Form **990-PF** 

**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

		renue Service Go to www index year beginning JUL	1, 2019	ructions and t		JUN 30, 2020	
-		foundation	1, 2017	, allu ci	iuiiig	A Employer identification	
IVAI	116 01	Touridation				A Cimployer identification	i ildiildei
G	AL	LANT FAMILY FOUNDATION,	INC.			13-3039604	
_		nd street (or P O box number if mail is not delivered to street			Room/suite	B Telephone number	
_P	.0	BOX 1574				860-546-88	318
City	ort	own, state or province, country, and ZIP or foreign p	ostal code			C If exemption application is g	pending, check here
_ <u>C</u>	AR	Y, NC 27512		45.45.41			
G C	heck	all that apply Initial return	Initial return of a fo	ormer public c	harity	D 1 Foreign organization:	s, check here
		Final return	Amended return			2 5	action the RERA took
		Address change	Name change			2 Foreign organizations me check here and attach co	omputation
H C	_	type of organization X Section 501(c)(3) ex			V V	E If private foundation sta	
<u> </u>		γ=	Other taxable private founda		- 09	under section 507(b)(1	)(A), check here
		irket value of all assets at end of year   J   Accounti	•	Accre	ıal	F If the foundation is in a	
(II)		Part II, col. (c), line 16) Of Of Of Of Of Of Of Of	ther (specify)	ile \		under section 507(b)(1	)(B), check here
_	rt I					(a) Advisted and	(d) Disbursements
	1	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 inv		(c) Adjusted net income	for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received				. N/A	(cash basis only)
	2	Check X if the foundation is not required to attach Sch. B		***************************************	<del></del>	9 2aurum unumm	minimum : a mort
	3	Interest on savings and temporary cash investments	230.				STATEMENT 1
	4	Dividends and interest from securities	104,269.			,	STATEMENT 2
	5a	Gross rents	149,148.				STATEMENT 3
	b	Net rental income or (loss) 149,148.		,			
ō	6a	Net gain or (loss) from sale of assets not on line 10	-53,501.	, ,	~~~~~	111 (111)	April 1970
ă Dua	b	Gross sales price for all assets on line 6a 275,286.	The source in the contract of			RECE	Company of the Company
Revenue	7	Capital gain net income (from Part IV, line 2)		· · · · · · · · · · · · · · · · · · ·	0.	12	S S
_	8	Net short-term capital gain	, , , , , , , , , , , , , , , , , , ,			JAN 🚧	2021 9
	9	Income modifications Gross sales less returns				<u>a</u>	<u> </u>
		and allowances				OGDE	N UT
		Less Cost of goods sold			~~~~~	L	
	11	Gross profit or (loss) Other income	836.		0.		STATEMENT 4
	12	Total Add lines 1 through 11	200,982.		0.		OTHER PROPERTY A
	13	Compensation of officers, directors, trustees, etc	48,000.		4,800.		43,200.
	14	Other employee salaries and wages			<del>- /</del>		
	15	Pension plans, employee benefits	3,513.		0.		3,513.
ses	16a	Legal fees					
ben	b	Accounting fees					
Ä	C	Other professional fees STMT 5	228.		0.		228.
ţį		Interest					
itra	18	Taxes					
i i	19	Depreciation and depletion					
mb/	20	Occupancy Traval conferences and meetings					
ρį	21 22	Travel, conferences, and meetings					
g ar	23	Printing and publications Other expenses STMT 6	1,996.		0.		1,996.
Operating and Administrative Expenses	24	Total operating and administrative	1,550.		<u> </u>		1,330.
Sera		expenses Add lines 13 through 23	53,737.		4,800.		48,937.
ō	25	Contributions, gifts, grants paid	327,799.				327,799.
		Total expenses and disbursements	,				1
_		Add lines 24 and 25	381,536.		4,800.		376,736.
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	-180,554.				
	b	Net investment income (if negative, enter -0-)			0.		
	C	Adjusted net income (if negative, enter -0-)				N/A	

		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	1,431,871.	1,610,981.	1,610,981.
	3	Accounts receivable	,		(m. m. m. 12 (h.a. "ala Milliant") (m. 14 - Maiorant Brading (h.
		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 for enable	The state of the s	to "timed to b's on	Paramer of history
		Less allowance for doubtful accounts			
ets	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
•	į.	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 7	2,841,821.	3,240,541.	3,240,541. 613,706.
	C	Investments - corporate bonds STMT 8	803,162.	613,706.	613,706.
	11	Investments - land buildings and equipment basis	Jan Lethat Free Las		
		Less accumulated depreciation			
	1	Investments - mortgage loans	146 220	157 600	157 600
	13	Investments - other STMT 9	146,239.	157,600.	157,600.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	1	Other assets (describe	 		
	16	Total assets (to be completed by all filers - see the	E 222 002	E (22 020	F (22 020
_	4.3	instructions. Also, see page 1, item I)	5,223,093.	3,022,828.	5,622,828.
	17	the state of the s			
	18	Grants payable			<b></b>
ţį	19 20	Deferred revenue			<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
abilities	21	Loans from officers, directors, trustees, and other disqualified persons			
La	22	Mortgages and other notes payable Other liabilities (describe ► STATEMENT 10)	1 612 257	2,192,546.	<del>шинин шинин шинин шинин шин шин шин шин </del>
	22	Other habilities (describe DIAILITIENT 10)	1,012,237.	2,172,540.	
	23	Total liabilities (add lines 17 through 22)	1,612,257.	2,192,546.	
		Foundations that follow FASB ASC 958, check here	1,012,207.	2/132/310.	
S		and complete lines 24, 25, 29, and 30			
Fund Balances	24	Net assets without donor restrictions			
흥	25	Net assets with donor restrictions			<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
8		Foundations that do not follow FASB ASC 958, check here ► X			
Š		and complete lines 26 through 30			
P	26	Capital stock, trust principal, or current funds	3,400,345.	3,400,345.	
şţ	27	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	···
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds	210,491.	29,937.	
et A	29	Total net assets or fund balances	3,610,836.	3,430,282.	
ž					
	30	Total liabilities and net assets/fund balances	5,223,093.	5,622,828.	
		Analysis of Changes in Net Assets or Fund B			
	art	Analysis of Orlanges in Net Assets of Fund E			
1	Tota	l net assets or fund balances at beginning of year - Part II, column (a), line	29		
	(mus	st agree with end-of-year figure reported on prior year's return)		1	3,610,836.
2	Ente	r amount from Part I, line 27a		2	3,610,836. -180,554.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	3,430,282.
		eases not included in line 2 (itemize)		5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 29	6	3,430,282.
					Form <b>990-PF</b> (2019)

GALLANT FAMILY FOUNDATION, INC. 13-3039604 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 
and enter "N/A" on line 1 \_\_\_\_ (attach copy of letter if necessary-see instructions) Date of ruling or determination letter b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► X and enter 1% 0. 1 of Part I, line 27b 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-) 3 4 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments 1,901. a 2019 estimated tax payments and 2018 overpayment credited to 2019 6a 0. b Exempt foreign organizations - tax withheld at source 6b Ō. c Tax paid with application for extension of time to file (Form 8868): 6с d Backup withholding erroneously withheld 6d 1,901. 7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ if Form 2220 is attached 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 1,901 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 1,901. Refunded ▶ 11 Enter the amount of line 10 to be Credited to 2020 estimated tax 11 Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a 1b b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If 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 Х c Did the foundation file Form 1120-POL for this year? 10 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year 0 • (2) On foundation managers ▶ \$ (1) On the foundation ► \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$ 0. 2 Х 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4h Х 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 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 that conflict with the state law Х 6 remain in the governing instrument? X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV 7 8a Enter the states to which the foundation reports or with which it is registered. See instructions. 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) Х 8b of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 Form 990-PF (2019)

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Pa	rt 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		Х					
12	2 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		<u> </u>	<u></u>					
14	The books are in care of ► GALLANT FAMILY FOUNDATION  Telephone no ►860-	546-8	818						
• •		27512							
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	I/A	L					
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	1.03	X					
	See the instructions for exceptions and filling requirements for FinCEN Form 114. If "Yes," enter the name of the	10		<u> </u>					
	foreign country								
Pa	ort VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<u>. F </u>	1					
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No					
1a	During the year, did the foundation (either directly or indirectly)								
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	,							
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)								
	a disqualified person?	,							
	(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? X Yes 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)?	,							
	(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	1b	1	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?	10		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))								
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	İ							
	6d and 6e) for tax year(s) beginning before 2019?	,							
	If "Yes," list the years 🕨								
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect								
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach								
	statement - see instructions ) N/A	_2b		<u> </u>					
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here								
	<b>&gt;</b>								
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time								
	during the year? $oxed{\Box}$ Yes $oxed{oxed{X}}$ No	,							
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after	ŀ							
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose								
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			}					
	Schedule C, to determine if the foundation had excess business holdings in 2019 ) N/A	3b	ļ						
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<u>4a</u>	<u> </u>	X					
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	<u>L</u>	<u> X</u>					
		Form <b>99</b>	0-PF	(2019)					

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Part VII-B   Statements Regarding Activities for Which I	form 4/20 May Be F	<b>lequirea</b> (contin	ued)			
,5a During the year, did the foundation pay or incur any amount to				Y	es No	_
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es X No			
(2) Influence the outcome of any specific public election (see section 4955), or	or to carry on, directly or indire				1	
any voter registration drive?						
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y <sub>€</sub>	es X No		1	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section					
4945(d)(4)(A)? See instructions			es X No		1	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f		(TZ)			
the prevention of cruelty to children or animals?			es X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni		n Regulations	N7 / 70	_	1	
section 53 4945 or in a current notice regarding disaster assistance? See instr			N/A	5b		-
Organizations relying on a current notice regarding disaster assistance, check						
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		/-				
expenditure responsibility for the grant?	IA	/A Ye	es L 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	nav promiume on					
a personal benefit contract?	pay premiums on		es X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	nersonal henefit contract?		53 21 140	6b	X	
If "Yes" to 6b, file Form 8870	ocisonal benefit contract.				<del>                                     </del>	-
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y	es X No	ĺ	1	
b If "Yes," did the foundation receive any proceeds or have any net income attribi			N/A	7b		-
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$		r				_
excess parachute payment(s) during the year?	,		es X No			
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	у			
Paid Employees, and Contractors	· 					_
List all officers, directors, trustees, and foundation managers and t		14.0	T (-1)			_
(a) 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 ount, other	
	to position	enter -0-)	compensation	all	owances	_
STANLEY GALLANT	CHAIRMAN OF B	DARD				
C/O 80 MAIDEN LANE, ROOM 2204	0.50				0	
NY, NY 10038	0.50	0.	0.	ļ	0.	,
SUSAN GALLANT C/O 80 MAIDEN LANE, ROOM 2204	SECRETARY & T	REASURER				
NY, NY 10038	2.00	0.	0.		0.	
ROBIN GALLANT	PRESIDENT & E		DIRE .			-
C/O P.O. BOX 1574	i kubibuni di b	MECOIIVE	DIKE			
CARY, NC 27512	20.00	48,000.	0.		0.	
21117 110 27312	20.00	10,000.		<del>                                     </del>		-
	1					
	1					
Compensation of five highest-paid employees (other than those inc	cluded 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	(c) Compensation	(d) Contributions to employee benefit plans	(e)	Expense ount, other	
	devoted to position	(C) Compensation	and deferred compensation	all	owances	
N/A						
	0.00	0.	0.	ļ	0.	,
			•			
				<u> </u>		_
						_
and the second s	1					
				ļ		_
	1	:				
	<u></u>	<u> </u>	<u> </u>	<u> </u>		,
Total number of other employees paid over \$50,000			<u>▶ i</u>		C	J

3 Five highest-paid independent contractors for professional services. If none, en	nter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
N/A		
		0.
THE STATE OF THE S		
	<del></del>	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant st number of organizations and other beneficiaries served, conferences convened, research papers.		Expenses
1 SEE ATTACHED		
		0.
2		
2		
3		
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
4		•
Part IX-B Summary of Program-Related Investments		····
Describe the two largest program-related investments made by the foundation during the tax year	r on lines 1 and 2	Amount
1 <u>N/A</u>		
		0.
2		
All other program-related investments. See instructions		
3		
, , , , , , , , , , , , , , , , , , , ,		
		· ·
Total. Add lines 1 through 3	<b>•</b>	0.

Part X Minimum In	vestment Return (All domestic fou	ndations must complete this part. Foreign	foundations, s	ee instructions)
1 Fair market value of assets n	ot used (or held for use) directly in carrying o	out charitable, etc., purposes		
a Average monthly fair market		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1a	5,159,551
b Average of monthly cash bal			1b	185,147
c Fair market value of all other			10	1,800,767
d Total (add lines 1a, b, and c	)		10	7,145,465
·	, age or other factors reported on lines 1a and			· · · · · · · · · · · · · · · · · · ·
1c (attach detailed explanation	•	1e	0.	
2 Acquisition indebtedness ap	•		2	0
3 Subtract line 2 from line 1d	'		3	7,145,465
4 Cash deemed held for charit	able activities Enter 1 1/2% of line 3 (for grea	ater amount, see instructions)	4	107,182
	use assets Subtract line 4 from line 3 Enter		5	7,038,283
6 Minimum investment return			6	351,914
	e Amount (see instructions) (Section 4 ons, check here	1942(j)(3) and (j)(5) private operating foundationate this part )	ns and certain	
1 Minimum investment return			1	351,914
2a Tax on investment income for	or 2019 from Part VI, line 5	2a		<u> </u>
	loes not include the tax from Part VI )	2b		
c Add lines 2a and 2b	,	<u> </u>	2c	0
3 Distributable amount before	adjustments Subtract line 2c from line 1		3	351,914
4 Recoveries of amounts treat	ed as qualifying distributions		4	0
5 Add lines 3 and 4			5	351,914
6 Deduction from distributable	amount (see instructions)		6	0
7 Distributable amount as adj	usted Subtract line 6 from line 5. Enter here	and on Part XIII, line 1	7	351,914
	vistributions (see instructions)	10110	<b></b>	
· · · · · · · · · · · · · · · · · · ·	ministrative expenses) to accomplish charitab	ole, etc., purposes	1 1	276 726
	ts, etc - total from Part I, column (d), line 26		1a	376,736
b Program-related investment	s - total from Part IX-B		1b	0
	sets used (or held for use) directly in carrying	out charitable, etc., purposes	2	
	fic charitable projects that satisfy the			
a Suitability test (prior IRS app	proval required)		3a	
<b>b</b> Cash distribution test (attact	· ·		3b	0=
4 Qualifying distributions Ad	d lines 1a through 3b. Enter here and on Part	t V, line 8, and Part XIII, line 4	4	376,736
5 Foundations that qualify und	ler section 4940(e) for the reduced rate of tax	on net investment		
income Enter 1% of Part I, I	ine 27b		5	0
· · · ·	itions Subtract line 5 from line 4		6	376,736
Note The amount on line 6 4940(e) reduction of		uent years when calculating whether the foundat	ion qualifies for	the section

## 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,	· · · · · · · · · · · · · · · · · · ·	<u>.</u>		
line 7	, , , , , , , , , , , , , , , , , , , ,			351,914.
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only		\	281,872.	44.32
<b>b</b> Total for prior years		0.		
3 Excess distributions carryover, if any, to 2019				r ranan canann
a From 2014				
<b>b</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 ►\$ 376, 736.				
· · · · · · · · · · · · · · · · · · ·			281,872.	
a Applied to 2018, but not more than line 2a			201,072.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		<b>U</b> •	,	
c Treated as distributions out of corpus	0			
(Election required - see instructions)	0.			04.064
d Applied to 2019 distributable amount				94,864.
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				
2 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				257,050.
7 Amounts treated as distributions out of				20,70000
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
	0.			
may be required - see instructions)	0.	1 11 20		
8 Excess distributions carryover from 2014	0.			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020	٥			
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 XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelated	business income		by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue	code	Amount	code	Amount	ionction income
a					
D	_				
<u> </u>	_		<del></del>		
0					
£			<del></del>		
g Fees and contracts from government agencies	-				<del></del>
2 Membership dues and assessments				-	
3 Interest on savings and temporary cash					·
investments			14	230.	
4 Dividends and interest from securities			14	104,269.	,
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property			16	149,148.	
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	836.	
8 Gain or (loss) from sales of assets other					
than inventory			14		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					·
11 Other revenue					
a	_   _				
b	_				
C					
d	_				
e	_	<del></del>			
12 Subtotal Add columns (b), (d), and (e)		. (	0.	200,982.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	200,982.
(See worksheet in line 13 instructions to verify calculations	)				

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

Line No	the foundation's exempt purposes (other than by providing funds for such purposes)							
-								

	990-PF (2	019) GALLA	MI LAMIT	Y FOUND	ATION, INC.		13-3	039604	Pa	ge 13
Par	t XVII			nsfers to a	nd Transactions a	nd Relations	hips With None	charitable	•	
		Exempt Organ					<del></del>			
				•	ig with any other organizati		tion 501(c)		Yes	No
					g to political organizations?	•				ļ
	a Transfers from the reporting foundation to a noncharitable exempt organization of									
	(1) Cash							1a(1)		X
(2) Other assets										Х
	Other tran							16(1)		Х
	•									
		nases of assets from a no		torganization				1b(2)		X
		I of facilities, equipment,						1b(3)		X
		bursement arrangements	1					1b(4)		X
	. ,	s or loan guarantees	mbarahin ar fundr					1b(5)		X
		rmance of services or me		-				1b(6)	· -	X
		f facilities, equipment, ma	-		ipioyees edule Column (b) should al	wow about the form	market value of the so	1 <u>c</u>		
					ed less than fair market vali				seis,	
		) the value of the goods,			eu 1655 (ilali iali filatket vali	ue in any transaction	i or snamy arrangen	ient, snow in		
(a) Lin		(b) Amount involved			e exempt organization	(d) Descriptio	n of transfers, transaction	s and shanno a	rangeme	nts
<del>``</del>				N/A		(c) company		o, and one g a		
			<del></del>							
				•						
			1	•						
					· · · · · · · · · · · · · · · · · · ·					
									·	
				·						
	-				_					
		******								
	·		L				· · · · · · · · · · · · · · · · · · ·			
					or more tax-exempt organ	izations described				_
		501(c) (other than section		section 527?				Yes	LX	] No
<u>b</u>	if "Yes," co	omplete the following sch			1 (1) =	T		<del></del>		
		(a) Name of org	ganization		(b) Type of organization		(c) Description of rela	itionship		
		N/A		<del></del>						
	Under	penalties of penury, I declare	that I have examined t	this return, including	g accompanying schedules and	I statements, and to the	best of my knowledge			
Sig	and be	elief, it is true correct, and cor	mplete Declaration of	preparer (other tha	n taxpayer) is based on all inform	nation of which prepare	r has any knowledge	May the IRS return with the shown below	discuss t e prepare	his er
Her	e	W. Sta OVa	121 #		1/1/2021/	EXECU		shown below	7 See ins	str No
	Sign	ature of officer or trustee			) Date	Title	IIVE DINE	121 168	٠ ـــــ	1 140
		Print/Type preparer's na		Prepared's s		Date	Check If F	PTIN		
				+ $         -$			self- employed			
Pai	d	STEVE ADEL	SBERG	$\parallel ///$	1/		· · ·	P00214	432	
	parer	Firm's name ► S A		& GO/	1/		Firm's EIN ▶ 11			
Use	Only			V						
Firm's address ► 280 NORTHERN BLVD.										

GREAT NECK, NY 11021

FORM 990-PF INTERE	ST ON SAVING	GS AND	TEMPOR	ARY	CASH	IN	VESTMENTS	STA	ATEMENT	1
SOURCE		REVENUE NET IN			(B) VESTMENT COME	(C) ADJUSTED NET INCOME		Ξ		
K-1 356-358 SJP LLC K-1 SUBURBAN PROPAN LP						0.				
SIGNATURE - CD TOTAL TO PART I, LINE 3			230.			0.				
FORM 990-PF	DIVIDENDS	AND I	NTEREST	FRO	OM SEC	CUR	 ITIES	STA	ATEMENT	2
SOURCE	GROSS AMOUNT	GA	TITAL INS DENDS		(A) EVENUI R BOOI		(B) NET INVES MENT INCO		(C) ADJUSTI NET INCO	
MORGAN STANLEY - BROKERAGE	104,269.		0.	-	104,26	59.		0.		
TO PART I, LINE 4	104,269.		0.		104,26	59.	0			
FORM 990-PF		RENTA	L INCOM	E				STA	ATEMENT	3
KIND AND LOCATION O	F PROPERTY						ACTIVITY NUMBER	REN	GROSS	OME
K-1 356-358 SJP LLC EIN 20-1311295						1		149,148		18.
TOTAL TO FORM 990-P	F, PART I,	LINE 5	A						149,14	18.

FORM 990-PF	OTHER	INCOME		STATEMENT	4	
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME			
K-1 SUBURBAN PROPANE PARTNERS	LP -	836.	0	•		
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	836.	0	•	-	
FORM 990-PF C	THER PROFE	SSIONAL FEES		STATEMENT	5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME				
PROFESSIONAL FEES	228	0	•	228.		
TO FORM 990-PF, PG 1, LN 16C	228	0	0.		228.	
FORM 990-PF	OTHER	EXPENSES		STATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME				
OFFICE EXPENSE	1,996	. 0	•	1,99	96.	
TO FORM 990-PF, PG 1, LN 23	1,996	0	·	1,99	96.	
FORM 990-PF	CORPORA	TE STOCK		STATEMENT	7	
DESCRIPTION		В	OOK VALUE	FAIR MARKET	נ	
MORGAN STANLEY BROKERAGE		<del></del>	3,240,541.	3,240,54	11.	
TOTAL TO FORM 990-PF, PART II	LINE 10E	<del></del>	3,240,541.	CHARITABLE PURPOSES  228.  228.  228.  STATEMENT 6  (D) CHARITABLE PURPOSES  1,996.  1,996.  1,996.  STATEMENT 7  FAIR MARKET		

FORM 990-PF	CORPORATE BONDS		STATEMENT			
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE			
MORGAN STANLEY BROKERAGE	•	613,706.	613,706			
TOTAL TO FORM 990-PF, PART II, L	INE 10C	613,706.	613,706.			
FORM 990-PF O	THER INVESTMENTS		STATEMENT			
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE			
K-1 356-356 SJP LLC K-1 SUBURBAN PROPANE PARTNERS LP	COST COST	155,833. 1,767.	155,833 1,767			
TOTAL TO FORM 990-PF, PART II, L	INE 13	157,600.	157,600			
FORM 990-PF O	THER LIABILITIES		STATEMENT 1			
DESCRIPTION		BOY AMOUNT	EOY AMOUNT			
UNREALIZED GAIN FROM BROKERAGE SECURITIES	` ·	1,612,257.	2,192,546			
TOTAL TO FORM 990-PF, PART II, L	INE 22	1,612,257.	2,192,546			

# Return of Certain Excise Taxes Under Chapters 41 and 42 of the Internal Revenue Code

(Sections 170(f)(10), 664(c)(2), 4911, 4912, 4941, 4942, 4943, 4944, 4945, 4955, 4958, 4959, 4960,

Department of the Treasury Internal Revenue Service

4965, 4966, 4967, and 4968) ► Go to www.irs.gov/Form4720 for instructions and the latest information.

For calendar ye	ar 2019 or other tax year beginning	JUL 1 , 2019, and	ending JUN 30	,2020	
Name of organi	zation or entity			Employer	identification number
GALLANT	FAMILY FOUNDATIO	N, INC.		13-3	039604
Number, street,	, and room or suite no (or P O box if m	all is not delivered to street address)		Check box	k for type of annual return
P.O. BC	X 1574			Ford	n 990 🔲 Form 990-EZ
	ate or province, country, and ZIP or fore	eign postal code		X Forr	n 990-PF Other
CARY, N	IC 27512			Forr	n 5227
					Yes No
	nization a foreign private foundation wit				X
	tive action been taken on any taxable ev				
	ach a detailed description and documen e correction <b>&gt;</b> \$			-	
***************************************	Taxes on Organization (Sect		cted acts or transactions), attach an e		
	4965(a)(1), 4966(a)(1), and 4968(a))	170(1)(10), 004(0)(2), 4311(a), 43	512(a), 4342(a), 4343(a), 4344(a)(1)	4545(4)(1	j, 4900(a)( 1), 4909, 4900(a),
	indistributed income - Schedule B, line 4	1	·	1	
	xcess business holdings - Schedule C, I			2	
	nvestments that jeopardize charitable pu			3	
4 Tax on ta	axable expenditures - Schedule E, Part I	, column (g)		4	
5 Tax on p	olitical expenditures - Schedule F, Part I	l, column (e)		5	
6 Tax on e	xcess lobbying expenditures - Schedule	G, line 4		6	
7 Tax on d	isqualifying lobbying expenditures - Scl	nedule H, Part I, column (e)		7	
8 Tax on p	remiums paid on personal benefit contr	racts		8	
	eing a party to prohibited tax shelter tra	,	(h)	9	
	axable distributions - Schedule K, Part I,	• •		10	
	charitable remainder trust's unrelated b			11	<u></u>
	allure to meet the requirements of section		2	12	
	xcess executive compensation - Schedu			13	
	et investment income of private college:	s and universities - Schedule U		14	
Part II-A	Id lines 1 - 14) Taxes on Managers Self	-Dealers, Disqualified Per	sone Donore Donor Adv	isors a	and Related Persons
Turk		(a)(2), 4945(a)(2), 4955(a)(2), 4958			and Neiated Fersons
(a) Na	me and address of person subject to tax				payer identification number
a			····	+ ` `	· · · · · · · · · · · · · · · · · · ·
b					
C					
	(c) Tax on self-dealing - Schedule A, Part II, col. (d), and Part III, col. (d)	(d) Tax on investments that jeopardize charitable purpose - Schedule D, Part II, col. (d)	(e) Tax on taxable expenditures - Schedule E, Part II, col. (d)		on political expenditures - hedule F, Part II, col. (d)
<u>a</u>		,			
b					
<u>C</u>					
<u>Total</u>	(-) T	(h) Tax on excess benefit	(i) Tax on being a party to prohibite	1 43 ==	
	(g) Tax on disqualifying lobbying expenditures - Sch H, Part II, col (d)	transactions - Schedule I, Part II, col (d), and Part III, col (d)	tax shelter transactions - Schedule .  Part II, col (d)	(1) '0	x on taxable distributions - nedule K, Part II, col. (d)
<u>a</u>					
b					
C T-4-1				-	· · · · · · · · · · · · · · · · · · ·
Total	(k) Tax on prohibited benefits - Sch L, Part II, col (d), and Part III, col (d)		<u> </u>	(I) Tota	ıl - Add cols (c) through (k)
	(4)			-	
<u>a</u> b				<del></del>	<del></del> -
C				1	
Total					<del></del>
	<del></del>				

Form 4720	(2019)	GALLANT FAMILY FO	UNDATIO	N, INC.		13-3039604	Page 2
Part II	B Sumn	nary of Taxes (See Tax Paym	ents in the ins	tructions)			<del></del> _
1 Enter t	the taxes listed in	Part II-A, column (I), that apply to mana	agers, self-dealers	, disqualified			
persor	ns, donors, dono	r advisors, and related persons who sign	this form If all s	ign, enter the			
total a	mount from Parl	II-A, column (I)				1	
2 Total 1	tax. Add Part I, I	ne 15, and Part II-B, line 1				2	
3 Total p	payments includi	ng amount paid with Form 8868 (see ins	tructions)			3	
4 Tax du	u <b>e</b> . If line 2 is lar	ger than line 3, enter amount owed (see	instructions)		<b>&gt;</b>	4	0.
5 Overp	ayment If line 2	is smaller than line 3, enter the difference			<u> </u>	5	
D. A.		SCHEDULE A - I		on Self-Dea	aling (Section 4941)		
Part I		Self-Dealing and Tax Com	putation				
(a) Act	(b) Date of act			(c) Description	n of act		
1					<del> · </del>		
2					17		
3	***************************************					·	
5							
	Ougetion numbe	r from Form 990-PF, Part VII-B, or	1	•	(6) Instead tow on ealf	(g) Tax on foundation r	managere
(u)		art VI-B, applicable to the act	(e) Amount i	nvolved in act	(f) Initial tax on self- dealer (10% of col. (e))	(if applicable) (lesser of	\$20,000
						or 5% of col (e	<u>)) </u>
		D-2100					
Part II	Summa	ry of Tax Liability of Self-D	ealers and F	Proration of	Payments		
1	***************************************	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		(b) Act no from	(c) Tax from Part I, col (f),	(d) Self-dealer's to	
	(a)	Names of self-dealers liable for tax		Part I, col (a)	or prorated amount	liabilitý (add amounts (see instruction	
	***					(occ motroction	
		,	ŀ		, mar		
			T T			_	
					·	_	
			Ī				
			Ţ				,
			Ī				
					P # 33333333333333333333333333333333333		
			Ī				
Part III	: Summa	ry of Tax Liability of Found	ation Manag	gers and Pro	oration of Payments		4 -4 -
	(a) Name	es of foundation managers liable for tax		(b) Act no from	(c) Tax from Part I, col (g),	(d) Manager's total ta (add amounts in co	x liability
	(-,			Part I, col (a)	or prorated amount	(see instruction	18)
			1				
			}-				
						_	
		00115011150			-		
		SCHEDULE B - Initia			Income (Section 4942)	<del>   </del>	
		e for years before 2018 (from Form 990-		XIII, line 6d)		1	
		e for 2018 (from Form 990-PF for 2019,				2	
		ncome at end of current tax year beginnii	ng in 2019 and su	bject to tax			
		(add lines 1 and 2)				3	
4 1 <u>ax</u>	- EIILET 3U% 0T I	ne 3 here and on Part I, line 1				4 Form 4	<b>720</b> (2019)
						FUIIII 4	1 EU (2013)

		SCHEDULE C - Initial Tax	on Ex	cess Busines	s Holdii	<b>1gs</b> (Section 4943)		
Business	Holdings and	Computation of Tax	•					
	-	s in more than one business enterprise,	attach a	separate schedule fo	or each ente	rprise Refer to the in	struction	ons for
	before making any e							
Name and add	dress of business ent	erprise						
Employer iden	ntification number					<b></b>		<u></u>
Form of enter	prise (corporation, pa	artnership, trust, joint venture, sole prop	<u>rietorshi</u>			<u> </u>	- 1	
						(c) Nonvoting stock (capital interest)		
1 Foundation	on holdings in busine	ess enterprise	1					
2 Permitted	d holdings in busines	s enterprise	2					
	excess holdings in bu		3					
	excess holdings dispe other value of excess							
	o section 4943 tax (at excess holdings in bu		4					
line 3 mir		siliess emerprise -	5					
6 Tax - Ent	6 Tax - Enter 10% of line 5							
	- Add amounts on lir enter total here and or	ne 6, columns (a), (b), n Part I, line 2	7					
		D - Initial Taxes on Investr	nents	That Jeopard	lize Cha	ritable Purpos	<b>e</b> (Sed	ction 4944)
Part I	Investments	and Tax Computation		,,,,,,,				
(a) Investment number	(b) Date of investment	(c) Description of investment		(d) Amount o		(e) Initial tax on foundation (10% of col. (d))		(f) Initial tax on foundation managers (if applicable) - (lesser of \$10,000 or 10% of col (d))
1								
2 3								
4								
5						· · · · · · · · · · · · · · · · · · ·		
Total - Colum	in (e). Enter here and	on Part I, line 3						
Total - Colum	in (f) Enter total (or p	prorated amount) here and in Part II, coli	umn (с),	below				
Part II	Summary of	Tax Liability of Foundation	n Man	agers and Pro	oration (	of Payments_		
	(a) Names of for	undation managers liable for tax		(b) Investment no from Part I, col (a)		from Part I, col. (f), rorated amount	(d)	Manager's total tax liability add amounts in col. (c)) (see instructions)
							-	

Form **4720** (2019)

Page 4

### SCHEDULE E - Initial Taxes on Taxable Expenditures (Section 4945)

Part I	Expenditures a	nd Computat	tion of Tax	·		
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Name and address of	recipient		penditure and purposes nich made
_1						
2						
- 3 4	·					
5		· · · · · · · · · · · · · · · · · · ·	<del> </del>			
(f) Questio	on number from Form 990- 27, Part VI-B, applicable to		(g) Initial tax imposed on f (20% of col. (b))			undation managers (if applicable)- 100 or 5% of col (b))
Total - Colu	ımn (g) Enter here and on					
Part I, line 4						
below	mn (h) Enter total (or pro	·		<u> </u>		
Part II	Summary of Ta	ax Liability of	Foundation Managers a			(d) Manager's total tax liability
	(a) Names of fo	oundation managers	s liable for tax	Part I, col (a)	(c) Tax from Part I, col (h), or prorated amount	(add amounts in col. (c)) (see instructions)
<del></del>						
						_
	<u></u>				<u></u>	L
			- Initial Taxes on Politic	al Expendit	ures(Section 4955)	
Part I	Expenditures a		tion of Tax		(-)·	, n
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Description of political exp	enditure	(e) Initial tax imposed on organization or foundation (10% of col. (b))	(f) Initial tax imposed on managers (if applicable) (lesser of \$5,000 or 21/2% of col. (b))
1						· _ 1 · _ · n-16 · 1 · c - d 1 · · · · · · · · · · · · · · · · · ·
3			· · · · · · · · · · · · · · · · · · ·			
4						
5						
Total - Colu	ımn (e) Enter here and on	Part I, line 5				
Total - Colu			and in Part II, column (c), below zation Managers or Foundatio	n Managara an	d Providing of Poymouts	·
	<del></del>	s of organization ma	<del>-</del> <del>-</del>	(b) Item no fro	·	·
· · · · · · · · · · · · · · · · · · ·		tion managers liable		Part I, col (a		(add amounts in col. (c)) (see instructions)
						_
	100					
924091 12-0	4-19	<del></del>				Form <b>4720</b> (2019)

COLLEGIUE C	T		:4:4	
SCHEDULE G -	Tax on Excess	: Lobbyina Ex	benaitures :	(Section 4911)

1	Excess of grass roots expenditures over grass roots nontaxable amount (from Schedule C (Form 990 or 990-EZ), Part II-A, column (b), line 1h) (See the instructions before making an entry )	1	
2	Excess of lobbying expenditures over lobbying nontaxable amount (from Schedule C (Form 990 or 990-EZ), Part II-A, column (b), line 1i) (See the instructions before making an entry)	2	
3	Excess lobbying expenditures - enter the larger of line 1 or line 2	3	
4	Tax - Enter 25% of line 3 here and on Part I, line 6	4	

### SCHEDULE H - Taxes on Disqualifying Lobbying Expenditures (Section 4912)

Part I	Expenditures	and Computa	tion of Tax			
(a) Item number			(e) Tax imposed on organization (5% of col. (b))	(f) Tax imposed on organization managers (if applicable)- (5% of col. (b))		
1						
. 2 3						
4						
5			•			
Total - Colu Part II	<del></del>		and in Part II, column (c Organization M		ration of Payments	
	<del></del>				ration of Payments	
	(a) Names of or	rganization managers l	iable for tax	(b) Item no from Part I, col (a)	(c) Tax from Part I, col (f), or prorated amount	(f) Manager's total tax liability (add amounts in col. (c)) (see instructions)

### SCHEDULE I - Initial Taxes on Excess Benefit Transactions (Section 4958)

Part I	Excess Benef	it Transactions	and Tax Computation	
(a) Transaction number	(b) Date of transaction		saction	
1				
2				
3				
4				
5				
	(d) Amount of excess	benefit	(e) Initial tax on disqualified persons (25% of col. (d))	(f) Tax on organization managers (if applicable) (lesser of \$20,000 or 10% of col. (d))
	-			
		•		Form <b>4720</b> (20

GALLANT FAMILY FOUNDATION,

	SCHE	DULE I - Initial Tax	es on Excess	Ben	efit Transactio	ons (Section 49	58) Contin	ued
Part II		Tax Liability of Disc						
	(a) Names o	of disqualified persons liable for to	эх		(b) Trans no from Part I, col (a)	(C) Tax from Por prorated		(d) Disqualified person's total tax hability (add amounts in col. (c)) (see instructions)
a							······································	
								-
				•				
								_
	· · · · · · · · · · · · · · · · · · ·							_
Part III	Summary of 1	Tax Liability of 5010	c)(3) (c)(4) & (	(c)(29	) Organizatio	n Manager	and Pr	oration of Payments
1 416 415	Janinia y Of 1		-,(o), (o)(¬) & (	· ~ / ( ~ ·	, J. guilleution	, manager,		(d) Manager's total tax liability
	(a) Names of 501(c)(3), (c	c)(4) & (c)(29) organization manage	rs liable for tax		(b) Trans no from Part I, col (a)	(C) Tax from P or prorated		(add amounts in col (ci) (see instructions)
								_
* **********			······					
								-
		J - Taxes on Bein						
Part I	Prohibited Ta (see instructions)	x Shelter Transacti	ions (PTST) ar	nd Ta	ax Imposed or	n the Tax-E	xempt E	ntity
(a)		(c) Type of transaction 1 - Listed			40.5			
Transaction number	(b) Transaction date	2 - Subsequently listed 3 - Confidential 4 - Contractual protection			(d) Descript	ion of transaction	1	
1								*** * *********************************
2	<del> </del>							000000000000000000000000000000000000000
3					NA PROPERTY AND PR		n n take symmetra take	
4								
5								
have reason was a PTST	ax-exempt entity know to know this transact when it became a part tion? Answer Yes or N	on y to (f) Net income attribi	utable to the PTST	(g) 7	75% of proceeds attr	ibutable to the		imposed on the tax-exempt tity (see instructions)
				ļ				
Total - Colur	nn (h) Enter here and	on Part I, line 9		L				

Part II	Tax	Imposed on Entity Managers (Sec	ction 4965) Continue	ed				
		(a) Name of entity manager	,	(b)	Transaction imber from art I, col (a)	transact	enter \$20,000 for each ion listed in col. (b) for manager in col. (a)	(d) Manager's total tax liability (add amounts in col. (c))
					·			
		, , , , , , , , , , , , , , , , , , , ,						
	SCHE	DULE K - Taxes on Taxable Dist	tributions of S	pons	soring Or	uaniza	tions Maintai	ning Donor
		Ac	dvised Funds (					
Part I	Taxa	able Distributions and Tax Comp			T			
(a) Item	(b) Name of sponsoring organization and donor advised fund				(c) Description of distribution			
number 1		301101 2001300 10110						
2								
3	<del> </del>							
•						<del></del>		
4								
	<u>L</u>	<del> </del>	T					
(d) Date distribu		(e) Amount of distribution			n organizatior ol (e))			managers (lesser of 5% (e) or \$10,000)
						····		
		er here and on Part I, line 10						
Total - Colum Part #		ter total (or prorated amount) here and in Part II, imary of Tax Liability of Fund Ma			tion of Do	·····		
raith	Juli	iniary or rax Liability of rund wa	nagers and F	iora	uon or Fa	 	13	(d) Manager's total tax liability
	nastatiche ppané ch	(a) Name of fund managers liable for tax			Item no from art I, col (a)		x from Part I, col (g) prorated amount	(add amounts in col. (c)) (see instructions)
·								
····								
ı								
						L		

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# SCHEDULE L - Taxes on Prohibited Benefits Distributed From Donor Advised Funds (Section 4967)

Part I	Prohibited Benefits and Tax Computation						
(a) Item number	(b) Date of prohibited benefit		(c) Description of benefit				
1					- <u>-</u>		
2						· · · · · · · · · · · · · · · · · · ·	
3						······································	
<u>4</u> 5							
(d) Amount of prohibited benefit			(e) Tax on donors, donor advisors, or related persons (125% of col. (d)) (see instructions)		(f) Tax on fund managers (if applicable) (lesser of 10% of col. (d.) or \$10,000) (see instructions)		
Part II	Summary of T	ax Liability o	f Donors, Donor Adviso	ors, Related Pe	rsons, and Proration	(d) Donor's, donor advisor's, or	
	(a) Names of donors, d	onor advisors, or related	d persons liable for tax	Part I, col (a)	or prorated amount	related person s total tax liability (add amounts in col (c)) (see instructions)	
						-	
						-	
	,					-	
		.1					
Part III	Summary of T	ax Liability o	f Fund Managers and F	Proration of Pa	vments	<u> </u>	
(a) Names of fund managers liable for tax			(b) item no from Part I, col (a)	(C) Tax from Part I, col (f) or prorated amount	(d) Fund manager's total tax hability (add amounts in col. (c)) (see instructions)		
	<del></del>						
			· - <del></del>				
	W-74						
						-	
						_	
		<del></del> .					

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Schedule M - Tax on Hospital Organization for Failure to Meet the Community Health Needs

	Assessment	Requirements (Sections 4959 and 501(r	(3)) (See instructions)		
Part	Failures to Meet Section 50	)1(r)(3)	-		
(a) Item number	(b) Name of hospital facility	(c) Description of the failure	(d) Tax year hospi facility last conduc a CHNA		(e) Tax year hospital facility last adopted an implementation strategy
1					
2					
3					
4					
5				j	
Part	Computation of Tax				•
1 Nu	mber of hospital facilities operated by the hosp	ital organization that failed to meet the Community			
He	alth Needs Assessment requirements of section	n 501(r)(3)		1 1	
	x - Enter \$50,000 multiplied by line 1 here and			2	
		cess Executive Compensation (Se	ection 4960) (See i	nstruc	ctions)
(a) Item number	(b) Name of covered employee	(c) Excess remuneration	(d) Excess pare	nchute	(e) Total Add column (c) and (d)
1					
2					
3					
4					
5					
6	Attachment, if necessary See instructions		• • • • • • • • • • • • • • • • • • • •		,
Total	(add column (e) items 1 - 6)				
Tax.	Enter 21% of the amount above here and on Pa	rt I, line 13			
	SCHEDULE O - Excise Ta	x on Net Investment Income of Pr (Section 4968)	ivate Colleges and	l Univ	ersities
	· · · · · · · · · · · · · · · · · · ·	1			

		(a) Name	(b) EIN	(c) Gross investment income (See instructions )	(d) Capital gain net income	(e) Administrative expenses allocable to income included in cols (c) and (d)	(f) Net investment income (See instructions )
1	Filing Organization						
2	Related Organization						
3	Related Organization						
4	Related Organization						
5_	Total from attac	chment, if necessary					
6_	Total						
7	Excise Tax on f	Net Investment Income Enter 1 49	% of the amount in 6(f)	here and on Part I, line	14		

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Signature (and organization or entity name if applicable) of manager, self-dealer, disqualified person, donor, donor

's signature

May the IRS discuss this return with the preparer shown below? (see instructions)

GREAT NECK, NY 11021

S ADELSBERG

Firm's address ► 280 NORTHERN BEVD.

(516)504-1313

P00214432

11-2479096

No

Yes

ıf

PTIN

Check

self- employed

Firm's EIN

Date

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Date

advisor, or related person

STEVE ADELSBERG

Print/Type preparer's name

Firm's name

Paid

**Preparer** 

**Use Only**