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.

		renue Service Go to www.	urs.gov/Form990PF for instr	uctions and the latest inf	ormation.	Open to Public Inspection
Foi	calen	dar yeá🕈 2019 or tax year beginning	<u> </u>	, and ending	•	
Na	ame of	undation			A Employer identification	number
,	200	FOR BANTLY BOIDDAMION			46-1506603	
		LEY FAMILY FOUNDATION and street (or P.O. box number if mail is not delivered to street)	adrivace	Room/suite		
		ANCHIN LLP - 1375 BROA	·	, noons saile	8 Telephone number 2128403456	
_		own, state or province, country, and ZIP or foreign			C If exemption application is p	
	-	YORK, NY 10018	postal cooc		o ii exemplion application to p	ending, crisck hard
_		all that apply. Initial return	Initial return of a fo	ormer public charity	D 1, Foreign organizations	s, check here
_		Final return	Amended return	, ,		
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test emputation
H	Check	type of organization. X Section 501(c)(3)	exempt private foundation	6.4	E If private foundation sta	tus was terminated
		ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ition 04	under section 507(b)(1)	(A), check here
		·	iting method X Cash	Acciual	F If the foundation is in a	
			Other (specify)	ic)	under section 507(b)(1)	(B), check here ►∟
	<u>►\$</u> art I	11,083,131. (Part I. cold			4 2 2 4	(d) Disbursements
ഥ	arti	(The total of amounts in columns (b) (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
2 -	1	Contributions, gifts, grants, etc., received	150,000.	,	N/A	(2.35), 2.25, 0.103/
24	2	Check I the foundation is not required to attach Sch. B				· .
1/2	3	Interest on savings and temporary cash investments	31,935.	31,935.		STATEMENT 1
- 1	4	Dividends and interest from securities	186,464.	186,464.		STATEMENT 2
	5a	Gross rents				
	b	Net rental income or (loss)	40.455			_
	ᅄ	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1 2 6 0 7 7 7	-43,157.	· · · · · · · · · · · · · · · · · · ·		,
	ANE .	assets on line 6a 1,369,747.		0.		1,
ſ	~ .	Capital gain net income (from Part IV, line 2)		<u> </u>		,
		Net short-term capital gain Income modifications				100
	1	Gross sales less returns and allowances			,	, "
		Loss Cost of goods sold				4
	c	Gross profit or (loss)				·
	11	Other income	6,317.	243.		STATEMENT 3
<u> </u>	12	Total Add lines 1 through 11	331,559.	218,642.		ļ
2	13	Compensation of officers directors, trustees etc	0.	0.		0
Bac	14	Other employee salaries and wages		-		η
hing		Pension plans, employee benefits Legal fees			RECEIVEL	
Qed Qed		Accounting fees			1	K1
Received In Batching Ogden	21	Other professional fees STMT 4	34,444.	34,1014.	NOV 0 9 2020	6
	를 17	Interest		6		ix l
DEC	를 18 등	Taxes STMT 5	5,166.	5,166.	DGDEN, UT	0
() . ယ	[19	Depreciation and depletion			DODLING	
-	를 20	Occupancy			 	-
3 0 20 20	21 0 22	Travel, conferences, and meetings			 	
	22 5 23	Printing and publications Other expenses STMT 6	496.	0.	1	496
	E 23	Total operating and administrative			1	
	Opera	expenses. Add lines 13 through 23	40,106.	39,610.		496
(5 25	Contributions, gifts, grants paid	182,500.	31 n	, A	182,500
	26	Total expenses and disbursements.				
_	4	Add lines 24 and 25	222,606.	39,610.		182,996
	1	Subtract line 26 from line 12	100 053		And Make With the s	English affection at the
		Excess of revenue over expenses and disbursements	108,953.	179,032.		A SA COMPANY AND THE SAME ASSAULT
		Net investment income (if negative enter -0-)	•	113,032.	N/A	
_		Adjusted net income (if negative, enter -0-) -17-19 LHA For Paperwork Reduction Act Noti			1 47.4	Form 990-PF (20

Б	art	Balance Sheets Attached screedules and amounts in the description	Beginning of year	End of	
	arı	column should be for end of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	18,977.	35,981.	35,981.
	2	Savings and temporary cash investments	1,021,446.	1,403,229.	1,403,229.
	3	Accounts receivable >	* 1 - 1/5*0300000000000000000000000000000000000	, , , , , , , , , , , , , , , , , , , ,	X XX 400000 x X 7.
		Less: allowance for doubtful accounts			
	4	Pledges receivable >			
	`	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	l		
		disqualified persons			
	7	Other notes and loans receivable		·	
	ĺ	Less: allowance for doubtful accounts			
ß	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock STMT 7	7,829,902.	7,401,726.	8,152,603.
	C	Investments - corporate bonds STMT 8	1,338,315.	1,465,198.	1,491,318.
	11	Investments land buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			·
	15	Other assets (describe			
	16	Total assets (to be completed by all file s - see the		40.006.404	44 000 404
	_	instructions. Also, see page 1, item I)	10,208,640.	10,306,134.	11,083,131.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers directors trustees, and other disqualified persons			
ë	21	Mortgages and other notes payable			·
_	22	Other habilities (describe			
	١	T > 11 - 110 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	0.	0.	
	23	Total liabilities (add lines 17 through 22)	0.	U •	
		Foundations that follow FASB ASC 958, check here			
ës	۱,,	and complete lines 24, 25, 29, and 30			ļ
alances	24	Net assets without donor restrictions			
	25	Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check here			
Net Assets or Fund B					
Ē	26	and complete lines 26 through 30 Capital stock, trust principal, or current funds	0.	0.	
S	26 27	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
set	28	Retained earnings, accumulated income, endowment, or other funds	10,208,640.	10,306,134.	
As	29	Total net assets or fund balances	10,208,640.	10,306,134.	
Š	23	retainet assets of fund paramets	20/200/0200	20,000,2020	
	30	Total liabilities and net assets/fund balances	10,208,640.	10,306,134.	Í
			, <u>,</u>		
	art				
		net assets or fund balances at beginning of year - Part II, column (a), line 2	29		
		st agree with end-of-year figure reported on prior year's return)		1	10,208,640.
		amount from Part I, line 27a		2	108,953.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	10,317,593.
		eases not included in line 2 (itemize) COST BASIS ADJU		5	11,459.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 29		10,306,134.
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Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold (for example, real estate, (c) Date acquired (d) Date sold (mo., day, yr.) (mó., day, yr.) 2-story brick warehouse, or common stock, 200 shs MLC Co.) 12/31/19 US TRUST #7093 S/T P VARIOUS #7093 12/31/19 b US TRUST L/T P VARIOUS c BESSEMER #5125 P VARIOUS 12/31/19 S/T d BESSEMER #5125 L/T P VARIOUS 12/31/19 e CAPITAL GAINS DIVIDENDS (h) Gain or (loss) (f) Depreciation allowed (g) Cost or other basis (e) Gross sales price (or allowable) plus expense of sale ((e) plus (f) minus (g)) 514,997 532,017 -17,020. a 725.135. 682.077. -43 058. b 42. 44. -2. 157 238. 708. 530. 155 d 15,393.393. Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (I) Gains (Col. (h) gain minus col (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) FMV as of 12/31/69 as of 12/31/69 over col (j), if any 020 -17 -43,058. b đ 530. 15 393. If gain, also enter in Part I, line 7 -43,157. 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c). N/A If (loss) enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income) If section 4940(d)(2) applies, leave this part blank Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making any entries. (**d**) Distribution ratio (a) Base period years Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) (col. (b) divided by col. (c)) 9,901,680. 173,525 .017525 2018 145,518 837,297. .014792 2017 228,798. 150,678. 035631 2016 156,478. 297,210. .029540 2015 616,402 623,950. .080851 2014 .178339 2 Total of line 1, column (d) 2 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years .035668 the foundation has been in existence if less than 5 years 10,234,795. Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 Multiply line 4 by line 3 365,055. 1,790. Enter 1% of net investment income (1% of Part I, line 27b) 6 366,845. 7 Add lines 5 and 6 182,996. 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.

See the Part VI instructions.

De	irt VII-A Statements Regarding Activities (continued)	003		rayej
Pe	Int VII-A Statements Regarding Activities (continued)			
		—	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1 1		
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	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 ► N/A			
14	The books are in care of ► ANCHIN, BLOCK & ANCHIN LLP Telephone no. ► 212-84	0 - 3	456	
•	Located at ► 1375 BROADWAY, NEW YORK, NY ZIP+4 ►10			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			
13	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
40			Yes	No
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,	16	100	X
	securities, or other financial account in a foreign country?	16		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
<u> </u>	foreign country	<u> </u>		
Pe	rt 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.	\vdash	Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			Ì
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		1	
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1 1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?		i	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		ĺ	Į
	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.)			İ
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	<u> </u>		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2019?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
_	defined in section 4942(j)(3) or 4942(j)(5)):			l
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			1
	6d and 6e) for tax year(s) beginning before 2019? Yes X No			
	If "Yes," list the years			ı
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect]]		
•	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		l	l
	statement - see instructions.) N/A	2b		
٠,	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 1		
2.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
Ja				
L	· ·			
0	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A			
	· · · · · · · · · · · · · · · · · · ·	3b	-	X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	46	L DE	
	F0	rm 990	,-rr	(2019)

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired _{(contin}	ued)		
5a During the year, did the foundation pay or incur any amount to:(1) Carry on propaganda, or otherwise attempt to influence legislation (section)			es X No	Ye	s No
 (2) Influence the outcome of any specific public election (see section 4955); or any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes' 		Y6	es X No		
(4) Provide a grant to an individual for traver, study, or other similar purposes			S LAL NO		1 1
4945(d)(4)(A)? See instructions			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?		Ye	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	N / N -	_	_
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b	+
Organizations relying on a current notice regarding disaster assistance, check h					1 1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr					
expenditure responsibility for the grant?	N	I/A Y	es No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		•			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on				
a personal benefit contract?		Ye	es 🗶 No 📙		_
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u> </u>	6b	X
If "Yes" to 6b, file Form 8870.					1 1
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s 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?		Y6	s X No	ŀ	
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	es, Foundation Mar	nagers, Highly		•	
1 List all officers, directors, trustees, and foundation managers and th	eir 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 deterred compensation	accour	xpense nt, other vances
THOMAS E. DOOLEY	PRESIDENT				
C/O ANCHIN LLP-1375 BROADWAY					
NEW YORK, NY 10018	0.50	0.	0.		0.
BARBARA DOOLEY	VICE PRESIDEN	Tr Tr			
C/O ANCHIN LLP- 1375 BROADWAY					
NEW YORK, NY 10018	0.50	0.	0.		0.
				•	
					
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."	(d) Contabulance	,	
(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) E: accour allow	xpense nt, other vances
NONE					
Total number of other employees paid over \$50,000			>		0
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Part-VIII Information About Officers, Directors, Trustees, Foundation M Paid Employees, and Contractors (continued)	anagers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE	.0	•
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
` NONE		
	·	
		▶ 0
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infornumber of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	mation such as the	Expenses
1 N/A		
2		
3		
4		
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 as	nd 2	Amount
1 N/A		
2	<u></u>	
All other program-related investments. See instructions.		
Total. Add lines 1 through 3		0.
		Form 990-PF (2019)

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	dations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	9,124,549. 1,266,106.
b	Average of monthly cash balances	1b	1,266,106.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	10,390,655.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	10,390,655.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	155,860.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	10,234,795.
6	Minimum investment return. Enter 5% of line 5	6	511,740.
Р	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here and do not complete this part.)	d certain	
_	Minimum investment return from Part X, line 6	1	511,740.
1	Tax on investment income for 2019 from Part VI, line 5 2a 3,581.		311,7100
	Income tax for 2019 (This does not include the tax from Part VI.)		
b	Add lines 2a and 2b	2c	3,581.
C	Distributable amount before adjustments. Subtract line 2c from line 1	3	508,159.
3	Recoveries of amounts treated as qualifying distributions	4	0.
4		5	508,159.
5	Add lines 3 and 4 Deduction from distributable amount (see instructions)	6	0.
6	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	508,159.
<u>7 </u>			300,133,
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	182,996.
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		•
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII. line 4	4	182,996.
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	182,996.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies fo	r the section

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Part XIII Undistributed Income (see instructions)

				, , , ,
	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distribùtable amount for 2019 from Part XI,	Corpus	Tears prior to 2010	2010	2019
line 7				508,159.
2 Undistributed income if any, as of the end of 2019				
a Enter amount for 2018 only			0.	
b Total for prior years				
,,		0.		
3 Excess distributions carryover, if any, to 2019			, ,	
a From 2014 237,941.				
b From 2015				
c From 2016				
d From 2017 ,				
e From 2018				
f Total of lines 3a through e	237,941.			
4 Qualifying distributions for 2019 from				
Part XII, line 4 ►\$ 182,996.				
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	0			
(Election required - see instructions)	0.			100.006
d Applied to 2019 distributable amount				182,996.
e Remaining amount distributed out of corpus	0.			<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))	237,941.			237,941.
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	i			
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions		U •		
e Undistributed income for 2018. Subtract line			0.	
4a from line 2a Taxable amount - see instr. f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				87,222.
7 Amounts treated as distributions out of				07,222
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 /	0.			
9 Excess distributions carryover to 2020.				********
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:	· — —			
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				- 000 DE (00/0)

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Form **990-PF** (2019)

3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ANCING DREAMS	NONE	PC	GENERAL PURPOSE	
23-91 BELL BLVD STE LLC 2				
BAYSIDE, NY 11360				1,000
EAST END HOSPICE	NONE	PC	GENERAL, PURPOSE	
P.O. BOX 1048]	
WESTHAMPTON BEACH, NY 11978				10,000
LITERACY INC.	NONE	₽C	GENERAL PURPOSE	
5030 BROADWAY STE 641				
NEW YORK, NY 10034				25,000
NORTH GUODE LT. N.L. INCE	NONE	₽C	GENERAL PURPOSE	
NORTH SHORE LIJ ALLIANCE 972 BRUSH HOLLOW ROAD	NONE		SENERAL PURPOSE	
WESTBURY, NY 11590				20,500
· · · · · · · · · · · · · · · · · · ·				·
NORTHWELL HEALTH FOUNDATION	NONE	PC	GENERAL PURPOSE	
972 BRUSH HOLLOW ROAD 5TH FLOOR				81 000
WESTBURY, NY 11590 Total SEE CO	<u> </u>	ጥ/ ፍ ነ	▶ 3a	81,000 182,500
Total SEE CO b Approved for future payment	ONTINOATION SHEE	1(5)	Ja Ja	102,500
NONE				
		_		
-				
Total			▶ 3b	rm 990-PF (201

Ø

Part XVI-A	Analysis	of Income-	Producing	Activities

Enter gross amounts unless otherwise indicated	Unrelate	ed business income		ided by section 512 513 or 514	(e)
Enter gross amounts unioss otherwise indicated	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue	code	Amount	code	Amount	function income
a				<u> </u>	
b					
C					
d					
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	31,935.	
4 Dividends and interest from securities			14		
5 Net rental income or (loss) from real estate:	,				· · · · · · · · · · · · · · · · · · ·
a Debt-financed property					
b Not debt-financed property			T		
6 Net rental income or (loss) from personal					
property			1		
7 Other investment income			01	243.	
8 Gain or (loss) from sales of assets other					
than inventory			18	-43,157.	
9 Net income or (loss) from special events			ì		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue			1		
a NONDIVIDEND					
DISTRIBUTIONS - US TRUST					· · · · · ·
¢ #7093			14	4,751.	0.
d NONDIVIDEND		· · · · · · · · · · · · · · · · · · ·	Ī		
e DISTRIBUTIONS - BESSEMER			14	1,323.	0.
12 Subtotal Add columns (b), (d), and (e)		0.		181,559.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	181,559.
(See worksheet in line 13 instructions to verify calculations.)				-	· ·

Part XVI-B	Relationship of Activities to the Accomplishment of Exempt Purposes
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Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
923521 12-17-	Form 990-PF (201

ruiii 990-FF (2	19) DOODBI PARILL.	FOUNDATION	40 1300003
Part XVII	Information Regarding Tr	insfers to and Transactions and	Relationships With Noncharitable
<u> </u>	Exempt Organizations		
		44 44 1 1	dbd

1			rectly engage in any of the followin		n described in section 501(c)		Yes	No
			izations) or in section 527, relating					l
а		· · · · · ·	ation to a noncharitable exempt org	janization of:				 -
	(1) C					1a(1)		X
		ther assets				1a(2)		X
þ		transactions:						
	٠,,	ales of assets to a noncharital	· · · · · · · · · · · · · · · · · · ·			1b(1)		X
	` '		ncharitable exempt organization			1b(2)		X
		ental of facilities, equipment,	or other assets			1b(3)		X
	٠,	eimbursement arrangements				1b(4)		X
		oans or loan guarantees				1b(5)		X
	. ,		mbership or fundraising solicitation			1b(6)		X
			iling lists, other assets, or paid em	· -		1c		Х
đ		-			rays show the fair market value of the goods, of		ets,	
				d less than fair market value	e in any transaction or sharing arrangement, sho	ow in		
			other assets, or services received		1 (0)-			
(a)L	on enı.	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description of transfers, transactions, and sh	aring arra	ngemer	its
			N/A					
		· · · · · · · · · · · · · · · · · · ·						
				.	4			
			<u></u>					
					<u> </u>			
			<u> </u>					
2a		•	tly affiliated with, or related to, one	or more tax-exempt organiz	ations described		(- -	٦.
			n 501(c)(3)) or in section 527?			Yes	LX	No
b	If "Yes	s," complete the following sch		····				
		(a) Name of org	panization	(b) Type of organization	(c) Description of relationsh	ıp		
		N/A						

Sign Here	der penalties of perfusy, I declare that have examined this belief, it is tree porrect, and complete. Declaration of programme of programme of officer or trustee.				May the IRS discuss this return with the preparer shown below? See instr
Paid	Print/Type preparer's name JARED FELDMAN	reparer's signature JARED FELDMAN	Date 07/17/20	Check If self- employed	PTIN P01334565
Dranara	P - DIOCITAT DIOC	ITZ C BATCHITAT TTD		le . e.u. ► 1	2 0126010

Preparer | Firm's name ► ANCHIN, BLOCK & ANCHIN LLP Firm's EIN ► 13-0436940 Firm's address ► 1375 BROADWAY NEW YORK, NY 10018-7001 Phone no 212-840-3456

Form **990-PF** (2019)

V

Use Only

Schedule B

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

Department of the Treasury Internal Revenue Service

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

Name of the organization

Employer identification number

1	DOOLEY FAMILY FOUNDATION	46-1506603
Organization type (chec	; 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	
Note: Only a section 501 General Rule	(c)(7), (8) or (10) organization can check boxes for both the General Rule and a Special Ru	ile See instructions
	c)(7), (8) or (10) organization can check boxes for both the General Rule and a Special Ru	ile See instructions
	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totalin ny one contributor. Complete Parts I and II. See instructions for determining a contributor	
Special Rules		
sections 509(a)(any one contrib	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II line 13 16a, utor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the among EZ, line 1 Complete Parts I and II	or 16b and that received from
year, total contr	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from butions of more than \$1,000 exclusively for religious, charitable, scientific, literary or educelty to children or animals. Complete Parts I, II, and III	
year, contributio is checked, ente purpose Don't o	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ins exclusively for religious, charitable, etc., purposes, but no such contributions totaled in the the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it ble, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000 If this box us, charitable, etc ,
	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Foon Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its F	

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

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ or 990-PF)

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

Name of organization

Employer identification number

DOOLEY	FAMILY	FOUNDATION
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DOOLE	Y FAMILY FOUNDATION	46	-1506603
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	THOMAS DOOLEY C/O ANCHIN - 1375 BROADWAY NEW YORK, NY 10018	\$ <u>150,000.</u>	Person X 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 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 Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Oceannel (Complete Part II for noncash contributions)

Name of organization

Employer identification number

DOOLEY FAMILY FOUNDATION

46-1506603

OOLEY FAMI	LY FOUNDATION	46	-1506603
Part II Nonca	sh Property (see instructions) Use duplicate copies of Pa	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
		s	and the state of t
(a) No. rom art I	(b) Descríption of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

Name of or	rganization		Employer identification number
DOOLEY	Y FAMILY FOUNDATION		46-1506603
Part III	Exclusively religious, charitable, etc., contribution any one contributor. Complete columns completing Part III, enter the total of exclusively religious. Use duplicate copies of Part III if additional	(a) through (e) and the following line entr , charitable, etc., contributions of \$1,000 or lie	ction 501(c)(7), (8), or (10) that total more than \$1,000 for the year
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
Ì		(e) Transfer of gift	
-	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address,	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	To the second of	(e) Transfer of gift	
İ	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
[
ļ			
	* 6	(e) Transfer of gift	
ŀ	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor THE WATERFRONT CENTER NONE GENERAL PURPOSE P.O. BOX 53351 14,000. WASHINGTON, DC 20009 DANA'S ANGELS RESEARCH TRUST NONE GENERAL PURPOSE 15 E. PUTNAM AVE #117 25,000. GREENWICH, CT 06830 GENERAL PURPOSE FRIENDS OF NASSAU COUNTY BAILEY NONE ЬC ARBORETUM PO BOX 371 1,000. LOCUST VALLEY, NY 11560 GENERAL PURPOSE NONE MEMORIAL SLOAN KETTERING CANCER ЬC CENTER 1275 YORK AVE 5,000. NEW YORK, NY 10065 45,000. Total from continuation sheets

FORM 990-PF INTERE	EST ON SAVINO	SS AND TEMPOR	ARY CASH IN	VESTMENTS S	TATEMENT 1
SOURCE		(A) REVENUE PER BOOK	NET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME
INTEREST - BESSEMER INTEREST - BESSEMER BOND PREMIUM		23,8		23,809.	
INTEREST - BOA #826 INTEREST - US TRUST			45.	245. 14,221.	
TOTAL TO PART I, LI	INE 3	31,9	35.	31,935.	
FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES S	TATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
DIVIDENDS - US TRUST #7093 DIVIDENDS-	61,286.	358.	60,928.	60,928.	
BESSEMER #5152	140,571.	15,035.	125,536.		
TO PART I, LINE 4	201,857.	15,393.	186,464.	186,464.	
FORM 990-PF		OTHER INCO	ME	S	TATEMENT 3
DESCRIPTION		RE	· ·	(B) ET INVEST- ENT INCOME	(C) ADJUSTED NET INCOME

243.

4,751.

1,323.

6,317.

243.

0.

0.

243.

#7093

TRUST #7093

BESSEMER

OTHER INVESTMENT INCOME - US TRUST

TOTAL TO FORM 990-PF, PART I, LINE 11

NONDIVIDEND DISTRIBUTIONS - US

NONDIVIDEND DISTRIBUTIONS -

FORM 990-PF (OTHER PROFES	SIONAL FEES	S	TATEMÉNT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
US TRUST INVESTMENT MGMT FEES	22,372.	22,372.		0.
US TRUST ADVISORY FEES BESSEMER INVESTMENT MGMT	4,882.			0.
FEES BESSEMER INVESTMENT	7,165.	7,165.		0.
EXPENSES	25.	25.		0.
TO FORM 990-PF, PG 1, LN 16C	34,444.	34,444.		0.
FORM 990-PF	TAX	ES	S	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES PAID-US TRUST #7093 FOREIGN TAXES	936.	936.		0.
PAID-BESSEMER #5125	4,230.	4,230.		0.
TO FORM 990-PF, PG 1, LN 18	5,166.	5,166.		0.
FORM 990-PF	OTHER E	XPENSES	S'	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FILING FEES	496.	0.		496.
TO FORM 990-PF, PG 1, LN 23	496.	0.		496.

FORM 990-PF	CORPORATE S	STOCK		STATEMENT 7
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
BESSEMER #5125 - SEE STATEMENT	ATTACHED	-	7,401,726.	8,152,603.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	-	7,401,726.	8,152,603.
FORM 990-PF	CORPORATE E	BONDS		STATEMENT 8
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
BESSEMER # 5125- SEE STATEMENT	ATTACHED	-	1,465,198.	1,491,318.
TOTAL TO FORM 990-PF, PART II,	LINE 10C	•	1,465,198.	1,491,318.