

Form 990-PF

Return of Private Foundation

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

OMB No 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

2003

For calendar year 2019 or tax year beginning APR 1, 2019, and ending MAR 31, 2020

Name of foundation

A Employer identification number

THE BERMAN CHARITABLE TRUST

58-6195209

Number and street (or P O box number if mail is not delivered to street address)

Room/suite

B Telephone number

2660 PEACHTREE ROAD, N.W., UNIT 20A

(404) 262-2181

City or town, state or province, country, and ZIP or foreign postal code

ATLANTA, GA 30305

C If exemption application is pending, check here

G Check all that apply:

Initial return

Initial return of a former public charity

D 1. Foreign organizations, check here

Final return

Amended return

2. Foreign organizations meeting the 85% test, check here and attach computation

Address change

Name change

E If private foundation status was terminated under section 507(b)(1)(A), check here

H Check type of organization: Section 501(c)(3) exempt private foundation

Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

I Fair market value of all assets at end of year (from Part II, col. (c), line 16)

J Accounting method: Cash Accrual

\$ 3,410,140. (Part I, column (d), must be on cash basis.)

Part I Analysis of Revenue and Expenses

(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

Table with 4 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Contributions, Interest, Dividends, Rents, Net gain, Other income, Compensation, Legal fees, Taxes, and Total expenses.

03/04

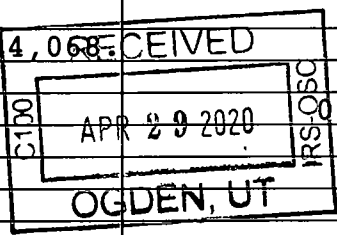
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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments		33,356.	144,320.	144,320.
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons				
	7	Other notes and loans receivable ▶				
		Less: allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments - U.S. and state government obligations				
	b	Investments - corporate stock STMT 9		3,102,456.	2,914,269.	2,902,770.
	c	Investments - corporate bonds				
	11	Investments - land, buildings, and equipment: basis ▶				
	Less accumulated depreciation ▶					
12	Investments - mortgage loans					
13	Investments - other STMT 10		500,000.	500,000.	363,050.	
14	Land, buildings, and equipment: basis ▶					
	Less accumulated depreciation ▶					
15	Other assets (describe ▶)					
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		3,635,812.	3,558,589.	3,410,140.	
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable				
	22	Other liabilities (describe ▶)				
23	Total liabilities (add lines 17 through 22)		0.	0.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/>					
	and complete lines 24, 25, 29, and 30.					
	24	Net assets without donor restrictions				
	25	Net assets with donor restrictions				
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/>					
	and complete lines 26 through 30.					
	26	Capital stock, trust principal, or current funds		3,635,812.	3,558,589.	
27	Paid-in or capital surplus, or land, bldg., and equipment fund		0.	0.		
28	Retained earnings, accumulated income, endowment, or other funds		0.	0.		
29	Total net assets or fund balances		3,635,812.	3,558,589.		
30	Total liabilities and net assets/fund balances		3,635,812.	3,558,589.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	3,635,812.
2	Enter amount from Part I, line 27a	2	-22,482.
3	Other increases not included in line 2 (itemize) ▶	3	0.
4	Add lines 1, 2, and 3	4	3,613,330.
5	Decreases not included in line 2 (itemize) ▶ BOOK TAX DIFFERENCE ON DONATED SHARES	5	54,741.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	3,558,589.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b SEE ATTACHED STATEMENTS			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a			
b			
c			
d			
e 454,791.		459,023.	-4,068.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			
b			
c			
d			
e			-4,068.

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	-4,068.
3 Net short term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	N/A

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	196,353.	3,914,827.	.050156
2017	166,949.	3,982,645.	.041919
2016	138,475.	3,507,157.	.039484
2015	91,500.	3,285,928.	.027846
2014	175,382.	3,049,025.	.057521

2 Total of line 1, column (d)	2	.216926
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	.043385
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	4,019,970.
5 Multiply line 4 by line 3	5	174,406.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	838.
7 Add lines 5 and 6	7	175,244.
8 Enter qualifying distributions from Part XII, line 4	8	217,101.

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

THE BERMAN CHARITABLE TRUST

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	4,107.3461 SHS MANAGED PORTFOLIO SER TORTOISE NOR	P	VARIOUS	03/13/20
b	390.983 SHS VANGUARD INDEX FDS VANGUARD SMALL-CAP	D	VARIOUS	02/14/20
c	714.7729 SHS VANGUARD INDEX FDS VANGUARD SMALL-CA	P	12/10/15	02/14/20
d	223 SHS VANGUARD INDEX FDS VANGUARD MID-CAP ETF	P	VARIOUS	01/30/20
e	213.1273 SHS VANGUARD INDEX FDS VANGUARD SMALL-CA	P	VARIOUS	01/30/20
f	148 SHS ISHARES TR RUSSELL 1000 GROWTH ETF	P	VARIOUS	12/23/19
g	168.7585 SHS VANGUARD TOTAL INTL STOCK INDEX FD E	P	VARIOUS	09/26/19
h	9,541.985 SHS AQR STYLE PREMIA ALTERNATIVE FUND C	P	02/08/19	09/24/19
i	37 SHS VANGUARD INDEX FDS VANGUARD MID-CAP ETF	P	VARIOUS	06/26/19
j	2,359.827 SHS MANAGED PORTFOLIO SER TORTOISE NORT	P	VARIOUS	03/13/20
k	28.1853 SHS VANGUARD INDEX FDS VANGUARD SMALL-CAP	P	VARIOUS	02/14/20
l	247.2415 SHS VANGUARD TOTAL INTL STOCK INDEX FD E	P	VARIOUS	09/26/19
m	92.018 SHS AQR STYLE PREMIA ALTERNATIVE FUND CLAS	P	12/20/18	07/09/19
n	WASH SALE - VANGUARD TOTAL INTL STOCK INDEX FD ET	P	VARIOUS	09/26/19
o	CAPITAL GAINS DIVIDENDS			

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	58,861.		93,028.	-34,167.
b	53,679.		39,429.	14,250.
c	98,134.		72,196.	25,938.
d	40,103.		27,894.	12,209.
e	28,619.		22,548.	6,071.
f	26,013.		15,956.	10,057.
g	8,729.		9,505.	-776.
h	81,510.		100,015.	-18,505.
i	6,090.		5,348.	742.
j	33,818.		55,451.	-21,633.
k	3,840.		3,754.	86.
l	12,788.		13,068.	-280.
m	789.		831.	-42.
n				164.
o	1,818.			1,818.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			-34,167.
b			14,250.
c			25,938.
d			12,209.
e			6,071.
f			10,057.
g			-776.
h			-18,505.
i			742.
j			-21,633.
k			86.
l			-280.
m			-42.
n			164.
o			1,818.

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	-4,068.
3	Net short term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	N/A

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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 <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	838.
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-)	2	0.
3	Add lines 1 and 2	3	838.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	838.
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	8,409.
b	Exempt foreign organizations - tax withheld at source	6b	0.
c	Tax paid with application for extension of time to file (Form 8868)	6c	0.
d	Backup withholding erroneously withheld	6d	0.
7	Total credits and payments. Add lines 6a through 6d	7	8,409.
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	0.
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	10	7,571.
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax <input checked="" type="checkbox"/> 7,571. Refunded <input type="checkbox"/>	11	0.

Part VII-A Statements Regarding Activities

	Yes	No
1a		X
1b		X
1c		X
d		
e		
2		X
3		X
4a		X
4b		
5		X
6	X	
7	X	
8a		
8b	X	
9		X
10		X

N/A

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-16 regarding controlled entities, distributions, public inspection, books in care, and foreign accounts.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

Table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 requirements, including disqualifying acts, taxes on failure to distribute income, and business enterprise holdings.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year, did the foundation pay or incur any amount to:		Yes		No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here	N/A ▶ <input type="checkbox"/>	5b		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).	N/A <input type="checkbox"/> Yes <input type="checkbox"/> No			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		6b		X
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

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

1 List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 11		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
N/A	0.00	0.	0.	0.

Total number of other employees paid over \$50,000 ▶ 0

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

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

Table with 3 columns: (a) Name and address of each person paid more than \$50,000, (b) Type of service, (c) Compensation. Row 1 contains 'NONE'.

Total number of others receiving over \$50,000 for professional services 0

Part IX-A Summary of Direct Charitable Activities

Table with 2 columns: Description of activities, Expenses. Row 1 contains 'N/A'.

Part IX-B Summary of Program-Related Investments

Table with 2 columns: Description of investments, Amount. Row 1 contains 'N/A'.

Total. Add lines 1 through 3 0.

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	3,642,164.
b	Average of monthly cash balances	1b	38,882.
c	Fair market value of all other assets	1c	400,142.
d	Total (add lines 1a, b, and c)	1d	4,081,188.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4,081,188.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	61,218.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,019,970.
6	Minimum investment return. Enter 5% of line 5	6	200,999.

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

1	Minimum investment return from Part X, line 6	1	200,999.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	838.
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	838.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	200,161.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	200,161.
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	200,161.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	217,101.
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	217,101.
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	838.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	216,263.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				200,161.
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only			192,366.	
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: ▶ \$ 217,101.				
a Applied to 2018, but not more than line 2a			192,366.	
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				24,735.
e Remaining amount distributed out of corpus	0.			
5 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	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which 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 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				175,426.
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)	0.			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				

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

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

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

	Tax year				(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
2 a Enter the lesser of the adjusted net income from Part I or the minimum 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					
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.					
3 Subtract line 2d from line 2c. Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

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

SEE STATEMENT 12

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

NONE

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

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

a The name, address, and telephone number or email address of the person to whom applications should be addressed:
N/A

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

c Any submission deadlines:
N/A

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

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year UNION FOR REFORM JUDAISM 633 THIRD AVENUE NEW YORK , NY 10017	N/A	PUBLIC	2019 ANNUAL CONTRIBUTION. CONTRIBUTION IN HONOR OF JULIE KATZ.	5,000.
THE EPSTEIN SCHOOL 335 COLEWOOD WAY, N.W. ATLANTA, GA 30328	N/A	PUBLIC	ANNUAL CONTRIBUTION.	10,000.
AMERICAN JEWISH COMMITTEE 6 PIEDMONT CENTER, SUITE 510 ATLANTA, GA 30305	N/A	PUBLIC	IN HONOR OF MELANIE NELKINS' SERVICE.	2,500.
THE GALLOWAY SCHOOL 215 W WIEUCA ROAD, NW ATLANTA, GA 30342	N/A	PUBLIC	ANNUAL CONTRIBUTION.	5,000.
JEWISH FEDERATION OF GREATER ATLANTA 1440 SPRING ST.,NW ATLANTA, GA 30309	N/A	PUBLIC	HOLOCAUST SURVIVOR SUPPORT FUND.	500.
Total SEE CONTINUATION SHEET(S) ▶ 3a				208,746.
b Approved for future payment NONE				
Total ▶ 3b				0.

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
TEMPLE SINAI 5645 DUPREE DRIVE, NW ATLANTA, GA 30327	N/A	PUBLIC	CAPITAL CAMPAIGN CONTRIBUTION.	25,000.
THE GALLOWAY SCHOOL 215 W WIEUCA ROAD, NW ATLANTA, GA 30342	N/A	PUBLIC	ANNUAL CONTRIBUTION.	5,000.
NOTRE DAME UNIVERSITY 1100 GRACE HALL NOTRE DAME, IN 46556	N/A	PUBLIC	BERMAN SCHOLARSHIP FUND.	5,000.
ATLANTA JEWISH FILM FESTIVAL 1800 PEACHTREE STREET, SUITE 830 ATLANTA, GA 30309	N/A	PUBLIC	ANNUAL CONTRIBUTION.	5,000.
JEWISH HOME LIFE COMMUNITIES 3150 HOWELL MILL ROAD, N.W. ATLANTA, GA 30327	N/A	PUBLIC	ANNUAL CONTRIBUTION.	5,000.
JEWISH WOMEN'S FUND OF ATLANTA 1440 SPRING ST., NW ATLANTA, GA 30309	N/A	PUBLIC	ANNUAL CONTRIBUTION.	3,000.
WEINSTEIN HOSPICE 3150 HOWELL MILL ROAD, N.W. ATLANTA, GA 30327	N/A	PUBLIC	ANNUAL CONTRIBUTION.	1,000.
PIEDMONT HOSPITAL FOUNDATION 2001 PEACHTREE ROAD, SUITE 400 ATLANTA, GA 30309	N/A	PUBLIC	ANNUAL CONTRIBUTION.	5,000.
UNION FOR REFORM JUDAISM 633 THIRD AVENUE NEW YORK, NY 10017	N/A	PUBLIC	ANNUAL CONTRIBUTION.	5,000.
UNION FOR REFORM JUDAISM 633 THIRD AVENUE NEW YORK, NY 10017	N/A	PUBLIC	IN HONOR OF DARYL MESSINGER.	5,000.
Total from continuation sheets				185,746.

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
GRADY HEALTH FOUNDATION 191 PEACHTREE STREET, SUITE 820 ATLANTA, GA 30303	N/A	PUBLIC	10TH ANNUAL WHITE COAT GRADY GALA.	10,000.
JEWISH FEDERATION OF GREATER ATLANTA 1440 SPRING ST.,NW ATLANTA, GA 30309	N/A	PUBLIC	ANNUAL CONTRIBUTION.	15,000.
AMERICAN JEWISH COMMITTEE 6 PIEDMONT CENTER, SUITE 510 ATLANTA, GA 30305	N/A	PUBLIC	2020 CAPITAL CAMPAIGN IN HONOR OF MELANIE AND ALLAN NELKIN.	15,000.
JEWISH HOME LIFE COMMUNITIES 3150 HOWELL MILL ROAD, N.W. ATLANTA, GA 30327	N/A	PUBLIC	2020 ANNUAL CONTRIBUTION.	25,000.
JEWISH HOME LIFE COMMUNITIES 3150 HOWELL MILL ROAD, N.W. ATLANTA, GA 30327	N/A	PUBLIC	ENDOWMENT CONTRIBUTION.	17,000.
JEWISH FEDERATION OF GREATER ATLANTA 1440 SPRING ST.,NW ATLANTA, GA 30309	N/A	PUBLIC	ANNUAL CONTRIBUTION.	5,000.
PIEDMONT HOSPITAL FOUNDATION 2001 PEACHTREE ROAD, SUITE 400 ATLANTA, GA 30309	N/A	PUBLIC	ANNUAL CONTRIBUTION.	5,000.
JEWISH FAMILY & CAREER SERVICES 4549 CHAMBLEE DUNWOODY ROAD ATLANTA, GA 30338	N/A	PUBLIC	ANNUAL CONTRIBUTION.	1,000.
COMMUNITY FOUNDATION FOR GREATER ATLANTA 191 PEACHTREE STREET, SUITE 1000 ATLANTA, GA 30303	N/A	PUBLIC	GREATER GOOD AWARD.	5,000.
JEWISH HOME LIFE COMMUNITIES 3150 HOWELL MILL ROAD, N.W. ATLANTA, GA 30327	N/A	PUBLIC	2020 ENDOWMENT CONTRIBUTION.	5,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
BEIT TSHUVAH 8831 VENICE BOULEVARD LOS ANGELES, CA 90034	N/A	PUBLIC	ANNUAL CONTRIBUTION.	1,800.
TULANE UNIVERSITY 6823 ST. CHARLES AVENUE NEW ORLEANS, LA 70118	N/A	PUBLIC	ANNUAL CONTRIBUTION.	16,946.
Total from continuation sheets				

Part XVI-A Analysis of Income-Producing Activities

Table with 5 main columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include Program service revenue, Membership dues, Interest on savings, Dividends, Net rental income, Other investment income, Gain or (loss) from sales, and Subtotal.

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Table with 2 columns: 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.

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

- 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
a Transfers from the reporting foundation to a noncharitable exempt organization of:
(1) Cash
(2) Other assets
b Other transactions:
(1) Sales of assets to a noncharitable exempt organization
(2) Purchases of assets from a noncharitable exempt organization
(3) Rental of facilities, equipment, or other assets
(4) Reimbursement arrangements
(5) Loans or loan guarantees
(6) Performance of services or membership or fundraising solicitations
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation.

Table with 4 columns: (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Row 1 contains 'N/A' in column (c).

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? [] Yes [X] No

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Row 1 contains 'N/A' in column (a).

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.
Signature of officer or trustee: [Handwritten Signature] Date: 4/24/2020 Title: TRUSTEE
May the IRS discuss this return with the preparer shown below? See instr [X] Yes [] No

Paid Preparer Use Only Print/Type preparer's name: STEPHEN M. BERMAN Preparer's signature: [Handwritten Signature] Date: 4/21/2020 Check [] if self-employed PTIN: P00031703
Firm's name: STEPHEN M. BERMAN & ASSOCIATES, LLC Firm's EIN: 58-1540139
Firm's address: 3445 PEACHTREE ROAD, NE SUITE 1150 ATLANTA, GA 30326 Phone no.: (404) 262-2181

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Name of the organization

Employer identification number

THE BERMAN CHARITABLE TRUST

58-6195209

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

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 totaling \$5,000 or more during the year. . . . ▶ \$ _____

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).

Name of organization

Employer identification number

THE BERMAN CHARITABLE TRUST

58-6195209

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	STEPHEN M. BERMAN 2660 PEACHTREE RD., N.W. , UNIT 20A ATLANTA, GA 30305	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	CALMA A. BERMAN 2660 PEACHTREE RD., N.W. , UNIT 20A ATLANTA, GA 30305	\$ 99,899.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

Employer identification number

THE BERMAN CHARITABLE TRUST

58-6195209

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	569 SHS ISHARES TR. RUSSELL 1000 GROWTH	\$ 99,899.	12/24/19

Name of organization

Employer identification number

THE BERMAN CHARITABLE TRUST

58-6195209

Part III 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 Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
SUNTRUST BANK, ATLANTA	90.	90.	
TOTAL TO PART I, LINE 3	90.	90.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
PERSHING ADVISOR SOLUTIONS - NOMINEE -	86,088.	1,818.	84,270.	84,270.	
PERSHING ADVISOR SOLUTIONS - NOMINEE - INTEREST	131.	0.	131.	131.	
TO PART I, LINE 4	86,219.	1,818.	84,401.	84,401.	

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ORDINARY INCOME - ARROWPOINT INCOME OPP. FUND, LTD	27,143.	27,143.	
TOTAL TO FORM 990-PF, PART I, LINE 11	27,143.	27,143.	

FORM 990-PF	LEGAL FEES			STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	5,535.	0.		5,535.
TO FM 990-PF, PG 1, LN 16A	5,535.	0.		5,535.

FORM 990-PF	ACCOUNTING FEES			STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	11,000.	8,250.		2,750.
TO FORM 990-PF, PG 1, LN 16B	11,000.	8,250.		2,750.

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	16,000.	16,000.		0.
TO FORM 990-PF, PG 1, LN 16C	16,000.	16,000.		0.

FORM 990-PF	TAXES			STATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX	3,567.	3,567.		0.
TO FORM 990-PF, PG 1, LN 18	3,567.	3,567.		0.

FORM 990-PF	OTHER EXPENSES			STATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK FEES	70.	0.		70.
MARGIN INTEREST	29.	29.		0.
TO FORM 990-PF, PG 1, LN 23	99.	29.		70.

FORM 990-PF	CORPORATE STOCK		STATEMENT 9
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
SEE STATEMENT A MUTUAL FUNDS	717,039.	667,634.	
SEE STATEMENT B EXCHANGE TRADE PRODUCTS	2,197,230.	2,235,136.	
TOTAL TO FORM 990-PF, PART II, LINE 10B	2,914,269.	2,902,770.	

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
ARROWPOINT INCOME OPPORTUNITY FUND, LTD.	COST	500,000.	363,050.
TOTAL TO FORM 990-PF, PART II, LINE 13		500,000.	363,050.

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 11

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
STEPHEN M. BERMAN 2660 PEACHTREE RD., N.W. UNIT 20A ATLANTA, GA 30305	TRUSTEE 1.00	0.	0.	0.
CALMA A. BERMAN 2660 PEACHTREE RD., N.W. UNIT 20A ATLANTA, GA 30305	TRUSTEE 1.00	0.	0.	0.
JUSTIN F. BERMAN 2660 PEACHTREE RD., N.W. UNIT 20A ATLANTA, GA 30305	TRUSTEE 1.00	0.	0.	0.
ALYZA B. MILRAD 2660 PEACHTREE RD., N.W. UNIT 20A ATLANTA, GA 30305	TRUSTEE 0.50	0.	0.	0.
LILA B. FAIR 2660 PEACHTREE RD., N.W. UNIT 20A ATLANTA, GA 30305	TRUSTEE 0.50	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

FORM 990-PF

PART XV - LINE 1A
LIST OF FOUNDATION MANAGERS

STATEMENT 12

NAME OF MANAGER

STEPHEN M. BERMAN
CALMA A. BERMAN