EXTENDED TO NOVEMBER 16, 2020

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

▶ Do not enter social security numbers on this form as it may be made public.

			venue Service		▶	Go to www.	rs.gov/F	orm990	PF for inst	ructions and the la	test info	rmation.	111 6	Open to Pub	lic Inspection
F	or c	alen	dar year 2019 d	or tax year beg	inning	MAR	8,	2019	9	, and ending		DEC 3	1, 2019		
ī	Nan	ne of	foundation					-				A Employe	er identificatio	number	
				4					٤	ICCIVED)		•		
_	T	ΗE	WEISKO:	PF FAMI	LY	FOUNDA'	TION				그있	83-	6588178		
7	Num	ber a	nd street (or PO b	ox number if mail	ıs not del	vered to street a	iddress)		S NIC	OV 2 3 20 200°	n/suite)	B Telepho	ne number		
	9	M	ELANEY 1	DRIVE					a No	J V 20 3 Z 4 Z 0	3	845	3698700		
' (City	or t	own, state or pro	ovince, country	, and ZI	P or foreign p	ostal cod	e				C If exempti	ion application is p	ending, check her	. •
_			SEY, NY	10952				L	0(<u> GDEN, UT</u>					
G	C	heck	all that apply:	X Init	ıal retur	n		Initial r	eturn of a f	ormer public charit	<u></u> у	D 1. Forei	gn organization	s, check here	▶□ `
				Fina	al return			Amend	ed return			1 _			
				Add	dress ch	ange		Name o	hange			2. Foreig check	n organizations m here and attach c	eeting the 85% tes emputation	ι, ▶□
H	С	heck	type of organiza	ation: X	Sectio	n 501(c)(3) ex	kempt priv	vate fou	ndation	Á	U	F If private	e foundation st	atus was termin	ated
_[] Se	ction 4947(a)(1) nonexempt ch	narıtable	trust	Other tax	able pri	vate found	ation · U	7)(A), check here	
Ė	Fa	r ma	rket value of all	assets at end	of year	J Account	ing metho	od.	X Cash	Accrual		F If the fo	undation is in a	60-month term	unation
	(fr	om F	Part II, col. (c), li		•		ther (spec)(B), check here	
_	▶			700,0	18.	(Part I, colur	nn (d), m	ust be c	n cash bas	is.)					
3	Pa	rt l	Analysis of R	evenue and Ex	penses	1 (d) may not		Revenu		(b) Net investr	nent		djusted net	(d) Disbu	rsements
_			necessarily equa	I the amounts in c	oj. (O). and olumn (a)	i)	 		er books	`´ income			ncome	(cash ba	
h ,	T	1	Contributions,	gıfts, grants, et	c., rece	ved	2,	$07\overline{4}$,472.					WIND THE	
XX		2		if the foundation is no	t required t	o artach Sch B	THE STATE	認識							
, – .	`	3	Interest on saving cash investments	s and temporary					241.		241.		241.	STATEM	ENT 1
		4	Dividends and	interest from s	ecurities	;		•	,		٠				
	- [5a	Gross rents											为证为影響	
	į	b	Net rental income	or (loss)			RAP ST		HELEN	AND PRIME		の記録が		を記述される。	MARK SET
		6a	Net gain or (loss) f		s not on l	ne 10						STEP 1	ywain	LUMBER	
		¹b	Gross sales price assets on line 6a	for all		<u> </u>		4400	海的油	THE STATE OF THE S		の後を			
	Revenu	7 -	Capital gain net in	come (from Part I	V, line 2)						0.	被理解的		神多為為	
Øc0	Œ	8	Net short-term	capital gain			WEST	學的	200	MF IV W F 1990	# ##G		0.	37/10/10	
4.2022		9	Income modific				聚配油			野が知りが決議	数据处				数 第6次,数
ನ		10a	Gross sales less re and allowances	eturns				等福	認識的			學學學學			等的是
4	'	b	Less Cost of good	ds sold			黎包含	[8] 4],		MUTSKA					
8		C	Gross profit or	(loss)		,									
NA	:	11	Other income											6,000	#### \$.S
	4	12	Total. Add line	s 1 through 11			2,	074	<u>,713.</u>		241.		241.	100	
\Box		13	Compensation of	officers directors	, trustees	, etc			0.		0.		0.	ļ	<u> </u>
SCANNED			Other employee		•									ļ	
Z			Pension plans,	employee bene	efits									ļ	
ठ	ses		Legal fees											ļ	
Ø	Expenses		Accounting fee			1								ļ <u>.</u>	
	EX	C	Other profession	nal fees			<u> </u>	- ; , -		,				 	
•	<u>×</u>	17	Interest				ļ						., -		
	Administrative	18	Taxes									<u> </u>		Chinya Loran area.	ER ALEGERIA SERVICES AS
	nis	19	Depreciation ar	nd depletion											
	Ē	20	Occupancy				ļ					ļ		ļ <u> </u>	
•		21	Travel, confere		ings		ļ							ļ <u>.</u>	
	æ	22	Printing and pu	•						,				ļ	
		23	Other expenses			<u>.</u>						 		 	
	Operating	24 -	Total operating			•			•		_ `		_] '	,
	De	•	expenses. Add					25.4	0.	CHIEF WYSTINEWS IN THE	0.	Mr. Wasselback	0.	4	0.
			Contributions,				<u> </u>	5/4	,695.			WHEN THE T	A POST	$\frac{1}{3}$ $\frac{1}{37}$	4,695.
		26	Total expenses		ments.		_	217.4	co-		^		•		
	-4		Add lines 24 an				1 1,	3/4	<u>,695.</u>	TORON BURNEYS NO	0.	Medalia Dan -	0.	1,374	4,695.
		27	Subtract line 26	6 from line 12:				n ^ ^	010						
			Excess of revenue	•			Establishment of	/UU\	,018.		X 3 4 4	7777		The state of the s	
			Net investment				00.000	A STORES		Was Time A Mark	241.	according.	***********		
_		C	Adjusted net in	icome (if negative	e, enter -	0-)		MAN SAN		1000年17月中国高		<u> </u>	241.	337天江苏政	

_			
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	0.
2	Enter amount from Part I, line 27a	2	700,018.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	700,018.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	700,018.

Page 3

THE WEISKOPF FAMILY FOUNDATION

(a) List and describe	and Losses for Tax on In the kind(s) of property sold (for exa	mple, real esta		(b)	How acquired - Purchase	(c) Date ac	quired	(d) Date sold
2-story brick warehouse; or common stock, 200 shs. MLC Co.)					- Donation	(mo., day	, yr.)	(mo., day, yr.)
b NOI	<u>.</u>			+				
b NOI	NE .			+				
4				t				
е								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain ((e) plus (f	or (loss) f) minus (
a								
<u>b</u>								
<u>c</u>		 						
d e								
	g gain in column (h) and owned by	the foundation	on 12/31/69.			(I) Gains (Col.	(h) gain	minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any		C	òl. (k), but not Losses (fr	less than	1 -0-) o r
a								
<u>b</u>		ļ						
<u>c</u>		<u> </u>						
d		 						
<u>e</u>]	<i>C.</i> ,	<u></u>		_	 			
2 Capital gain net income or (net cap	pital loss) $ \begin{cases} \text{ If gain, also ente} \\ \text{ If (loss), enter -0} \end{cases} $	er in Part I, line D- in Part I, line	7 : 7	}	2			
	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).							
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inve	stment Inc	ome		
(For optional use by domestic private	foundations subject to the section 4	4940(a) tax on	net investment in	come	.)			N/A
If section 4940(d)(2) applies, leave th	ie nart blank							
Was the foundation liable for the sect If "Yes," the foundation doesn't qualify	under section 4940(e). Do not con	nplete this part						Yes No
1 Enter the appropriate amount in e	ach column for each year, see the ii	nstructions bef	ore making any e			1		(4)
Base periód years Calendar year (or tax year beginnin	(b) Adjusted qualifying dis	stributions	Net value of no	oncharitable-use assets (col. (b) divided by col. (c))				
2018								
2017 2016		_						
2015			······					
2014								
2 Total of line 1, column (d)	_	_				2		
	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				years .			
the foundation has been in existence if less than 5 years					3			
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5					4			
5 Multiply line 4 by line 3						5		-
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6		
7 Add lines 5 and 6						7		
8 Enter qualifying distributions from	Part XII, line 4					8		
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	e 1b, and comp	lete that part usin	ng a 1º	% tax rate.			

-	1990-PF (2019) THE WEISKOPF FAMILY FOUNDATION THE WEISKOPF FAMILY FOUNDATION THE WEISKOPF FAMILY FOUNDATION THE WEISKOPF FAMILY FOUNDATION		658817 see instr		Page 4 S)	
	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) Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% of Part I, line 27b	1			5.	
c 2	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2			0.	
3	Add lines 1 and 2	3			5.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4			<u>0.</u> 5.	
5 6	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- Credits/Payments*	5		Terrais	<u> </u>	
_	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 0.					
b	Exempt foreign organizations - tax withheld at source 6b 0.					•
C	Tax paid with application for extension of time to file (Form 8868) 6c 6c					
d	Backup withholding erroneously withheld 6d 0.					
7	Total credits and payments. Add lines 6a through 6d	7			0.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			<u>0.</u> 5.	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			<u> </u>	
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2020 estimated tax	10 11				
	TOVILA Statements Regarding Activities	<u>'.'</u>			•	
b	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene any political campaign? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the defining the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. Did the foundation file Form 1120-POL for this year?		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		No X X	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		ري الا	7 43h	1865.4	
	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright .\$ 0 •					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	,				
	managers. ► \$0.			ik vak		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	ena accepte	X	
•	If "Yes," attach a detailed description of the activities.	_				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X	
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4		X	
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A 4			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		_ 5		X	
	If "Yes," attach the statement required by General Instruction T			Y W	Z	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		ă.			
	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	<u> </u>			,
7	remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		6	X	X	
,	Did the foundation have at least φ0,000 in assets at any time during the year? If Tes, complete rait ii, coi. (c), and rait Λν		X 5.		32.8	
	Enter the states to which the foundation reports or with which it is registered. See instructions. NONE					
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 General Instruction G2 If "No," attach explanation	dar	81			1
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calei year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	iuar	9	-227-4-20-20	X	L
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		X	
- 	2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -			90-PF		

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Š. 94	art 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			
	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		Х
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 ► THE FOUNDATION Telephone no. ► 845369	870	0	
	Located at ▶ 9 MELANEY DRIVE, MONSEY, NY ZIP+4 ▶1			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			-
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		ALC:	533
	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1400 3.00	242 44	2.02.10
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	383.7	Yes	No
1:	a During the year, did the foundation (either directly or indirectly):	10 m	Minister 1	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		1000 M	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	237.99		
	a disqualified person?	100 m		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)?		4.35	
		200		
	(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.)		1/2/3	
٠.				
	olf 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 N/A	1000	11/1/270	<u> Arriva</u>
	``	1b	1627 PME	
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	2025	-35	
_	before the first day of the tax year beginning in 2019?	1c	. 20.35	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)):			
a	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			4
	If "Yes," list the years >,,,,,			
t	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.) N/A	2b	A 95 102	rojema a
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	•			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
t	olf "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after		73 <i>3</i>	
	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	12.7		
	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		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	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?	4h		X

Form 990-PF (2019) THE WEISKOPF FAMILY FOUND			83-65881	78 Page 6
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:		1-2	*	Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?		es X No	6261112
(2) Influence the outcome of any specific public election (see section 4955), o				
any voter registration drive?	to carry on, amoony or man		es 🗓 No	
, -	2		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes'		۱۰ لــــا		
(4) Provide a grant to an organization other than a charitable, etc., organization	i described in section		es X No	
4945(d)(4)(A)? See instructions			S A NO	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			
the prevention of cruelty to children or animals?			es 🗶 No 🧜	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	in Regulations		
section 53.4945 or in a current notice regarding disaster assistance? See instru	ictions		N/A	5b
Organizations relying on a current notice regarding disaster assistance, check h	iere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	ined		
expenditure responsibility for the grant?	Ŋ	I/A 🔲 Ye	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	oay oremiums on			
a personal benefit contract?	ou, promiumo on	□ v ₄	es 🗶 No 🌡	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	erennal henefit contract?			6b X
If "Yes" to 6b, file Form 8870.	ersonal benefit contract.		3	SUL BROOK RAINS
	haltar transaction?		es X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		16		2 PSE A INNER CARL PLANSINGER
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or			
excess parachute payment(s) during the year?			es X No	
Part VIII	es, Foundation Mai	nagers, Highly		
Paid Employees, and Contractors				
1 List all officers, directors, trustees, and foundation managers and the		1	Lan	
(-) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	and deterred compensation	allowances
JEFFREY M. WEISKOPF	PRESIDENT			
9 MELANEY DRIVE				
MONSEY, NY 10952	5.00	0.	0.	0.
	VICE PRESIDEN			
9 MELANEY DRIVE			,	
MONSEY, NY 10952	2.00	0.	0.	0.
MONDULY NI 10952	2.00	<u>`</u>	•	
			, and the second	
·			•	
				<u></u>
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."	(d) 0	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Hamb and address of sash simpleyes paid more than \$50,000	devoted to position	(c) compensation	and deferred compensation	allowances
NONE				
			<u>-</u> .	
· · · · · · · · · · · · · · · · · · ·				
<u> </u>				
		 		
<u> </u>				
		 		
		<u> </u>	<u> </u>	
Total number of other employees paid over \$50,000	···			0
			Form	990-PF (2010)

Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	0.
c	Fair market value of all other assets	1c	0.
d	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.		
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 1 1/2% of line 3 (for greater amount, see instructions)	4	
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	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations as	nd certain	
	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	0.
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.)		
C	Add lines 2a and 2b	2c	5.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	0.
B	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,374,695.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,374,695.
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	1,374,695.

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

Form **990-PF** (2019)

4940(e) reduction of tax in those years.

Form 990-PF (2019) THE WEISKOP	F FAMILY FOUN	DATION	83-65	88178 Page 9
Part XIII Undistributed Income (see	e instructions)			
	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
Distributable amount for 2019 from Part XI, line 7				0.
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				
b From 2015	:			
c From 2016		¢.		
d From 2017				
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ►\$ 1,374,695.				
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount				0.
e Remaining amount distributed out of corpus	1,374,695.	,		
Excess distributions carryover applied to 2019 (If an amount appears in column (d) the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,374,695.		_	
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line	1		_	
4a from line 2a. Taxable amount - see instr.			0.	

f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020

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

9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a

0		Analysi	s of l	ne 9:
	a	Excess	from	2015
	b	Excess	from	2016
		_		

c Excess from 201 d Excess from 201 e Excess from 2019

IJ	
16	
17	
18	
19	1,374,695

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,374,695.		

Form	990-	PF	(2019
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Part XIV Private Operating F	oundations (see ins	tructions and Part VII	-A, question 9)				
1 a If the foundation has received a ruling of	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 found	d <u>ation is a private operatin</u>	g foundation described i	n section	4942(j)(3) or 49)42(₁)(5)		
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	· · · · · · · · · · · · · · · · · · ·			
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total		
investment return from Part X for							
each year listed							
b 85% of line 2a							
c Qualifying distributions from Part XII,							
line 4, for each year listed				1			
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			ļ				
(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							
[Part:XV] Supplementary Info			f the foundation I	nad \$5,000 or mor	e in assets		
	-	10110113.7	 				
1 Information Regarding Foundation	•						
a List any managers of the foundation wh year (but only if they have contributed r			ributions received by the t	oundation before the clos	e of any tax		
NONE					·····		
b List any managers of the foundation who other entity) of which the foundation ha			or an equally large portio	n of the ownership of a pa	rtnership or		
NONE							
2 Information Regarding Contribute Check here ► X if the foundation of		• • •	-	ot accept unsolicited reque	ests for funds. If		
the foundation makes gifts, grants, etc.,	, to individuals or organiza	tions under other conditi	ons, complete items 2a, t	o, c, and d.			
a The name, address, and telephone num	ber or email address of the	person to whom applic	ations should be address	ed:			
b The form in which applications should to	ne cultimitted and informati	on and materials they sh	nould include:				
	oe sammited and informati		iodid Miciode.				
c Any submission deadlines:							
d Any restrictions or limitations on award	s, such as by geographical	areas, charitable fields,	kınds of institutions, or o	ther factors:			

3 Grants and Contributions Paid During the		ayment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Continuation	
a Paid during the year				
NONE				
			<u>-</u>	
		· · · · · · · · · · · · · · · · · · ·		
Total			 ► 3a	0.
b Approved for future payment			38	<u> </u>
NONE				
110112				
Total			▶ 3b	0.
			F	orm 990-PF (2019)

art)XVI-AI Analysis of Income-Prod			· · · · · · · · · · · · · · · · · · ·	···	
er gross amounts unless otherwise indicated.		usiness income		y section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
Program service revenue:	code	Amount	code	Amount	function income
a	_		+		
	_	***	 		
	~		+		
d	_		+ +		
e					
	_		+ +		
Fees and contracts from government agencies			 -		
Membership dues and assessments	 		1		-
Interest on savings and temporary cash investments					24
Dividends and interest from securities			1 1		۷.
Net rental income or (loss) from real estate:		· · · · · · · · · · · · · · · · · · ·			
Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal			1 1	·	
property					
Other investment income					·
Gain or (loss) from sales of assets other					
than inventory	:				
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a	_				
)			l		
1					
B			 		
Subtotal. Add columns (b), (d), and (e)		0.		0.	24
Total. Add line 12, columns (b), (d), and (e)				13	24
worksheet in line 13 instructions to verify calculations)				
art:XVI:BI Relationship of Activities	to the Accomp	olishment of Ex	empt Pu	rposes	
ne No. Explain below how each activity for which in	nome is renorted in co	nlumn (e) of Part XVI-4	Contributed	importantly to the accomp	alishment of
the foundation's exempt purposes (other th			Continuated	importantly to the accomp	mannent of
INTEREST ON SAVINGS		, , , , , , , , , , , , , , , , , , , ,			
					

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).
3	INTEREST ON SAVINGS

Form 99	0-PF (2	019) THE W	EISKOPF F	AMILY	FOUNDATION_			<u>6588178</u>	Pa	age 13
Part .	XVII			sfers to a	nd Transactions a	nd Relationsh	ips With Non	charitable		
		Exempt Organ							Yes	No
					ng with any other organizati		tion 501(c)	1	163	140
(ot	her tha	n section 501(c)(3) organ	iizations) or in sectio	on 527, relating	g to political organizations?			ŀ]	
a Tra	insfers	from the reporting founda	ation to a noncharital	ble exempt or	ganization of.			1		v
(1)	Cash							1a(1)		X
(2)	Other	assets						1a(2)		X
b Otl	ner tran	sactions;						i i		
(1)	Sales	of assets to a noncharita	ble exempt organizat	tion 🛴		.,		1b(1)		X
(2)	Purch	ases of assets from a no	ncharitable exempt o	organization		-		. <u>1b(2)</u>	 	X
(3)	Renta	l of facilities, equipment,	or other assets					1b(3)		X
(4)	Reim	oursement arrangements						1b(4)		X
(5)	Loans	s or loan guarantees						1b(5)		X
(6)	Perfo	rmance of services or me	mbership or fundral	ising solicitatio	ons .			. 1b(6)		X
c Sh	aring of	facilities, equipment, ma	uling lists, other asse	ets, or paid em				<u>1c</u>	<u> </u>	X
d If t	he ansv	ver to any of the above is	"Yes," complete the	following sche	edule. Column (b) should a	ways show the fair	market value of the	goods, other ass	ets,	
					ed less than fair market vali					
) the value of the goods,								
(a) Line r		(b) Amount involved			e exempt organization	(d) Description	n of transfers, transaction	ons, and sharing arr	angemer	nts
	_	·		N/A		<u> </u>				
					····					
	\dashv	· · · · · · · · · · · · · · · · · · ·						······································		
						 				
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					e or more tax-exempt organ	izations described			_	_
		501(c) (other than section		ection 527?				Yes	X	No
b If"	Yes, co	mplete the following sch			_					
		(a) Name of org	anization		(b) Type of organization		(c) Description of re	elationship		
		N/A				<u> </u>				
									-	
					accompanying schedules and st			May the IRS o	iscuss ti	nia.
Sign	and be	Har It IS true, correct and com		parer (other than	taxpayer) is based on all informa	tion of which preparer f	ias any knowledge	return with the shown below	prepare	er.
Here	-) 			(0)	PRESI	DENT	X Yes		No
	Sign	ature of officer or trustee			Date	Title				
		Print/Type preparer's na	me	Preparer's s	ignature	Date	Check if	PTIN		
		·			4 —		self- employed			
Paid		YUSSIE STE	IER	1 4	4	11/11/20		P00178	538	
Prepa	arer	Firm's name ► BIL		& PRE	IS P.C.	,,,	Firm's EIN ► 1	3-28390	33	
Use (,	~ III						

Phone no. (212) 425-3300 Form **990-PF** (2019)

Firm's address ▶ 42 BROADWAY SUITE 1815

NEW YORK , NY 10004

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Employer identification number

	THE WEISKOPF FAMILY FOUNDATION	83-6588178						
Organization type (chec	k one)							
Filers of:	Section:	,						
Form 990 or 990-EZ	501(c)() (enter number) organization	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							
	on is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule See instructions						
General Rule								
=	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totalin any one contributor. Complete Parts I and II. See instructions for determining a contributor							
Special Rules								
sections 509(a)	tion 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 amore EZ, line 1. Complete Parts I and II.	, or 16b, and that received from						
year, total contr	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or eduruelty to children or animals. Complete Parts I, II, and III.							
year, contribution is checked, ento purpose. Don't	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from one exclusively for religious, charitable, etc., purposes, but no such contributions totaled ner here 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 able, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000. If this box us, charitable, etc.,						
•	n that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (F	· · · · · · · · · · · · · · · · · · ·						
	on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its F et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	orm 990-PF, Part I, line 2, to						
I HA For Paperwork Redu	action Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)						

Name of organization

Employer identification number

THE WEISKOPF FAMILY FOUNDATION

83-6588178

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	JEFFREY AND ELISHEVA WEISKOPF 9 MELANEY DRIVE MONSEY, NY 10952	\$ <u>2,074,472</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 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 (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

THE WEISKOPF FAMILY FOUNDATION

83-6588178

	IDROIT TANIENT FOUNDATION		0300170
Part II	Noncash Property (see instructions) Use duplicate copies of Part II	ıf addıtıonal space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 _ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
•	-		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 _ _ \$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization **Employer identification number** THE WEISKOPF FAMILY FOUNDATION 83-6588178 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	INTEREST	ON SAV	/INGS A	ND TEMPOR	ARY CASH	INVESTMENT	S STATEMENT 1
SOURCE				(A) REVENUE PER BOOK		(B) INVESTMENT INCOME	(C) T ADJUSTED NET INCOME
CITIBANK					41.	241.	241.
TOTAL TO PAR	T I, LINE	3			41.	241.	241.