

Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

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

▶ **Do not enter social security numbers on this form as it may be made public.**
 ▶ **Go to www.irs.gov/Form990PF for instructions and the latest information.**

OMB No. 1545-0052
2019
Open to Public Inspection

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

Name of foundation The Spread Compassion Foundation		A Employer identification number 47-7005429	
Number and street (or P.O. box number if mail is not delivered to street address) 252 Stonehenge Drive		B Telephone number (see instructions) (716) 860-3189	
City or town, state or province, country, and ZIP or foreign postal code Orchard Park, NY 14127		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here..... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <u>22,982</u>		J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis.)</i>	
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	4,676			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	1	1	1	
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	20,402			
	b Gross sales price for all assets on line 6a <u>25,078</u>				
	7 Capital gain net income (from Part IV, line 2)		20,402		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	25,079	20,403	1		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	100	100		100
	c Other professional fees (attach schedule)	3			3
	17 Interest	63			63
	18 Taxes (attach schedule) (see instructions)	50	50		50
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)				
	24 Total operating and administrative expenses. Add lines 13 through 23	216	150		216
	25 Contributions, gifts, grants paid	19,528			19,528
26 Total expenses and disbursements. Add lines 24 and 25	19,744	150		19,744	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	5,335				
b Net investment income (if negative, enter -0-)		20,253			
c Adjusted net income (if negative, enter -0-)			1		

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	12,654	22,982	22,982
	2 Savings and temporary cash investments	1,683		
	3 Accounts receivable ▶ _____ 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 disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)	1			
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	14,338	22,982	22,982	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)		3,310	
	23 Total liabilities (add lines 17 through 22)		3,310	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions	14,338		
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust 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 (see instructions)	14,338	19,672		
30 Total liabilities and net assets/fund balances (see instructions) .	14,338	22,982		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	14,338
2 Enter amount from Part I, line 27a	2	5,335
3 Other increases not included in line 2 (itemize) ▶ _____	3	
4 Add lines 1, 2, and 3	4	19,673
5 Decreases not included in line 2 (itemize) ▶ _____	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	19,673

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a 131.00 Invesco QQQ Trust Unit Ser 1 ETF	D	2019-09-05	2019-09-05
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 25,078		4,676	20,402
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			20,402
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	20,402
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	20,671	24,815	0.83300
2017	27,700	47,358	0.58491
2016	14,048	15,171	0.92598
2015	16,007	10,995	1.45584
2014			

2 Total of line 1, column (d)	2	3.799731
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.949933
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	12,274
5 Multiply line 4 by line 3	5	11,659
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	203
7 Add lines 5 and 6	7	11,862
8 Enter qualifying distributions from Part XII, line 4	8	19,744

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

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

Table with 11 rows for excise tax calculation. Includes questions about exempt foundations, tax under section 511, and tax due. Total amount owed is 103.

Part VII-A Statements Regarding Activities

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

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	Yes	
14	The books are in care of ▶ <u>Martha Cipriani</u> Telephone no. ▶ <u>(716) 860-3189</u> Located at ▶ <u>252 Stonehenge Drive Orchard Park NY</u> ZIP+4 ▶ <u>14127</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ▶ 15		
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority 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 ▶	Yes	No

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.

		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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>	1b	No
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	No
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)):		
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
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?	4b	No

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

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

Part IX-A Summary of Direct Charitable Activities

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

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

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

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	12,461
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	12,461
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	12,461
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	187
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	12,274
6	Minimum investment return. Enter 5% of line 5.	6	614

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

1	Minimum investment return from Part X, line 6.	1	614
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	203
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	203
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	411
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	411
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	411

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	19,744
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
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	19,744
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	203
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	19,541

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				411
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.				
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.	15,457			
c From 2016.	13,289			
d From 2017.	25,360			
e From 2018.	19,430			
f Total of lines 3a through e.	73,536			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ _____ 19,744				
a Applied to 2018, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				411
e Remaining amount distributed out of corpus	19,333			
5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:	92,869			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b				
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.				
d Subtract line 6c from line 6b. Taxable amount—see instructions				
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions				
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	92,869			
10 Analysis of line 9:				
a Excess from 2015.	15,457			
b Excess from 2016.	13,289			
c Excess from 2017.	25,360			
d Excess from 2018.	19,430			
e Excess from 2019.	19,333			

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. ▶

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

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

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					

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

a "Assets" alternative test—enter:

(1) Value of all assets

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

b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .

c "Support" alternative test—enter:

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).

(3) Largest amount of support from an exempt organization

(4) Gross investment income

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

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

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

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

Martha Cipriani
252 Stonehenge Drive
Orchard Park, NY 14127
(716) 860-3189
sheltonmartha87@gmail.com

b The form in which applications should be submitted and information and materials they should include:

A form listing reason for financial difficulty should besubmitted. It should be accompanied by a caseworker'sstatement and a disclosure of personal balance sheet andsources of income and summary of annual expenses.Generally the recipients are people suffering financialdifficulties as a result of uninsured large medicalexpenses which either have limited the ability to work orhave overwhelmed the ability of the family to staysolvent. In some cases the financial difficulties arisefrom other unexpected income insufficiencies such asunemployment or job changes.

c Any submission deadlines:

There is no submission deadline.

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Generally the parties served are in the GreaterBuffalo/Niagara and Western New York region.

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> SEE ATTACHED SCHEDULE SEE ATTACHED SCHEDULE BUFFALO, NY 14215	NONE	I	SEE ATTACHED SCHEDULE	19,528
Total			▶ 3a	19,528
b <i>Approved for future payment</i>				
Total			▶ 3b	

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
Martha Cipriani 252 Stonehenge Orchard Park, NY 14127	President 0.00	0		
James Cipriani 252 Stonehenge Drive Orchard Park, NY 14127	Vice President 0.00	0		
Richard Teibel 120 Viscount Drive Williamsville, NY 14221	Treasurer 0.00	0		
Anne Dunbar 242 Stonehenge Drive Orchard Park, NY 14127	Director 0.00	0		
Patricia Valtin 56 Coventry Lane Orchard Park, NY 14127	Director 0.00	0		
Jonathan Poliseno 210 Curley Drive Orchard Park, NY 14127	Director 0.00	0		

TY 2019 Accounting Fees Schedule**Name:** The Spread Compassion Foundation**EIN:** 47-7005429**Software ID:** 19009920**Software Version:** 2019v5.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	100	100	0	100

TY 2019 Other Liabilities Schedule**Name:** The Spread Compassion Foundation**EIN:** 47-7005429**Software ID:** 19009920**Software Version:** 2019v5.0

Description	Beginning of Year - Book Value	End of Year - Book Value
visa card payable		864
overpayment		2,446

TY 2019 Other Professional Fees Schedule**Name:** The Spread Compassion Foundation**EIN:** 47-7005429**Software ID:** 19009920**Software Version:** 2019v5.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
investment management fees	3	0	0	3

TY 2019 Taxes Schedule**Name:** The Spread Compassion Foundation**EIN:** 47-7005429**Software ID:** 19009920**Software Version:** 2019v5.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
State filing fee	50	50		50

Spread Compassion					
Attachment to Form 990-PF Part XV					
Name	Address	Purpose		Hardship Desc	Amount Pd
Olajumoke, A	450 Minnesota Ave Buffalo 14215	bus pass mar	individual	job training/low income	\$ 75.00
Olajumoke, A	450 Minnesota Ave, Buffalo 14215	bus pass-apr	individual	job training/low income	\$ 75.00
Olajumoke, A	450 Minnesota Ave, Buffalo 14125	bus pass-may	individual	job training/low income	\$ 75.00
Olajumoke, A	450 Minnesota Ave, Buffalo 14125	bus pass-june	individual	job training/low income	\$ 75.00
Olajumoke, A	450 Minnesota Ave, Buffalo 14215	bus pass-july	individual	job training/low income	\$ 75.00
Olajumoke, A	450 Minnesota Ave Buffalo 14215	bus pass-sept	individual	job training/low income	\$ 75.00
Olajumoke, A	450 Minnesota Ave Buffalo 14215	bus pass-oct	individual	job training/low income	\$ 75.00
Olajumoke, A	450 Minnesota Ave Buffalo 14215	bus pass-nov	individual	job training/low income	\$ 75.00
Chambers, Craig	413 S Utica Buffalo 14208	bus pass-feb	individual	secure job/low income	\$ 75.00
Saysay, Anthony	23 Griford St Buffalo 14212	bus pass-feb	individual	secure job/low income	\$ 75.00
Hill, Alva	78 Sundridge Dr Apt #1 Amherst 14228	bus pass-feb	individual	secure job/low income	\$ 75.00
Day, Amir	2026 Hertle Ave Buffalo 14214	bus pass-feb	individual	secure job/low income	\$ 75.00
Hodge, Sherita	76 Clarence Ave Buffalo 14215	bus pass-feb	individual	secure job/low income	\$ 75.00
Bonds, Linda	31 Marine Dr Apt 3D Buffalo 14202	bus pass-feb	individual	secure job/low income	\$ 75.00
Glenn, Pamela	296 Pine St Buffalo 14204	bus pass-feb	individual	secure job/low income	\$ 75.00
Sloan, Ken	207 May St Buffalo 14211	bus pass-feb	individual	secure job/low income	\$ 75.00
Hill, Alva	420 Westgate Rd Kenmore 14217	bus pass-march	individual	secure job/low income	\$ 75.00
Kilpatrick, Latonya	2299 Elmwood Ave Apt #5 Buffalo 14217	bus pass-march	individual	secure job/low income	\$ 75.00
Fletcher, Barrett	183 Dodge St Buffalo 14209	bus pass-march	individual	secure job/low income	\$ 75.00
Williams, Valerie	543 Riley St Buffalo 14208	bus pass-march	individual	secure job/low income	\$ 75.00
Sloan, Ken	207 May St Buffalo 14211	bus pass-march	individual	secure job/low income	\$ 75.00

Spread Compassion						
Attachment to Form 990-PF Part XV						
Name	Address	Purpose		Hardship Desc	Amount Pd	
Wilson, Oscar	267 Elmwood Buffalo 14222	bus pass-apr	individual	secure job/low income	\$	75.00
Betts, Jacqueline	32 Berwyn Ave Buffalo 14215	bus pass-apr	individual	secure job/low income	\$	75.00
Bonds, Linda	31 Marine Dr Apt 3D Buffalo 14202	bus pass-apr	individual	secure job/low income	\$	75.00
Jackson, Debbie	58 Rounds Ave Buffalo 14215	bus pass-apr	individual	secure job/low income	\$	75.00
Glenn, Pamela	49 Best St Buffalo 14214	bus pass-apr	individual	secure job/low income	\$	75.00
Garrett, Kevin	234 Dewey Ave Buffalo 14214	bus pass-apr	individual	secure job/low income	\$	75.00
Williams, Valerie	543 Riley St Buffalo 14208	bus pass-may	individual	secure job/low income	\$	75.00
Hill, Alva	408 Shirley Ave Buffalo 14215	bus pass-may	individual	secure job/low income	\$	75.00
Pope, Shirley	286 Stockbridge Ave Buffalo 14215	bus pass-may	individual	secure job/low income	\$	75.00
Abdul-takim, Yusuf	531 Franklin St Buffalo 14202	bus pass-may	individual	secure job/low income	\$	75.00
Ramseure, Iyana	288 14th St Buffalo 14213	bus pass-may	individual	secure job/low income	\$	75.00
Bowen, Betty	397 Glenwood Ave Buffalo 14208	bus pass-june	individual	secure job/low income	\$	75.00
McCool, Maghen	933 Exchange St. Lower Buffalo 14210	bus pass-june	individual	secure job/low income	\$	75.00
Hill, Alva	468 Shirley Ave Buffalo 14215	bus pass-june	individual	secure job/low income	\$	75.00
Johnson, Leatrice	280 Beacon St Buffalo 14204	bus pass-june	individual	secure job/low income	\$	75.00
Cash, Terrance	943 Walden Buffalo 14211	bus pass-june	individual	secure job/low income	\$	75.00
Gillie, Lena	97 Eggert Rd Buffalo 14215	bus pass-aug	individual	secure job/low income	\$	75.00
Bryant, LaVern	654 E. Utica St Lower Buffalo 14211	bus pass-aug	individual	secure job/low income	\$	75.00
Betts, Jacqueline	32 Berwyn Ave Buffalo 14215	bus pass-aug	individual	secure job/low income	\$	75.00
Glenn, Pamela	49 Gest St Buffalo 14214	bus pass-aug	individual	secure job/low income	\$	75.00

Spread Compassion					
Attachment to Form 990-PF Part XV					
Name	Address	Purpose		Hardship Desc	Amount Pd
Fulks, Michelle	71 Decker Buffalo 14215	bus pass-aug	individual	secure job/low income	\$ 75.00
Cranford, Ed	300 Ellicott Apt #35 Buffalo 14203	bus pass-sept	individual	secure job/low income	\$ 75.00
Ortiz, Izaria	26 Blackmore St Tonawanda 14150	bus pass-sept	individual	secure job/low income	\$ 75.00
Livingston, Joyce	21 Dina Green Buffalo 14204	bus pass-sept	individual	secure job/low income	\$ 75.00
Fulks, Michelle	71 Decker Buffalo 14215	bus pass-sept	individual	secure job/low income	\$ 75.00
Cash, Juanita	115 Walden Cheektowaga 14211	bus pass-nov	individual	secure job/low income	\$ 75.00
Bonds, Linda	31 Marine Dr Apt 3D Buffalo 14202	bus pass-nov	individual	secure job/low income	\$ 75.00
Lucas, Jesse	115 Mona Dr Buffalo 14226	bus pass-nov	individual	secure job/low income	\$ 75.00
Flores, Jadrien	468 W Ferry St Buffalo 14213	bus pass-nov	individual	secure job/low income	\$ 75.00
Rawls, Isaiah	505 Elmwood Buffalo 14222	bus pass-nov	individual	secure job/low income	\$ 75.00
Bhattacharjee, Mukta	855 William St Buffalo 14206	bus pass-nov	individual	secure job/low income	\$ 75.00
Allen, Lynette	186 Suffolk St Upper Buffalo 15215	bus pass-dec	individual	secure job/low income	\$ 75.00
Rawls, Isaiah	505 Elmwood Buffalo 14222	bus pass-dec	individual	secure job/low income	\$ 75.00
Harris, Vannie	505 Elmwood #8G Buffalo 14222	bus pass-dec	individual	secure job/low income	\$ 75.00
Daniels, Brianna	170 Ladner Ave Buffalo 14220	bus pass-dec	individual	secure job/low income	\$ 75.00
Alaku, Obiamaka	150 East North St Buffalo 14203	bus pass-dec	individual	secure job/low income	\$ 75.00
Davis, Donna	335 Summer St Apt#607 Buffalo 14222	car insurance	individual	secure job/low income	\$ 318.24
Garrett, Kevin	234 Dewey Ave Buffalo 14214	finger printing	individual	secure job/low income	\$ 100.25
Garrett, Kevin	234 Dewey Ave Buffalo 14214	feb rent	individual	homelessness crisis	\$ 600.00
Garrett, Kevin	234 Dewey Ave Buffalo 14214	mar rent	individual	homelessness crisis	\$ 600.00
Glenn, Pamela	520 Virginia St Apt#19 Buffalo 14202	nov rent	individual	homelessness crisis	\$ 600.00

Spread Compassion					
Attachment to Form 990-PF Part XV					
Name	Address	Purpose		Hardship Desc	Amount Pd
Hill, Alva	408 Shirley Ave Buffalo 14215	may rent	individual	homelessness crisis	\$ 375.00
Hodge, Sherita	95 Schiller St Upper Buffalo 14206	NYS certification	individual	secure job/low income	\$ 120.00
Lucas, Jesse	115 Mona Dr Buffalo 14226	8 hour class for security guard license	individual	secure job/low income	\$ 100.00
Lucas, Jesse	115 Mona Dr Buffalo 14226	finger printing	individual	secure job/low income	\$ 101.75
Lucas, Jesse	115 Mona Dr Buffalo 14226	licensing	individual	secure job/low income	\$ 36.00
Maybee, Dallas	27 Fargo Ave Buffalo 14201	rent	individual	homelessness crisis	\$ 415.00
Ross, Louise	204 Bristol St Buffalo 14206	home equity loan payment	individual	homelessness crisis	\$ 177.90
Ross, Louise	204 Bristol St Buffalo 14206	car payment	individual	secure job/low income	\$ 191.30
Schapiro, Noah	307 North St #145 Buffalo 14201	apr rent	individual	homelessness crisis	\$ 700.00
Washington, D'atra	32 Alamo Pl Buffalo 14220	AAPC membership	individual	secure job/low income	\$ 170.00
Wilson, Oscar	267 Elmwood apt F Buffalo 14222	work boots	individual	secure job/low income	\$ 83.79
Olajumoke, A	450 Minnesota Ave Buffalo 14215	aug bus pass	individual	secure job/low income	\$ 75.00
Johnson, Michelle		june bus pass	individual	secure job/low income	\$ 75.00
Johnson, Regenia	411 S Division St Buffalo 14204	oct bus pass	individual	secure job/low income	\$ 75.00
Lover, Bryson	90 Quincy St Buffalo	rent assistance	individual	homelessness crisis	\$ 200.00
Byaombe, Swedy	1 North Ln Buffalo 14207	july rent	individual	homelessness crisis	\$ 389.00
Terry, Debra	1202 Broadway St apt #404 Buffalo 14212	aug bus pass	individual	secure job/low income	\$ 75.00
Medley, Shaherah	907 E Ferry St Buffalo 14211	nov rent	individual	homelessness crisis	\$ 945.00
Shedesky, Edward	285 Crestmount Ave apt #334 Tonawanda 14150	aug rent	individual	homelessness crisis	\$ 1,040.00
Shedesky, Edward	285 Crestmount Ave apt #334 Tonawanda 14150	sept rent	individual	homelessness crisis	\$ 1,040.00
Joby	Pine Woods Animal Hospital 570 E Robinson N Tonawanda 14120	medical expenses	individual	canine medical	\$ 364.50
George	Canine Kennels of Clarence 9785 County Rd Clarence Center 14032	boarding	individual	canine medical	\$ 500.00

Spread Compassion					
Attachment to Form 990-PF Part XV					
Name	Address	Purpose		Hardship Desc	Amount Pd
George	Canine Kennels of Clarence 9785 County Rd Clarence Center 14032	boarding	individual	canine medical	\$ 440.00
Burke, Ronald	5761 Seneca St Elma 14059	feb bus pass	individual	secure job/low income	\$ 75.00
Cody, Ana	53 Cambridge Ave Buffalo 14215	delinquent property taxes	individual	homelessness crisis	\$ 500.00
Coles, Myela	399 Riley St Buffalo 14208	mar bus pass	individual	secure job/low income	\$ 75.00
Collins, Tim	681 Riley St Buffalo 14211	nov bus pass	individual	secure job/low income	\$ 75.00
Dier, Bradley	2529 Grand Island Blvd room 7 Grand Island 14072	Uhaul trailer	individual	mental health crisis	\$ 204.00
Dier, Bradley	2529 Grand Island Blvd room 7 Grand Island 14072	jan bus pass	individual	mental health crisis	\$ 75.00
Frohling, Danielle	97 Easton Ave Buffalo 14215	car repairs	individual	secure job/low income	\$ 412.74
Hendel, Matthew	65 Woodside Ave Upper Buffalo 14220	dec bus pass	individual	secure job/low income	\$ 75.00
Holcomb, John	171 Goodyear Ave Buffalo 14211	moving cost	individual	homelessness crisis	\$ 500.00
Hunt, William	349 Longmeadow Rd Amherst 14226	CDL license transfer	individual	secure job/low income	\$ 147.00
Hunt, William	349 Longmeadow Rd Amherst 14226	CDL license transfer	individual	secure job/low income	\$ 25.50
Hunt, William	349 Longmeadow Rd Amherst 14226	CDL license transfer	individual	secure job/low income	\$ 138.00
Jackson, Francis	233 Ferndale Ave Tonawanda 14217	mar bus pass	individual	homelessness crisis	\$ 75.00
Jaycox, James	shelter	dec bus pass	individual	homelessness crisis	\$ 75.00
Jones, Michael	307 North St #162 Buffalo 14201	car repairs	individual	secure job/low income	\$ 200.00
Jones, Michael	307 North St #162 Buffalo 14201	car repairs	individual	secure job/low income	\$ 200.00
Lopez, Larry	541 Walden Ave apt #91 Buffalo 14211	nov bus pass	individual	secure job/low income	\$ 75.00
Sackinger, Gregory	679 Amherst St apt #2 Buffalo 14207	oct rent	individual	homelessness crisis	\$ 240.00
Smith, Melodie	68 Best St apt #4 Buffalo 14209	may rent balance	individual	homelessness crisis	\$ 320.00
Zynda, Robert	1147A French St Cheektowaga 14227	apr rent	individual	homelessness crisis	\$ 500.00
Daniels, Brianna	170 Ladner Ave Buffalo 14220	jan20 bus pass	individual	secure job/low income	\$ 75.00

Spread Compassion					
Attachment to Form 990-PF Part XV					
Name	Address	Purpose		Hardship Desc	Amount Pd
Williams, William	617 E. Amherst St Buffalo 14215	jan20 bus pass	individual	secure job/low income	\$ 75.00
Obiamaka, Alaka	150 North St Buffalo 14203	jan20 bus pass	individual	secure job/low income	\$ 75.00
Harris Jr, Varnie	505 Elmwood Ave apt #8G Buffalo 14222	jan20 bus pass	individual	secure job/low income	\$ 75.00
Grazes, Edward	100 E Tupper Buffalo 14203	jan20 bus pass	individual	secure job/low income	\$ 75.00
Dier, Bradley	2529 Grand Island Blvd room 7 Grand Island 14072	moving cost	individual	mental health crisis	\$ 8.43
july bus passes	missing 5 applications	july bus passes	individual	secure job/low income	\$ 375.00
oct bus passes	missing 5 applications	oct bus passes	individual	secure job/low income	\$ 375.00
Cash, Terrance	493 Walden Ave Buffalo 14211	sept bus pass	individual	secure job/low income	\$ 75.00
Brown, Chris	284 Main St Buffalo 14202	sept bus pass	individual	secure job/low income	\$ 75.00
Washington, D'atra	32 Alamo Pl Buffalo 14220	30 day bus pass	individual	secure job/low income	\$ 75.00
				Total	\$19,528.40