER TAX EXEMPT STATUS UNDER 501(C)(3). 10,000. SIMMONS COLLEGE - SCHOOL OF SOCIAL CONTRIBUTIONS TO ALL WORK RECIPIENTS WERE MADE TO FURTHER TAX EXEMPT STATUS UNDER 501(C)(3). 2,000. SMITH COLLEGE ALUMNAE FUND CONTRIBUTIONS TO ALL RECIPIENTS WERE MADE TO FURTHER TAX EXEMPT STATUS UNDER 501(C)(3). 12,000. SOUTHERN POVERTY LAW CENTER CONTRIBUTIONS TO ALL RECIPIENTS WERE MADE TO FURTHER TAX EXEMPT STATUS UNDER 501(C)(3). 10,000. UNITED WAY OF PALM BEACH COUNTY CONTRIBUTIONS TO ALL RECIPIENTS WERE MADE TO FURTHER TAX EXEMPT STATUS UNDER 501(C)(3). 3,000. US HOLOCAUST MEMORIAL MUSEUM CONTRIBUTIONS TO ALL RECIPIENTS WERE MADE TO FURTHER TAX EXEMPT STATUS UNDER 501(C)(3). 20,000. Total from continuation sheets

3 ' Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	7 W 10 G 11
WASHINGTON INSTITUTE FOR NEAR EAST			CONTRIBUTIONS TO ALL	
YDDY			RECIPIENTS WERE MADE	
			TO FURTHER TAX EXEMPT	
	1		STATUS UNDER	
	<u> </u>	 	501(C)(3).	20,00
WOMEN'S LIFE CYCLE WELLNESS PROGRAM			CONTRIBUTIONS TO ALL	
AT BIDMC			RECIPIENTS WERE MADE	
			TO FURTHER TAX EXEMPT	
	1		STATUS UNDER	25 22
	<u> </u>		501(C)(3).	25,000
			· · · · · · · · · · · · · · · · · · ·	**
				•
			1	
				
Total from continuation sheets	1			

Part XVI-A	Analysis of I	Income-Producing	Activitie
Part XVI-A	Analysis of I	Income-Producing	Activitie

Enter gross amounts unless otherwise indicated	Unrelated	business income	Excluded	by section 512, 513, or 514	(e)
	(a)	(b)	(c)	(d)	Related or exempt
1 Program service revenue.	(a) Business code	Amount	sion	Amount	function income
	code				
a b	-		1		
	1 1				
c	1 1	<u> </u>	 		
d	1				
e			 		
g Fees and contracts from government agencies			 	-	
	- - - - - - - - - -				
2 Membership dues and assessments 3 Interest on savings and temporary cash					
investments			14	893	
	 		14	893.	
4 Dividends and interest from securities			1.7	117, 1131	
5 Net rental income or (loss) from real estate:					
a Debt-financed property			 		
b Not debt-financed property	-		+ +		
6 Net rental income or (loss) from personal					
property			 		
7 Other investment income			+		· · · · · · · · · · · · · · · · · · ·
8 Gain or (loss) from sales of assets other			18	441,910.	
than inventory			1	441,J10.	
9 Net income or (loss) from special events			 		
10 Gross profit or (loss) from sales of inventory 11 Other revenue:			 		
<u> </u>	· 		+ +		
b	1 1		+ +		
<u> </u>	1 1		 -		· · · · · · · · · · · · · · · · · · ·
d	· 				
E		0.		562,246.	0.
12 Subtotal. Add local l	<u> </u>	<u> </u>	<u> </u>	13	
13 Total Add line 12, columns (b), (d), and (e)				13	302,240.
(See worksheet in line 13 instructions to verify calculations)					
			amnt Pu	Irnases	
PartiXVI:BI Relationship of Activities t	o the Accom	plishment of Exe	simpt i d	ii pooco	
PartiXVI:BI Relationship of Activities t					nlichment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			olishment of
PartiXVI:BI Relationship of Activities t	ome is reported in (column (e) of Part XVI-A			olishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			olishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			olishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			olishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			plishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			plishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			plishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			plishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			plishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			plishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			plishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			plishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			plishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			plishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			plishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			plishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			plishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			plishment of
Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported in (column (e) of Part XVI-A			plishment of

923621 12-17-19

, rai	ŢΫ́VII	Information Re Exempt Organ	egarding Transfers to nizations	a	na Transactions a	nd	Helationshi	ps with Non	cnaritable		
1	Did the o	· · · · · · · · · · · · · · · · · · ·	rectly engage in any of the follo	- in	a with any other organizati	on a	described in section	on 501(c)	2.21	Yes	No
		•	nizations) or in section 527, rela		• •		described in section	on 50 (c)		5 6 7	100
		, , , , -	lation to a noncharitable exempt		-					1 €3,	1
	(1) Cash		ation to a nonchantable exempt	· Oi į	janization of.				لىتىنىدا 1a(1		X
	(1) Othe							•	1a(2)	\	X
		nsactions:							19/2	10.13z	
		s of assets to a noncharita	able exempt organization						1b(1	ويرو يعممون	X
	•		incharitable exempt organization	n	•				1b(2		X
	· •	al of facilities, equipment,	, ,				•		1b(3)		X
		ibursement arrangements			• • •	•	• •		1b(4)		X
	• •	s or loan guarantees			•		•	• •	1b(5)		X
		-	embership or fundraising solicit	atio	пс				1b(6)	1	X
			ailing lists, other assets, or paid					•	10	1	X
	_		"Yes," complete the following s		•	lway	vs show the fair m	arket value of the o		sets.	
(or service	s given by the reporting f	oundation. If the foundation rec	eive	• •	-			•	0010,	
(a) Lin		d) the value of the goods, (b) Amount involved	other assets, or services receiv		evemnt organization	_	(d) Description	of transfers, transactio	ne and charing ar	renneme	nte
(u)ciii	4110	(b) Amount involved	N/2		exempt organization	\dashv	(u) Description	or varisters, varisactio	ns, and sharing ar	angeme	
				-		\dashv					
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						4					
							<u> </u>				
	_				<u> </u>	-			·····		
		·	ļ			-			·		
						\dashv		···-			
						_1					
		•	tly affiliated with, or related to, o		or more tax-exempt organi	ızatı	ions described		[] v	Ī₩	No
			n 501(c)(3)) or in section 527?	•	•		•		Yes	LA	_ №о
<u> </u>	T"Yes," C	omplete the following scho (a) Name of org			(b) Type of organization	T		c) Description of re	lationshin		
		N/A	janization	\dashv	(b) Type of Organization	╁╴		c) Description of re	ланопопр		
		M/A				╁					
	·		Tribuna and a second			+		· • • • • • • • • • • • • • • • • • • •			
			· · · · · · · · · · · · · · · · · · ·	_		†					
				\neg		\top		·			
			hat I have examined this return, includ						May the IRS	discuss t	ы
Sign	n 🛌	olief, it is true, c		han t	axpayer) is based on all informa	ition i	of which preparer has	s any knowledge	return with the shown belo	o prepare See	-
Her	e D	Shind	less H Jens		26.4-11	[د	4-087	بعد	X Yes		,
	Sigr	nature of officer or trustee			Date		Title				
		Print/Type preparer's na	me reparer	's si	gnature	Da	ate	Check if	PTIN		
					0 0 40			self- employed			
Paic	-	JOANNA D.		•	W. Pavell	111	1/02/20		P01488		
,	parer	Firm's name ► CBI	Z MHM, LLC					Firm's EIN ► 2	6-37531	34	
Use	Only						···				
		ſ	0 BOYLSTON STR		3T			_		_	
		BO	STON, MA 02116					Phone no. 61	<u>7-761-0</u>		
									Form 99	1-2-	いついものい

15011102 143399 10728.031

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

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

SHIRLEY & MILTON LEVY FAMILY 22-6480716 CHARITABLE TRUST 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 X 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** X 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 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, 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 lf 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)

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization
SHIRLEY & MILTON LEVY FAMILY
CHARITABLE TRUST

Employer identification number

22-6480716

Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	P.O. BOX 9175 FRAMINGHAM, MA 01701-9175	\$\$	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Omnocash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)

Name of organization
SHIRLEY & MILTON LEVY FAMILY
CHARITABLE TRUST

Employer identification number

22-6480716

(Rantill)	Noncash Property (see instructions) Use duplicate copies of P	art 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	2500 SHARES MICROSOFT CORP		
(-)		\$ 308,225.	04/19/19
(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
	19	\$]	90, 990-EZ, or 990-PF) (20

Name of organization Employer identification number

	EY & MILTON LEVY FAMILY TABLE TRUST		22-6480716
Part III		ins to organizations described in section	on 501(c)(7), (8), or (10) that total more than \$1,000 for the year
	from any one contributor Complete columns (a) completing Part III, enter the total of exclusively religious, completing Part III, enter the total of exclusively religious, completing Part III, enter the total of exclusively religious.	through (e) and the following line entry	For organizations
	Use duplicate copies of Part III if additional s	pace is needed	To the year (Little this line vice)
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I	(b) Fulpose of gift	(c) Ose of gift	(a) Description of now gire is not
			
ľ		(e) Transfer of gift	
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
	-	 	
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I	(b) t dipose of gift	(0) 030 0. g	(a) Besser priorition of non-gricial role
			_
		(e) Transfer of gift	
i			
}	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
			·
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
ļ		<u>.</u>	
		(e) Transfer of gift	
	Transferee's name, address, an	d 71D . 1	Relationship of transferor to transferee
ŀ	Transieree's flame, address, and	0217 + 4	Netationship of transferor to transferee
	- 		
(a) No			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Faiti			
			_
		1.19 6 . 6.10	
		(e) Transfer of gift	
	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee
Ţ			

FORM 990-PF INTERES	ST ON SAVI	NGS AND TEM	IPORARY C	ASH IN	VESTMENTS	STATEMENT 1	
SOURCE		REVE	(A) REVENUE NE PER BOOKS		(B) VESTMENT COME	(C) ADJUSTED NET INCOME	
BNY MELLON		893.		893.			
TOTAL TO PART I, LII		893.		893.			
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM	SECUR	ITIES	STATEMENT 2	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REV	A) ENUE BOOKS	(B) NET INVES MENT INCO		
BNY MELLON QUANTITATIVE FUNDS	97,726 163,208			7,726. 1,717.			
TO PART I, LINE 4	260,934	. 141,49	11.	9,443.	119,44	13.	
FORM 990-PF DESCRIPTION		ACCOUNTI (A) EXPENSES PER BOOKS	NG FEES (B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
CBIZ	_	1,400.	,	0.		0.	
TO FORM 990-PF, PG 1	l, LN 16B =	1,400.		0.		0.	
FORM 990-PF		ТАХ	ES			STATEMENT 4	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
COMMONWEALTH OF MASS US TREASURY FOREIGN TAX	_ S	125. 10,600. 2,174.		125. 0. ,174.		0. 0. 0.	
TO FORM 990-PF, PG 1	L, LN 18	12,899.	2	,299.	· · · · · · · · · · · · · · · · · · ·	0.	
	=						

FORM 990-PF	CORPORATE STOCK		STATEMENT 5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
TJX COMPANIES 1,980 SHARES PACKAGING CORP OF 2,500 SHARES MICROSOFT CORP	AMERICA	1,582. 228,938. 308,225.	6,267,353. 221,206. 391,150.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	538,745.	6,879,709.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
QUANTITATIVE INC. INVESTMENTS	COST	1,559,156.	2,055,126.
TOTAL TO FORM 990-PF, PART II,	LINE 13	1,559,156.	2,055,126.