Form **990-PF**

Department of the Treasury

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.

=======================================	OF CO	lendar year 2019 or tax year beginning	,			and endi		···		, 20
_	_	foundation			, 2015,	anu enui		Employer identifi	cation numb	
•							'		2158408	
_		ADAY FAMILY CHARITABLE TRUST rand street (or P O box number if mail is not delivered to		idroce)		Room/suite		Telephone numbe		
		one street to the post formation in the delivered to	7 511 001 01	,		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Talophone name	T tocc matrice	20.00.0
	РΟ	BOX 1802						0.0	8-866-3	2275
-		own, state or province, country, and ZIP or foreign posta	l code				-+-		0-000-	32/5
·	,	own, state of province, country, and En of foreign posta					c	if exemption applicat	tion is	, \Box
	ממ	WIDENCE DI 02001 1002						pending, check here		
103. 7		VIDENCE, RI 02901-1802 eck all that apply Initial return		Initial return	of a former n	ublio obor				
) Cile	Final return	-	Amended ret	-	abile citat	ם איי	1 Foreign organizati		
复霉		Address change	⊢	Name change		ろ		2 Foreign organizati 85% test, check hi	ere and attach	
医急	Che	eck type of organization: Section 501(2/(3) 0)	<u> </u>				computation .		🏲 🗀
20		Section 4947(a)(1) nonexempt charitable trust		ther taxable pr		in DU	E	If private foundation		
X		r market value of all assets at J Accou				rual	\dashv	under section 507(b)		
•		1	her (sp		asii Acc	iuai		If the foundation is in under section 507(b)		
Ą				d), must be on ca	ash basis)		-	dider section 507(b)	(I)(D), CHECK IN	e.e P
∞		Analysis of Revenue and Expenses (The			1				(d) Disb	ursements
had.	تقلينا	total of amounts in columns (b), (c), and (d)		Revenue and penses per	(b) Net inve		(c)	Adjusted net	for ch	arıtable
		may not necessarily equal the amounts in column (a) (see instructions))	54	books	incom	e		ıncome		poses asis only)
202	1	Contributions, gifts, grants, etc., received (attach schedule) .		350,000.						
2	-2-	Check - I if the foundation is not required to								1
	3	Interest on savings and temporary cash investments								
/	4	Dividends and interest from securities		1,219,814.	1,20	4,567.				STMT 1
1	5a	Gross rents		,,		1,				. !
7	Ь р	7								
ď	6a	Net gain or (loss) from sale of assets not on line 10		5,271,064.			-			* }
t Revenu	b	Gross sales price for all assets on line 6a 26,366,712.		•			7	MECEN	個口 .	
>	7	Capital gain net income (from Part IV, line 2) .			6,27	1,064.		COLUMN SAMON SAME WELL	SCHOOL STATE	2
_ ~	8	Net short-term capital gain					g	APR 14	2020	<u> </u>
1707	9	Income modifications					8			3
	10a	Gross sales less returns and allowances						OGDEN	UT	- [
9	Ь	Less Cost of goods sold .					<u> </u>			
×.	C	Gross profit or (loss) (attach schedule)								
APR	11	Other income (attach schedule)		16,583.						STMT 2
	12	Total. Add lines 1 through 11		7,857,461.	7,47	<u>5,631.</u>				
NNEU Ses	13	Compensation of officers, directors, trustees, etc		164,958.	9	8,975.				<u>65,983</u>
	14	Other employee salaries and wages				NONE		NONE		
	15	Pension plans, employee benefits				NONE		NONE		
SCAN	16a	Legal fees (attach schedule)								
ויי עי	ь	Accounting fees (attach schedule)								
÷	C	Other professional fees (attach scheduler. 3.		267,006.	26	5,506.				1,500
±	17	Interest		01 063		1 063				
. <u> </u>	18	Taxes (attach schedule) (see instructions, 4.		21,863.	<u> </u>	<u>1,863.</u>				
Ë	19	Depreciation (attach schedule) and depletion.			<u> </u>					
A	20	Occupancy				NIONTE		NONTE		
ב	21	Travel, conferences, and meetings				NONE		NONE		
<u>.</u>	c 17 18 19 20 21 22 23 24	Printing and publications		1 402	<u> </u>	NONE		NONE		1 402
<u>.</u> .	23	Other expenses (attach schedule) STMT. 5		1,403.						1,403
rat	24	Total operating and administrative expenses.		455,230.	27	6 211		NI ON IT		60 006
a d	4	Add lines 13 through 23	·- ·- ,	455,230. 2,717,659.	<u> </u>	6,344.		NONE		68,886 717,659
C	J	Contributions, gifts, grants paid		3,172,889.	37	6,344.		NONE		, 717, 659 , 786, 545
_	26 27	Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12		112,007.		0,044.		NOME		100,045
	l a	Excess of revenue over expenses and disbursements	,	1,684,572.						
		Net investment income (if negative, enter -0-)	•	1,007,012.	7 00	9,287.				
	i	Adjusted net income (if negative, enter -0-).			7,09	-1201.				
JSA F	•	perwork Reduction Act Notice, see instructions.							Form 90	00-PF (2019)

JSA For Paperwork Reduction Act Notice, see instructions.

AZV856 L775 04/02/2020 08:49:43

91-2158408

P	art II	Balance Sheets	Attached schedules and amounts in the	Beginning of year	End	of year
			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-beari	ng			
	2	Savings and temporary	cash investments	<u>2,839,884</u> .	2,889,563	. 2,889,563
	3	Accounts receivable				
		Less allowance for doub	otful accounts >			<u>. </u>
	4	Pledges receivable ▶		,		
		Less allowance for doub	otful accounts -			
	5	Grants receivable				
	6	Receivables due from	officers, directors, trustees, and other			
			ach schedule) (see instructions)			
	7					
		Less allowance for doub	otful accounts NONE			
ssets	8		e			
SSI	9		eferred charges			
◂			government obligations (attach TMTuif		20 545 500	
		•	stock (attach schedule) . STMT .7	35,128,486.	39,745,799	. 58,014,090
	11°	Investments - corporate Investments - land, building	bonds (attach schedule) . STMT .8.			
	''	and equipment basis				
		Less accumulated deprecia (attach schedule)	tion >			
	12		loans			
	13 14	Investments - other (atta Land, buildings, and	ch schedule) STMT .9			
	14	equipment basis Less accumulated deprecia	·			
		(attach schedule)	<u> </u>			
	15	Other assets (describe				
	16	•	completed by all filers - see the			
_		instructions Also, see pa	age 1, item l)	37,968,370.	42,635,362	. 60,903,653
	17	Accounts payable and a	ccrued expenses			
۰,	18	• •				
ĕ	19	Deferred revenue				
abilities	20		rs, trustees, and other disqualified persons.			
iat	21		tes payable (attach schedule)			
_	22	Other liabilities (describe	· -)		_ -	
		W Alle Burkton College	- 47.11		NIONII	1
_	23		s 17 through 22)		NON!	
nces			FASB ASC 958, check here			
ŭ	_	and complete lines 24,				
salai	24		r restrictions			<u> </u>
g P	25		strictions · · · · · · · · · · · · · · · · · · ·			
S		and complete lines 26 thro	I			
or Fund	0.0	•	Ĭ	37,968,370.	42,635,362	
0	26	•	Ipal, or current funds	31,300,310.	42,033,302	<u>-</u>
ë	20		land, bldg , and equipment fund			
755	20	-	ated income, endowment, or other funds	37,968,370.	42,635,362.	
ĭ	30		net assets/fund balances (see	31,000,310.	42,033,302	
ž	27 28 29 30		assets/fulld balances (see	37,968,370.	42,635,362.	
			iges in Net Assets or Fund Bala		42,055,502.	
			palances at beginning of year - Part		nust agree with	
•			d on prior year's return)			37,968,370.
2		-	line 27a			4,684,572.
			led in line 2 (itemize) ▶			2,002,374.
						42,652,942.
			line 2 (itemize) ► SEE STAT		5	17,580.
			plances at end of year (line 4 minus li			42,635,362.
•	1010	accord of fully De	The contract of the con	o, , or in condition (D	,, 0	,,

(a) List and desc	and Losses for Tax on Inversible the kind(s) of property sold (for each warehouse, or common stock, 200	xample, real estate,	(b) How acquired P - Purchase D - Donation		(d) Date sold (mo , day, yr)
1a PUBLICLY TRADED S	ECURITIES		ļ		
<u> </u>			ļ		
C			ļ		
_d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu	ıs (g))
a 26,365,922.		20,092,956.		6,	<u> 272,966.</u>
b					
С					
d			ļ		
e					
Complete only for assets sho	wing gain in column (h) and owned b	y the foundation on 12/31/69		Gains (Col (h) ga	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ı), ıf any	col	(k), but not less to Losses (from col	
a				6,	272,966
b					
C					
d					
e			Ī		
		aın, also enter in Part I, line 7			
Capital gain net income of	vr (not canital loce)	oss), enter -0- in Part I, line 7	2	6,	271,064
Net short-term capital ga	in or (loss) as defined in sections				
		tructions If (loss), enter -0- in			
· ·			3		
		uced Tax on Net Investment I	ncome		
	he section 4942 tax on the distrib qualify under section 4940(e). De	outable amount of any year in the b	ase perio	d?	Yes X
		r; see the instructions before maki	ng anv er	itries	
(a)		(c)	l dity ci	(d)	
Base period years	(b) Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
Calendar year (or tax year beginning in)	2,919,176.	53,797,600.	<u> </u>	(cor (b) divided by	0.054262
2018 2017	2,207,199.	51,221,528.	 		0.034202
2017	2,026,361.	45,974,467.			0.04407
2015	1,590,343.	46,783,351.	 		0.033994
2013	1,606,453.	45,616,292.	<u> </u>		0.03521
2014	1,000,433.	+3,010,232.			0.03321
Total of line 1 line - 1-	N		2		0.21064
					0.21004
=		de the total on line 2 by 5.0, or by	3		0.04212
the number of years the	foundation has been in existence	if less than 5 years	1		0.04212
Enter the net value of no	ncharitable-use assets for 2019 fr	rom Part X, line 5	4	55,	587,461
			5	າ	341,789
Multiply line 4 by line 3.			3		J31,10J
6 Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		70,993
Add lines 5 and 6			7	2,	412,782
B Enter qualifying distributi			1		
	ons from Part XII, line 4	c in Part VI, line 1b, and complete	8		786,545

١ .	?			
_	990-PF (2019) 91-2158408			Page 4
Par	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see inst	ructio	<u>15)</u>
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)			· •
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		70.	993.
	here X and enter 1% of Part I, line 27b			223.
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of		***	
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			NONE
3	Add lines 1 and 2			993. NONE
4	The state of the factories of the factor			993.
5	The based on investment medine. Subtract line 4 from line 5 if 2010 of 1035, enter 0 - 1		70,	993.
6	Credits/Payments 2019 estimated tax payments and 2018 overpayment credited to 2019 6a 20,000 .			1
a	NOVE			ł
b	NONE			}
ب د	Tax paid with application for extension of time to file (Form 8868) 6c NOINE Backup withholding erroneously withheld			1
d 7	Total credits and payments Add lines 6a through 6d		20	000.
8	Enter any penalty for underpayment of estimated tax. Check here		201	<u>000.</u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		50,	993.
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 ▶ NONE Refunded ▶ 11			
Par	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	d it	Yes	No
	participate or intervene in any political campaign?	. 1a		<u> </u>
b.	Did-it-spend more than-\$100-during the year (either directly or indirectly) for political purposes? See	the		
	instructions for the definition	<u>1b</u>	<u> </u>	<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater	ials		
	published or distributed by the foundation in connection with the activities			. - <u>.</u>
	Did the foundation file Form 1120-POL for this year?	<u>1c</u>		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	<u>.</u>		;
	on foundation managers \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			i
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	cles _	-	!
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		4	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<u>4a</u>	-	X
þ	If "Yes," has it filed a tax return on Form 990-T for this year?			
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			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions to the state legislation that effectively amends the governing instrument so that no mandatory directions to the state legislation that effectively amends the governing instrument so that no mandatory directions to the state legislation that effectively amends the governing instrument so that no mandatory directions to the state legislation that effectively amends the governing instrument so that no mandatory directions to the state legislation that effectively amends the governing instrument so that no mandatory directions to the state legislation that the state legislation is th	1 -	X	
~	conflict with the state law remain in the governing instrument?	· · —	$\frac{\lambda}{X}$	
7 82	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 2 Enter the states to which the foundation reports or with which it is registered. See instructions.	^*	 ^	1
8a	MA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gen	i	,,	الہ
_	(or designate) of each state as required by General Instruction G ² If "No," attach explanation		<u> </u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			/
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yo	es,"	1	1 .

10

Part VII-A Statements Regarding Activities (continued)	,		T
		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		<u> </u>
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			l
person had advisory privileges? If "Yes," attach statement. See instructions			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 ► BANK OF AMERICA, N.A. Telephone no ► (888) 866			
Located at ► PO BOX 1802, PROVIDENCE, RI ZIP+4 ► 02901-			1 571
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	• • •	▶	<u>X</u>
and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		res	
over a bank, securities, or other financial account in a foreign country?			X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
the foreign country ► Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
		Yes	No
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	\vdash	163	140
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? Yes X No			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1 1		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
(5) Transfer any income or assets to a disqualified person (or make any of either available for			
the benefit or use of a disqualified person)?			
(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)			
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	1 _b		Х
Organizations relying on a current notice regarding disaster assistance, check here			
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
were not corrected before the first day of the tax year beginning in 2019?	1c	_	Х
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?		-	
If "Yes," list the years	1 1	Í	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		ĺ	
(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	1 1	l	
<u> </u>			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		Ì	
at any time during the year?			
b If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or		ļ	
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		1	
the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the	2.		
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		<u>X</u>
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		Х
	rm 990)-PF	

Part	VII-B Statements Regarding Activities f	or Which Form 4	720 May Be Req	uired (continued)				
5a	During the year, did the foundation pay or incur any amo	ount to				Yes	No	
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes X No							
	(2) Influence the outcome of any specific public ele	ection (see section 4	4955), or to carry on	,				
	directly or indirectly, any voter registration drive?							
	(3) Provide a grant to an individual for travel, study, or o	ther similar purposes	,	. Yes X No	.			
	(4) Provide a grant to an organization other than a							
	section 4945(d)(4)(A)? See instructions	•						
	(5) Provide for any purpose other than religious, ch				}			
	purposes, or for the prevention of cruelty to children							
ь	If any answer is "Yes" to 5a(1)-(5), did any of the							
	Regulations section 53 4945 or in a current notice regar				5b			
	Organizations relying on a current notice regarding disas	ster assistance, check	here					
С	If the answer is "Yes" to question 5a(4), does the							
_	because it maintained expenditure responsibility for the							
	If "Yes," attach the statement required by Regulations se	~						
6a	Did the foundation, during the year, receive any fur		ectiv. to pay premiun	ns				
	on a personal benefit contract?							
b	Did the foundation, during the year, pay premiums, direc				6ь		Х	
	If "Yes" to 6b, file Form 8870							
7a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?	. Yes X No		-		
b	If "Yes," did the foundation receive any proceeds or have	•			7ь	ľ		
8	Is the foundation subject to the section 4960 tax on pay	ment(s) of more than	\$1,000,000 in					
	remuneration or excess parachute payment(s) during the	year [?]		. Yes X No	j l			
Part	VIII Information About Officers, Directo	rs, Trustees, Fou	ndation Manager	s, Highly Paid Emp	loyees,			
1	and Contractors List all officers, directors, trustees, and foundation	n managers and th	eir compensation.	See instructions.				
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to	(e) Expens	e accou	int,	
	(a) Name and address	devoted to position	enter -0-)	employee benefit plans and deferred compensation	other allo	wance	s	
BANK	OF_AMERICA	TRUSTEE						
FIN	ANCIAL PLAZA, PO BOX 1802, PROVIDENCE, RI 02903	1	141,588	-0-			-0-	
ICHO	LAS_SPITZER	CO TRUSTEE						
14 W	EST 47TH ST, NEW YORK, NY 10036	1	0-	-0-			-0	
	SPITZER	CO TRUSTEE						
14 W	EST 47TH ST, NEW YORK, NY 10036	11	-0-	-0-		_	-0-	
JUKAS	SAUL	CO TRUSTEE						
	ENTRAL AVE., APT 3, DOVER, NH 03820	1 1	-0-	-0-			-0-	
	Compensation of five highest-paid employees "NONE."	(other than thos	e included on line	1 - see instructio	ns). If no	ne, e	enter	
		(b) Title, and average	<u> </u>	(d) Contributions to	(-) [
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	(e) Expense other allo			
		develou to position	-	compensation				
TONI	,		NONE	NONE	3.77	ONE		
NON	<u> </u>		NOIVE	NONE	14/	<u> JNE</u>		
		1						
Catal	number of other employees paid over \$50,000				NT/	ONE		
orgi	number of other employees paid over \$50,000		· · · · · · · · · · · · · · · · · · ·		Form 990		2010)	

Pa	ae	7

Part VIII Information About Officers, Directors, Trustees, Foundation Ma and Contractors (continued)	anagers, Highly Paid Emplo	oyees,
3 Five highest-paid independent contractors for professional services. See inst	tructions. If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		NONE
		<u> </u>
Total number of others receiving over \$50,000 for professional services	<u> </u>	NONE
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistics organizations and other beneficiaries served, conferences convened, research papers produced, etc	al information such as the number of	Expenses
1NONE		
2		ļ
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
1NONE		
<u> </u>		
2		;
All other program-related investments. See instructions		
3NONE -		
Total Add lines 1 through 2		

Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign found	ations,
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	53,374,125.
	Average of monthly cash balances	1b	3,059,846.
	Fair market value of all other assets (see instructions)	1c	NONE
	Total (add lines 1a, b, and c)	1d	56,433,971.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	56,433,971.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	846,510.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	55,587,461.
6	Minimum investment return. Enter 5% of line 5	6	2,779,373.
Par	Distributable Amount (see Instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6 · · · · · · · · · · · · · · · · · ·	1	2,779,373.
2a	Tax on investment income for 2019 from Part VI, line 5 2a 70,993.		
ь	Income tax for 2019 (This does not include the tax from Part VI) 2b]	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1 · · · · · · · · · · · · · · · · · ·	3	2,708,380.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	2,708,380.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		-
	line 1	7	2,708,380.
Pari	t XII Qualifying Distributions (see instructions)		
-	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	-	2 706 545
			2,786,545.
	Program-related investments - total from Part IX-B	1b	
2			MONT
-	purposes	2	NONE NONE
3	Amounts set aside for specific charitable projects that satisfy the:		NONE
	Suitability test (prior IRS approval required)	3a	NONE
	Cash distribution test (attach the required schedule)	3b	NONE NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,786,545.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	70.000
c	Enter 1% of Part I, line 27b. See instructions	5	70,993.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,715,552.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	iculating v	wnether the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		

Page 9

Pa	rt XIII Undistributed Income (see instr	ructions)	· · · · · · · · · · · · · · · · · · ·		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2019 from Part XI,	Corpus	Years prior to 2018	2018	2019
	line 7				2,708,380.
2	Undistributed income, if any, as of the end of 2019				!
	Enter amount for 2018 only			2,214,200.	
b	Total for prior years 20,20,20		NONE		
3	Excess distributions carryover, if any, to 2019		İ		†
а	From 2014 NONE				
b	From 2015 NONE				•
C	From 2016 NONE				
	From 2017				
	From 2018 NONE	370370			
	Total of lines 3a through e	NONB			
4	Qualifying distributions for 2019 from Part XII,				
	line 4 ▶ \$ 2,786,545.			2,214,200.	
	Applied to 2018, but not more than line 2a			2,214,200.	
b	Applied to undistributed income of prior years		NONE		
	(Election required - see instructions)		NONE		
C	Treated as distributions out of corpus (Election required - see instructions)	NONE			
А	Applied to 2019 distributable amount	110113			572,345.
	Remaining amount distributed out of corpus:		- 1 -		<u> </u>
	Excess distributions carryover applied to 2019				
	(If an amount appears in column (d), the same amount must be shown in column (a))	NONB			NONE
6	Enter the net total of each column as				
•	indicated below:				i S
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	NONB			
b	Prior years' undistributed income Subtract				İ
	line 4b from line 2b	•	NONE		
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has				j
	been issued, or on which the section 4942(a)		NONE		ļ
	tax has been previously assessed		NONE		
d	Subtract line 6c from line 6b Taxable		NONE		
e	amount - see instructions		NONE		
-	4a from line 2a Taxable amount - see				į
	mistractions				
f	Undistributed income for 2019 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2020				2,136,035.
7	Amounts treated as distributions out of corpus				
•	to satisfy requirements imposed by section			j	Í
	170(b)(1)(F) or 4942(g)(3) (Election may be			;	
	required - see instructions)	NONE			
8	Excess distributions carryover from 2014 not				ŀ
	applied on line 5 or line 7 (see instructions)	NONE			
9	Excess distributions carryover to 2020.				ļ
	Subtract lines 7 and 8 from line 6a	NONB		_	İ
	Analysis of line 9	ł	}	ł	
	Excess from 2015 NONE				
	Excess from 2016 NONE				1
	Excess from 2017 NONE				!
	Excess from 2018 NONE]		j	
e	Excess from 2019 · · · NONE			i	

Par	t XIV Private Op	erating Foundations	s (see instructions	and Part VII-A, que	stion 9)	N	<u>IOT APPLICABI</u>
1 a	If the foundation has	received a ruling or o	letermination letter th	nat it is a private op	erating		
	foundation, and the ruling	g is effective for 2019, en	ter the date of the rulir)g	▶[
b	Check box to indicate v	whether the foundation	is a private operating	foundation described	in section	4942(j)(3)	or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year	ļ	Prior 3 years	. ,	/	(e) Total
	justed net income from Part I or the minimum investment	(a) 2019	(b) 2018	(c) 2017	(d)	2016	
	return from Part X for each						
	year listed						
b	85% of line 2a					_	
C	Qualifying distributions from Part					ľ	
	XII, line 4, for each year listed .				_/		
đ	Amounts included in line 2c not used directly for active conduct of exempt activities				4		
3	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c						
	(1) Value of all assets(2) Value of assets qualifying under section				 		
b	4942(j)(3)(B)(i) * "Endowment" alternative test- enter 2/3 of minimum invest- ment return shown in Part X,						
С	line 6 for each year listed "Support" alternative test conter		/				·
-	(1) Total support other than						
	gross investment income (interest, dividends, rents,		ľ				
	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)(8)(iii)						
	(3) Largest amount of sup- port from an exempt						
	organization				_		
		tary Information (Complete this par	rt only if the foun	dation had	\$5.000 or m	ore in assets at
		uring the year - see				, , , , , , , , , , , , , , , , , , ,	
1	Information Regarding	Foundation Manager	rs:				
а	List any managers of	the foundation who I	nave contributed mo	ore than 2% of the t	otal contribut	tions received	by the foundation
	before the close of any	tax year (but only if the	ney have contributed	more than \$5,000)	(See section	507(d)(2))	
	NONE						
	List any managers of					an equally la	rge portion of the
	ownership of a partner	ship or other entity) of	f which the foundation	on has a 10% or great	er interest.		
	NONE						
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholars	hip, etc., Programs:	 ·.		-
	Check here ▶ ☐ If t unsolicited requests for	or funds. If the found	ation makes gifts, g	s to preselected ch rants, etc., to individ	aritable orga luals or orga	ınızations and nizatıons undei	does not accept rother conditions,
	complete items 2a, b, o	·					
а	The name, address, and		r email address of th	e person to whom ap	pilications sh	ould be addres	sea.
<u> </u>	SEE STATEMENT 1 The form in which app		omitted and informat	rion and materials the	v should incl	ıde	
	SEE ATTACHED ST			and materials the	, 55614 111611		
C	Any submission deadli	nes:			·		
	N/A						
	Any restrictions or li	mitations on awards	, such as by geog	raphical areas, char	itable fields,	kinds of inst	litutions, or other
	N/A						

Supplementary Information (<u>continuea)</u>			
3 Grants and Contributions Paid Durin	ng the Year or Appi	oved for	Future Payment	· · · · · · · · · · · · · · · · · · ·
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
PLEASE SEE ATTACHED LIST			UNRESTRICTED GENERAL	0.717.650
C/O BANK OF AMERICA, PO BOX 1802 PROVIDENCE	N/A	PC	SUPPORT	2,717,659.
		l	į	1
				İ
		! [1	,
	,			!
				1
		ļ		
				}
	ļ			
Total		<u>.</u>	▶ 3a	2,717,659.
b Approved for future payment				
	!			1
	'			ľ
		<u></u>	<u> </u>	
Total	. <i></i>		▶ 3 <u>b</u>	1

Part XVI-	A Analysis of Income-Produ	ucing Act	ivities			
Enter gross a	amounts unless otherwise indicated		eted business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
4.5		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income
-	service revenue					(See instructions)
f						
g Fees	and contracts from government agencies					
2 Members	ship dues and assessments					
3 Interest or	n savings and temporary cash investments •			14	1,219,814.	
	s and interest from securities			14	1,219,014.	
	al income or (loss) from real estate					
	financed property		-			
	I income or (loss) from personal property					
	vestment income					
	oss) from sales of assets other than inventory			18	6,271,064.	
	me or (loss) from special events · · ·					
10 Gross pro	ofit or (loss) from sales of inventory					
11 Other rev				 	16 502	
	CISE TAX REFUND			1 1	16,583.	
d e						
	Add columns (b), (d), and (e)				7,507,461.	
	dd line 12, columns (b), (d), and (e)				13	7,507,461.
	eet in line 13 instructions to verify calci	ulations)			. <u> </u>	
Part XVI-	Relationship of Activities	to the A	ccomplishment of E	xempt Pur	poses	
Line No.	Explain below how each activit					
▼	accomplishment of the foundation	on's exemp	t purposes (other than	by providing	g funds for such purpose:	s). (See instructions)
			· · · · · · · · · · · · · · · · · · ·			
						. .
			 		· · · · · · · · · · · · · · · · · · ·	
·	-					
			NOT APPLICABI			-
						
					· · · · · · · · · · · · · · · · · · ·	
						Form 990-PE (2010)

Part 2	KVII	Information Re Organizations	egarding Trans	fers to and Tra	ansaction	s and R	elationship	s With Non	charitabl	e Ex	empt
ir	n sect	organization direct tion 501(c) (other ations?								Yes	No
	_	ers from the reporting	g foundation to a	noncharitable exe	mpt organi	zation of					
(·	1) Cas	h							1a(1)		X
(:	2) Oth	er assets							1a(2)	<u> </u>	X
b C	ther to	ransactions:									
		es of assets to a non-									X
		chases of assets fror									X_
	(3) Rental of facilities, equipment, or other assets										X
		mbursement arrange									X
		ns or loan guarantee									X
((b) Peri	formance of services	or membership	or fundraising solid	citations .	 			10(6)	+	X
C 5	naring	g of facilities, equipments	ient, mailing lists,	otner assets, or pa	ala employ	bodulo C	olumn (h) s	hould always	chow the	fair m	
a II	ine a	of the goods, other	ie above is Tes, assets or service	complete the fo	norting for	indation.	If the found	ation received	less than	fair n	narket
v	alue u	n any transaction or	r sharing arrange	ment, show in col	lumn (d) th	ne value c	f the goods	, other assets,	or service	s rece	eived.
(a) Line	$\overline{}$	(b) Amount involved		charitable exempt orga				ers, transactions, an			
					-	-					
							-				
		<u> </u>									
			· -								
	_										
	-										
	-	<u> </u>									
	-		-								
	-		·								
	+										
	-							<u> </u>			
					_						
d	lescrib	foundation directly ed in section 501(c)	(other than section						· Y	es 🖸	 ⊠ No
<u> </u>	Yes,	<u>complete</u> the follow (a) Name of organizatio		(b) Type of or	rganization	· /		(c) Description of re	lationship	-	
		(a) Name of organizatio	···	(B) Type of or	gamzation	-		, o, becomplied of te	юшенонъ		
			-								
		penalties of perjury, I declar, and complete Declaration o						o the best of my kn	owledge and	belief, it	ıs true,
Sign	Correct	, and complete Declaration of	/ preparet tottler triain taxt				,,	May 1	ne IRS discu	ss this	return
_	19	Jasen 1 th	04/02/20	020	MANAG	ING DIR		he preparer		below?	
Here	Sign	ature of officer or trustee		Date		Title		See ins	tructions	Yes	No
	BA	NK OF AMERICA					10		1 57		
Paid		Print/Type preparer's na	ime	Preparer's signature			Date	Check	If PTIN		
	ror							self-employ	red		
Prepa		Firm's name						Firm's EIN			
Use (אוחר	Firm's address						D			
		<u> </u>						Phone no	Form 99	0-PF	(2019)

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/Form990for the latest information.

OMB No 1545-0047

2019

Employer identification number

CANADAY FAMILY CHARITABLE TRUST 91-2158408 Organization type (check one): Filers of Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

JSA

9E1251 1 000

For Paperwork Reduction 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
CANADAY FAMILY CHARITABLE TRUST

Employer identification number 91-2158408

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

			T=
(a) <u>N</u> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DOREEN SPITZER TRUST #1 C/O BANK OF AMERICA PROVIDENCE, RI 02901	\$ 350,000.	Person 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 Noncash (Complete Part II for noncash contributions)
(a) _No	(b) Name, address, and ZIP+ 4	(c) Total-contributions	(d) Type of contribution
		\$	Person 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 Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person 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 Noncash (Complete Part II for noncash contributions)

. . .

- DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF, PART I

NET INVESTMENT INCOME	13,456.	138,690.		732,174.	155,159.	63,029.	63,783.	36,374.	1,902.		1,204,567.
REVENUE AND EXPENSES PER BOOKS	13,456.	138,690.	15,247.	732,174.	155,159.	63,029.	63,783.	36.374.	1,902.		1,219,814.
DESCRIPTION	USGI REPORTED AS NONOUALIFIED DIVIDENDS	FOREIGN DIVIDENDS	NONDIVIDEND DISTRIBUTIONS	DOMESTIC DIVIDENDS	OTHER INTEREST	NONQUALIFIED FOREIGN DIVIDENDS	NONQUALIFIED DOMESTIC DIVIDENDS	SECTION 199A DIVIDENDS	ACCRUED MARKET DISCOUNT		TOTAL

 \vdash

STATEMENT

FORM 990PF, PART I - OTHER INCOME

REVENUE AND EXPENSES PER BOOKS

DESCRIPTION

EXCISE TAX REFUND

16,583.

TOTALS

16,583.

CANADAY FAMILY CHARITABLE TRUST

- OTHER PROFESSIONAL FEES

FORM 990PF, PART I

ᠬ

STATEMENT

		,	
	 NVESTMENT INCOME 	265,291.	265,506.
	REVENUE AND EXPENSES PER BOOKS	265,291. 215. 1,500.	
	DESCRIPTION	INVESTMENT MNGMNT FEES (DEDUCT INVESTMENT ADVISORY FEES OTHER PROFESSIONAL FEES - CHAR	TOTALS

1,500. 1,500.

CHARITABLE PURPOSES

CANADAY FAMILY CHARITABLE TRUST	FORM 990PF, PART I - TAXES

91-2158408

NET INVESTMENT INCOME	2,214. 7,182. 2,467.	11,863.
REVENUE AND EXPENSES PER BOOKS	2,214. 10,000. 7,182. 2,467.	1
DESCRIPTION	FOREIGN TAXES EXCISE TAX ESTIMATES FOREIGN TAXES ON QUALIFIED FOREIGN TAXES ON NONOUALIFIED	TOTALS

വ

STATEMENT

EXPENSES
OTHER
ı
Н
PART
990PF,
FORM

,	REVENUE	AND	EXPENSES	PER BOOKS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
				DESCRIPTION	

500.	1,403.
	TOTALS

STATE FILING FEE OTHER CHARITABLE EXPENSES

CHARITABLE PURPOSES	500.	1,403.	
------------------------	------	--------	--

AZV856 L775 04/02/2020 08:49:43

48

CANADAY FAMILY CHARITABLE TRUST

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS

DESCRIPTION

PLEASE SEE ATTACHED

TOTALS

ø

STATEMENT

			G ENDING LUE FMV	5,799. 58,014,090. 5,799. 58,014,090.	STATEMENT 7
	91-2158408		ENDIN BOOK VA	486. 39,745,799. 39,745,799. 486. ====================================	50
			BEGINNING BOOK VALUE	35,128,48	
				TOTALS	د :
v	CANADAY FAMILY CHARITABLE TRUST	FORM 990PF, PART II - CORPORATE STOCK	DESCRIPTION	SEE ATTACHED LIST	AZV856 L775 04/02/2020 08:49:4

CANADAY FAMILY CHARITABLE TRUST

- CORPORATE BONDS FORM 990PF, PART II

DESCRIPTION

PLEASE SEE ATTACHED

TOTALS

ω

STATEMENT

σ

43
49:
08:
2020
/02/
04
L775
ZV856

α
0
4
œ
Ñ
H
$\ddot{\circ}$
١.
7
σ

INVESTMENTS
- OTHER
ΙI
PART
990PF,
FORM

CANADAY FAMILY CHARITABLE TRUST

	COST/ FMV	C OR F	1 1 1 1
TNVESTIMENTS			
- O'I'HER ======			
T T ===			
, PAKT II =======			
990PF =====		DESCRIPTION	! ! ! ! !
FORM =====		DESCR	

TOTALS

SEE ATTACHED STATEMENT

FORM	990PF,	PART	III -	- OTHER	DECREASES	IN NE	T WORTH	OR	FUND F	3ALANCES
=====	======	=====	=====	======	-=======	=====	======	====		======

DESCRIPTION		AMOUNT
INCOME ADJUSTMENT ADJUSTMENTS TO CARRY VALUE ACCRUED INTEREST		1,664. 9,697. 6,219.
	TOTAL	17,580.

CANADAY FAMILY CHARITABLE TRUST

FORM 990PF, PART VII-A - NEW SUBSTANTIAL CONTRIBUTORS ______

NAME AND ADDRESS ______

DOREEN SPITZER TRUST #1 C/O BANK OF AMERICA PROVIDENCE, RI 02901

CANADAY FAMILY CHARITABLE TRUST FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME:

APPLICATION MATL AVAIL AT WWW.CANADAYFAMILY.ORG RECIPIENT'S PHONE NUMBER: 646-855-1011 FORM, INFORMATION AND MATERIALS:

WWW.CANADAYFAMILY.ORG
ONLINE APPLICATIONS ONLY AT WWW.CANADAYFAMILY.ORG
FEBRUARY 1ST
PROJECTS IN THE STATE OF VERMONT TO BENEFIT CHILDREN OR THE
ENVIRONMENT

FEDERAL FOOTNOTES

THE COMPENSATION SHOWN ON THE RETURN THAT IS PAID TO BANK OF AMERICA, N.A. AS CORPORATE TRUSTEE IS NOT CALCULATED BASED UPON AN HOURLY RATE FOR TIME SPENT BY THE TRUSTEE; RATHER, BANK OF AMERICA'S COMPENSATION AS CORPORATE TRUSTEE IS CALCULATED USING A MARKET VALUE FEE SCHEDULE. THE TRUST OFFICER'S TIME SPENT PERFORMING ADMINISTRATIVE RESPONSIBILITIES FOR THIS FOUNDATION AVERAGES ONE HOUR PER WEEK. IN ADDITION, TIME IS SPENT BY OTHER STAFF MEMBERS FOR RECORDKEEPING, INVESTMENT MANAGEMENT, INCOME COLLECTION, RENDERING STATEMENTS AND ACCOUNTINGS, REGULATORY REPORTING, REGULATORY COMPLIANCE, AND TAX SERVICES.
