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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶Do not enter social security numbers on this form as it may be made public. $|\mathcal{M}|$ ▶Go to www.irs.gov/Form990PF for instructions and the latest information.

		dar year 2019 or tax year beginning ,	and ending		•		<u> </u>
Na	me of fo	undation			A Emp	loyer identification number	
_							
		PETER MAGNONE FOUNDATION				-2889496	
		ad street (or P 0 box number if mail is not delivered to street address) EDGEWOOD LANE	R	oom/suite		phone number (see instruction $2-580-1151$	ns)
City or town, state or province, country, and ZIP or foreign postal code						2-360-1131	
FORT LEE NJ 07024						emption application is pending	g, check here
G	heck	all that apply Initial return Initial ret	urn of a former public	charity	D 1 F	oreign organizations, check h	ere ►
		Final return Amende	•	•	2. F	oreign organizations meeting	the
		Address change Name ch	nange			5% test check here and attac	
H	heck	type of organization X Section 501(c)(3) exempt priva	ate foundation	<u> </u>	E If pray	vate foundation status was te	rminated under
		n 4947(a)(1) nonexempt charitable trust Other taxa		<i>1</i> /4		on 507(b)(1)(A), check here	▶ □
		rket value of all assets at J Accounting method		crual	F If the	foundation is in a 60-month	ermination
er	nd of y	rear (from Part II, col (c), Other (specify)			l	r section 507(b)(1)(B), check	. 1 1
	ie 16)		st be on cash basis)				
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inv	oolmont	(a) Adverted not	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	(B) Net inv		(c) Adjusted net income	purposes
	1		42,000				(cash basis only)
	1 2	Contributions, gifts, grants, etc., received (attach schedule) Check ► If the foundation is not required to attach Sch		1			
	3	Interest on savings and temporary cash investments	Ť				
	4	Dividends and interest from securities	-				
	5a	Gross rents		<u> </u>			
a	b	Net rental income or (loss)		<u> </u>			
Revenue	6a	Net gain or (loss) from sale of assets not on line 10					
Ve	b	Gross sales price for all assets on line 6a					
æ	7	Capital gain net income (from Part IV, line 2)			0		
	8	Net short-term capital gain				0	
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
- 01	12	Total. Add lines 1 through 11	42,000	† 	0	0	
	13	Compensation of officers, directors, trustees, etc	0			 	
%	14	Other employee salaries and wages					
笑	15	Pension plans, employee benefits					
꾋	16a	Legal fees (attach schedule)				<u> </u>	· · · · · · · · · · · · · · · · · · ·
	Ь	Accounting fees (attach schedule)	1,785	 		1,785	
<u> </u>	17	Other professional fees (attach schedule) Stmt 1 Interest	1,/85	-		1,783	
<u>_:s</u>	18	Taxes (attach schedule) (see instructions)	-	 			
₽Ē	19	Depreciation (attach schedule) and depletion		 			
5	20	Occupancy					
~B	21	Travel, conferences, and meetings					·
) in	22	Printing and publications					
3 8	23	Other expenses (att sch)					
∽ેં≣	24	Total operating and administrative expenses.					
Operating and Administrativ		Add lines 13 through 23	1,785		0	1,785	0
ď	25	Contributions, gifts, grants paid	29,000				29,000
_	26	Total expenses and disbursements. Add lines 24 and 25	30,785		0	1,785	29,000
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and dispursements	11,215				
	b		ψ		0		
	<u> </u>	Adjusted net income (12) legative, enter -0-)	<u>\$</u>	L		0	000 05
For	Paper	work Reduction Act North e, see Instructions	25 25 25 25 25 25 25 25 25 25 25 25 25 2			\	Form 990-PF (2019)
DAA		OCDEN LIT	=		(· /Ce	\wedge

Fo	orm 99	0-PF (2019) THE PETER MAGNONE FOUNDATION		83-28894	96	Page 2
	Dort	II Polono Charte Attached schedules and amounts in the description column		Beginning of year	End	of year
	Part	Ralance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing			11,21	11,215
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
ı		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				, and the second
		disqualified persons (attach schedule) (see				,
		instructions)				
- 1	7	Other notes and loans receivable (att. schedule)			-	
		Less allowance for doubtful accounts ▶	0			
χ	8	Inventories for sale or use	_			
Assets	9	Prepaid expenses and deferred charges				
Ä	10a	Investments – U S and state government obligations (attach schedule)				
1	b	Investments – corporate stock (attach schedule)			-	-
- 1	c	Investments – corporate bonds (attach schedule)				
١	11	Investments – land, buildings, and equipment basis				
١	• •	Less accumulated depreciation (attach sch)				
١	12	Investments – mortgage loans				
١	13	Investments – other (attach schedule)			·····	
١	14	Land, buildings, and equipment basis				
-	•	Less accumulated depreciation (attach sch.)				
1	15	Other assets (describe)			<u> </u>
	16	Total assets (to be completed by all filers – see the	,			
		instructions Also, see page 1, item I)		o	11,21	11,215
7	17	Accounts payable and accrued expenses			/	
	18	Grants payable				
ဖွ	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
흶	21	Mortgages and other notes payable (attach schedule)				· • · · · · · · · · · · · · · · · · · ·
اڌ	22	Other liabilities (describe	١.			
	23	Total liabilities (add lines 17 through 22))	0		d
╅		Foundations that follow FASB ASC 958, check here	X		<u>`</u>	<u> </u>
ဖွ		and complete lines 24, 25, 29, and 30.				
일	24	Net assets without donor restrictions			11,219	<u>, </u>
or Fund Balances	25	Net assets with donor restrictions				1
2	25	Foundations that do not follow FASB ASC 958, check here	m :			
띩		and complete lines 26 through 30.				}
픠	26	Capital stock, trust principal, or current funds				
	27	Paid-in or capital surplus, or land, bldg, and equipment fund				
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds			····	
SS	29	Total net assets or fund balances (see instructions)		0	11,215	
ا≥	30	Total liabilities and net assets/fund balances (see				<u> </u>
휜	30	•		o	11,215	
4	Part I	instructions) II Analysis of Changes in Net Assets or Fund Balance	٠	<u> </u>		<u></u>
				must sares with	Ī	
1		net assets or fund balances at beginning of year – Part II, column (a), line	z 29 (must agree with	4	0
•		of-year figure reported on prior year's return)			1 2	11,215
		ramount from Part I, line 27a			2	11,213
		r increases not included in line 2 (itemize)			3	11,215
		ines 1, 2, and 3			4	11,215
		eases not included in line 2 (itemize) ► net assets or fund balances at end of year (line 4 minus line 5) – Part II. (li	on (h) line 20	5	11,215
0	I ULAI	HELASSELS OF TURB DATABLES AT ERRORD VEST TIME 4 MINUS TIME 51 → PAR II. (JUIUIT	III (D). IIIIC 29	1 10	

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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

6

7 Add lines 5 and 6

Part VI instructions

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

	1 990-PF (2019) THE PETER MAGNONE FOUNDATION 83-2889496			Pa	<u>age 4</u>	
<u>Pa</u>	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940	<u>3 – see</u>	<u>inst</u>	ructi	ons)	i
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check					
	here ▶ ☐ and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of					
	Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				0	
3	Add lines 1 and 2			-		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				0	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	 			Ŏ	
6	Credits/Payments					
a	2019 estimated tax payments and 2018 overpayment credited to 2019					
b	Exempt foreign organizations – tax withheld at source 6b					
c	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d					
8	Enter any penalty for underpayment of estimated tax. Check her if Form 2220 is attached.	 				
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	 				
11	Enter the amount of line 10 to be Credited to 2020 estimated tax Refunded 11	+				
	art VII-A Statements Regarding Activities	<u> </u>				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		r	Yes	No	
14	participate or intervene in any political campaign?		1a	163	X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the		<u> " </u>			
	instructions for the definition		1 _b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		15			
	published or distributed by the foundation in connection with the activities					
•	Did the foundation file Form 1120-POL for this year?		4.		X	
c d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		1c			
u				i		
•	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
е						
2	on foundation managers \$ Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X	
2	If "Yes," attach a detailed description of the activities		-			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles					
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		Y	
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		$\frac{\mathbf{x}}{\mathbf{x}}$	
	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A				
b 5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	.,	4b		×	
J	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
Ü	By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 		6	x		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Pai	+ Y\/	7	X		
		LAV		A		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions None					
L						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation		8b	x		
9			OD	^		
3	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See instructions for Part XIV If "Yes,"		9	x		
10	complete Part XIV		9			_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		x	
	names and addresses	Ε,	m 99	0-PF		
			🕶		()	

Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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?

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)

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X

3b

4a

N/A

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		arding Activities for Which	Form 4720 May B	e Required (d	continued)			
5a	During the year did the foundation	•				<u> </u>	Yes	No
	· · · · · · · · · · · · · · · · · · ·	wise attempt to influence legislation		\ <u> </u>	res 🛚 X No			
	- ·	pecific public election (see section 4	955), or to carry on,					
	directly or indirectly, any voter i	•		<u>Ц</u> ,	∕es X No		Ì	
	(3) Provide a grant to an individual	for travel, study, or other similar pur	rposes?	<u> </u>	res 🗓 No			
	(4) Provide a grant to an organizat	ion other than a charitable, etc , org	anization described in	_				
	section 4945(d)(4)(A)? See inst	tructions		\ _ \	∕es X No			
	(5) Provide for any purpose other t	han religious, charitable, scientific, l	iterary, or educational					
	purposes, or for the prevention	of cruelty to children or animals?		□ `	res X No			
b	If any answer is "Yes" to 5a(1)–(5),	did any of the transactions fail to qu	ualify under the exception	ns described	_			
	ın Regulations section 53 4945 or i	n a current notice regarding disaster	r assistance? See instru	ctions	N/ <u>A</u>	5b		ļ
	Organizations relying on a current i	notice regarding disaster assistance	, check here		▶ 📙			
С	If the answer is "Yes" to question 5	a(4), does the foundation claim exer	mption from the tax					
	because it maintained expenditure	responsibility for the grant?		N/A 🗌	res 🗌 No			
	If "Yes," attach the statement requi	red by Regulations section 53 4945-	-5(d)					
6a	Did the foundation, during the year,	, receive any funds, directly or indire	ctly, to pay premiums					
	on a personal benefit contract?			□ \(\)	res 🗓 No			
b	Did the foundation, during the year,	, pay premiums, directly or indirectly	, on a personal benefit o	contract?		6b		X
	If "Yes" to 6b, file Form 8870							
7a	At any time during the tax year, was	s the foundation a party to a prohibit	ted tax shelter transaction	on? \	res 🗓 No			
b	If "Yes," did the foundation receive				N/A	7b		
8		tion 4960 tax on payment(s) of more			·			
	remuneration or excess parachute				res 🛚 X No			
Pa		t Officers, Directors, Truste	es, Foundation M	anagers, Hig	hly Paid Em	plove	ees.	
	and Contractors	,	,	J,J	,		•	
1 1	ist all officers, directors, trustees	, and foundation managers and th	neir compensation. Se	e instructions.				
					(d) Contributions to	ĺ		
	(a) Name a	and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	employee benefit		pense a	
			devoted to position	enter -0-)	plans and deferred compensation	Olne	r allowa	nces
PE	TER MAGNONE	FORT LEE	PRESIDENT		-			
	34 EDGEWOOD LANE	NJ 07024	0 00	О	o			0
_	PHIA MAGNONE	FORT LEE	SECRETARY			-		
	34 EDGEWOOD LANE	NJ 07024	0.00	o	0	ŀ		0
	5. 2505.1005 EE15	10 0/024	0.00			 		
			†			ŀ		
	****				· · · · · · · · · · · · · · · · · · ·	 		
			•					
	Compensation of five highest-pa	id employees (other than those in	ucluded on line 1 – see	instructions\ If	none enter			
_	"NONE."	id employees (other than those in	iciadea on line 1 - see	mstructions). II	none, enter			
					(d) Contributions to	i i		
	(a) Name and address of each emp	loves and more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		oense ad	
	(a) Name and address of each emp	noyee paid more than \$50 000	devoted to position	(c) compensation	plans and deferred compensation	othe	r allowa	nces
NO.	NE				compensation	 		
NO	NE		1					
								
	· · · · · · · · · · · · · · · · · · ·							
			1					
								
						 		
			,					
-						 		
ı ota	number of other employees paid ov	/er \$50,000			<u></u> ▶		<u> </u>	0
					Fo	99	O-PF	(2019)

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Part VIII Information About Officers, Directors, Trustees, F	oundation Managers, Highly Pa	id Employees,
'and Contractors (continued)		· - ·
3 Five highest-paid independent contractors for professional services. Sec	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 info	emotion such as the number of	
organizations and other beneficiaries served, conferences convened, research papers produced, etc	matter such as the number of	Expenses
1 SUPPORT FOR CATHOLIC CHURCH AND RELATE	D ORGANIZATIONS	
	.5 011012121212101	
		29,000
2		
3		
4		
Dort IV B. Cummon of Browns Deleted Investments (see		
Part IX-B Summary of Program-Related Investments (see		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a N/A	ind 2	Amount
1 4/6		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	>	1
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Forr	n 990-PF (2019) THE PETER MAGNONE FOUNDATION 83-2889496		Page 8
Ρ	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	oreign fou	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.		
'			
_	purposes	4.	0
a	Average monthly fair market value of securities	1a	0
	Average of monthly cash balances	1b	0
	Fair market value of all other assets (see instructions)	1c	0
	Total (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation) 1e 0	1 I	•
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations	iting found	dations
	and certain foreign organizations, check here X and do not complete this part)	,	
1	Minimum investment return from Part X, line 6	1	
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)]	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	
Pa	art XII Qualifying Distributions (see instructions)	<u> </u>	
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	29,000
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
	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	29,000
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 See instructions	5	n
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	29,000
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the f		23,000
		ounuation	
	qualifies for the section 4940(e) reduction of tax in those years		

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c d

a Excess from 2015b Excess from 2016c Excess from 2017

Excess from 2018 Excess from 2019

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	art XIV Private Operating Fo				on 9)	
1a	If the foundation has received a ruling of			perating		
	foundation, and the ruling is effective for	or 2019, enter the dat	e of the ruling	>		N/ <i>I</i>
b	Check box to indicate whether the foun	dation is a private op	erating foundation d	escribed in sectiX 49	042(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Tatal
	income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	investment return from Part X for		`	† · · · · · · · · · · · · · · · · · · ·		
		\ 0				0
	each year listed	10				
	85% of line 2a			*		
С	Qualifying distributions from Part XII,					
	line 4, for each year listed	29,000				29,000
ď	Amounts included in line 2c not used directly					
	for active conduct of exempt activities				,	
е	Qualifying distributions made directly	•			.,	
	for active conduct of exempt activities					
	Subtract line 2d from line 2c	29,000				29,000
3	Complete 3a, b, or c for the			V.		
3	• , ,					
	alternative test relied upon					
а	"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	ı		\	.	
	Part X, line 6, for each year listed				\	0
	"Support" alternative test – enter					
Ŭ	• •					
	(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(i)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
				-		
	(4) Gross investment income	matian (Cample	4a 4b:a man4 amb	 	- had 65 000 and	
Pa	irt XV Supplementary Infor			it the foundation	ı nad \$5,000 or r	nore in assets a
	any time during the y		ictions.)			
1	Information Regarding Foundation M	lanagers:				
а	List any managers of the foundation wh	o have contributed m	ore than 2% of the t	otal contributions recei	ved by the foundation	
	before the close of any tax year (but on	ly if they have contrib	uted more than \$5,0	000) (See section 507(d)(2))	
	N/A					
b	List any managers of the foundation wh	o own 10% or more o	of the stock of a corr	oration (or an equally I	arge portion of the	
_	ownership of a partnership or other enti		•	•		
	N/A	ty) or willon the lound	24110111143 4 1070 01	greater interest		
	Information Regarding Contribution,	Grant Citt I 0	obolorchin -4- *	oarama:		
2				_		
	Check here ▶ ☐ If the foundation only	=	·	~	•	
	unsolicited requests for funds If the fou	•	grants, etc , to indivi	duals or organizations	under other condition	s,
	complete items 2a, b, c, and d. See inst	tructions				
а	The name, address, and telephone num	nber or email address	of the person to wh	om applications should	l be addressed	
	See Statement 2		•			
	The form in which applications should b	e submitted and info	rmation and material	ls they should include		
	See Statement 3	o submitted and fille	ation and material	o aloy salould illolude		
С	Any submission deadlines	T TM TA A	DEN 3	3.D		
	THERE IS NO DEADLIN					
d	Any restrictions or limitations on awards	s, such as by geograp	phical areas, charital	ole fields, kinds of instit	utions, or other	
	factors					
	THERE IS NO RESTRIC	TION				

Part XV Supplementary Information (continued)			· · · · · · · · · · · · · · · · · · ·
3 Grants and Contributions Paid During		for Future Paymen	it	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business) a Paid during the year SAINT FRANCIS VILLAGE 122 DIAMOND SPRING ROAD DENVILLE NJ 07834 KOREAN CATHOLIC BROADCAST: 120 W PALISADES BLVD PALISADES PARK NJ 07650 MISSIONARIES OF CHARITY 344 E 146TH ST BRONX NY 10451	or substantial contributor CONT ING CONT	RIBUTION TO RIBUTION TO	GOOD CAUS	E 25,000
		•		
Total			▶ 3a	29,000
b Approved for future payment N/A				
Total			▶ 3b	

_ !	Part XVI-A Analysis of Income-F	roducing Ac	ctivities				
En	nter gross amounts unless otherwise indicated		1	ed business income	Excluded	by section 512, 513, or 514	(0)
	•		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1	Program service revenue		ļ				(See instructions)
	a		<u> </u>				
	b				ļ		
	С				<u> </u>	· · · · · · · · · · · · · · · · · · ·	
	d				<u></u>		
	e				-		
	1				}		
_	g Fees and contracts from government age	encies				-	· · · · · · · · · · · · · · · · · · ·
	Membership dues and assessments						•
	Interest on savings and temporary cash inves	stments					
	Dividends and interest from securities				 -		
Э	Net rental income or (loss) from real estate				<u> </u>		
	a Debt-financed property						
_	 b Not debt-financed property Net rental income or (loss) from personal pro 						
	Other investment income	perty					
	Gain or (loss) from sales of assets other than	· · · · · · · · · · · · · · · · · · ·					
	Net income or (loss) from special events	inventory					
	Gross profit or (loss) from sales of inventory						
•	Other revenue ab						
	c						
	d		<u> </u>				*****
	e						
12				_			_
	Subtotal Add columns (b), (d), and (e)			0		0	. 0
	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)			<u> </u>		13	0
13		Iculations)		0			
13 (Se	Total. Add line 12, columns (b), (d), and (e)		ccomplish			13	
13 (Se	Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify ca	rities to the A	e is reported i	nment of Exemp	t Purp	oses ntributed importantly	0 to the
13 (Se	ee worksheet in line 13 instructions to verify ca Part XVI-B Relationship of Activ Line No. Explain below how each activity	rities to the A	e is reported i	nment of Exemp	t Purp	oses ntributed importantly	0 to the
13 (Se	ee worksheet in line 13 instructions to verify ca Part XVI-B Explain below how each activity accomplishment of the foundation Total. Add line 12, columns (b), (d), and (e) Relationship of Activity accomplishment of the foundation	rities to the A	e is reported i	nment of Exemp	t Purp	oses ntributed importantly	0 to the
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13 (Se	ee worksheet in line 13 instructions to verify ca Part XVI-B Explain below how each activity accomplishment of the foundation Total. Add line 12, columns (b), (d), and (e) Relationship of Activity accomplishment of the foundation	rities to the A	e is reported i	nment of Exemp	t Purp	oses ntributed importantly	0 to the
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Form 99	90-PF (20	19) THE PETE	R MAGN	ONE FOUND	ATION	83-288949	96		Pag	ge 13
Part			garding T	ransfers To an	d Transact	ions and Relationsh	nips With Nonch	aritabl	e Ex	emp
1 Di		Organizations	adiroothi one	rago in any of the fa	llouwe with or	ny other organization desc		$\overline{}$	Yes	No
	•	01(c) (other than sec			-	•	nbea		163	NO
	ganizatioi			o) organizations) or	III Section 327	, relating to political				
		om the reporting four	ndation to a	noncharitable exem	nt organizatio	n of				
) Cash	om are reporting roun	idation to a	mononaria di di di	pt organizatio			1a(1)		x
•) Other a	ssets						1a(2)		X
	her trans									
(1) Sales o	f assets to a nonchar	itable exem	pt organization				16(1)		x
	-	ses of assets from a r			ion			1b(2)		X
(3) Rental o	of facilities, equipmen	nt, or other a	ssets				1b(3)		X
(4) Reimbu	rsement arrangemen	its					1b(4)		X
(5) Loans c	or loan guarantees						1b(5)		X
(6) Perform	nance of services or n	nembership	or fundraising solici	itations			1b(6)		X
c St	naring of f	acılıtıes, equipment, i	mailing lists	, other assets, or par	ıd employees			1c		X
d If	the answe	er to any of the above	ıs "Yes," co	omplete the following	g schedule Co	olumn (b) should always sl	how the fair market			
					_	If the foundation received				
	ilue in any	(b) Amount involved		nent, show in column e of noncharitable exempt of		of the goods, other assets	s, or services received ers, transactions, and sharin		ents	
N/A	ille 110	(b) Amount involved	(C) Ivaiii	e of noncharitable exempt	organization	(a) Description of trans-	ers, transactions, and sharin	y arrangeni	6/115	
										
				····						
		<u> </u>								
										
		•	•			tax-exempt organizations				a
		section 501(c) (other		on 501(c)(3)) or in se	ection 527?			U Y€	es X	.J No
b If	'	nplete the following s	chedule	T 45.7						
NT /) Name of organization		(b) Type of orga	anization	(c) U	escription of relationship			
N/	<u> </u>									
					·· ····			-		
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			· · · ·							
						schedules and statements and to		and belief,	ıt ıs tru	е,
	correct, ar	nd complete Declaration of	f preparer (other	ər-than taxpayer) is based `	l on all information	of which preparer has any knowl	ledge May the IRS of	discuss this	return	
Sign	/	/ /)		,	with the prepa			٦ ا
Here	/\	1 21		man	h_ e 11/	'. J_	See instruction	ns X	Yes	No
-		WOTEN		40 - X	7///	0/20 \ si	ECRETARY			
	Signa	ature of officer or trustee			Date	Title				
	Print/Ty	pe preparer's fame			Preparer's signatu		Date	,	Check	
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Paid	HOE 3	JUNG, CPA			-01	//		21/20		
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		Ridge	efield	Park, NJ	07660-	-2122	Phone no 21	2-86	<u>8-3</u>	378

6/21/2020 5:03 PM Charitable Purpose 1,785 1,785 Adjusted Net Statement 1 - Form 990-PF, Part I, Line 16c - Other Professional Fees Net Investment PETERMAGNON THE PETER MAGNONE FOUNDATION

82-7880406 1,785 1,785 Total PROFESSIONAL FEE - LEGAL Description FYE: 12/31/2019 Total

ď,

6/21/2020 5:03 PM

FYE: 12/31/2019

Statement 2 - Form 990-PF, Part XV, Line 2a - Name, Address and Email for Applications

Description

SOPHIA MAGNONE 212-580-1151 1034 EDGEWOOD LANE FORT LEE NJ 07024 MATRISHOLDING@GMAIL.COM

Statement 3 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

IT IS REQUIRED TAHT AN APPLICANT'S BACKGOURND INFORMATION SUCH AS FINANCIAL STATEMENTS, BROCHURE, MISSION STATEMENT AS WELL AS A LETTER AS TO HOW AND FOR WHAT PURPOSE A GRANT WILL BE SEPNT.

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

THERE IS NO DEADLINE. IT IS OPEN ALL YEAR.

Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

THERE IS NO RESTRICTION