SCANNED AUG 1 8 2021

EXTENDED TO MAY 17, 2021

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.

ntéma	J Re	venue Service Go to www.	rs.gov/Form990PF_for inst	ructions and the latest inf		Open to Public Inspection
For c	alen	dar year 2019 or tax year beginning JUL	1, 2019	, and ending	JUN 30, 2020	
Nam	e of	foundation			A Employer identification	number-
CI	IAI	- RLES L. WEISBERG FAMILY	FOUNDATION		61-1190609	
Num	oer a	nd street (or P O. box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
2	95	N HUBBARDS LANE, SUITE	102		502-459-19	21
		own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here 🕨
L	שכ	ISVILLE, KY 40207]	<u> </u>
C	1eck	all that apply: Initial return	Initial return of a f	ormer public chanty	D 1. Foreign organizations	, check here
		Final return	Amended return		Foreign organizations me check here and attach co	eting the 85% test,
		Address change	Name change	Oil	1	
U		type of organization; X Section 501(c)(3) exction 4947(a)(1) nonexempt charitable trust	Other taxable private found	₂₀₀₀ 94	E If private foundation state under section 507(b)(1)	I
Fai			ng method: X Cash	Accrual	1	
		· 1	ther (specify)		F If the foundation is in a (under section 507(b)(1)	4 1
•	\$	2,449,367. (Part I, colur	nn (d), must be on cash bas	sis.)		(- <i>y</i>
Pa	rt{I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a),)	expenses per books	income	income	(cash basis only)
		Contributions, gifts, grants, etc., received	37,436.		N/A	
	_	Check If the toundation is not required to attach Sch. 8 Interest on savings and temporary				
	3	cash investments	31,128.	31,128.		STATEMENT
	4 E-	Dividends and interest from securities	31,140.	31,140		DINIBITINI().
ı		Net rental income or (loss)				
_		Net gain or (loss) from sale of assets not on line 10	407-,725.			
Levenue		Gross sales price for all assets on line 6a 700,332.				
		Capital gain net income (from Part IV, line 2)	P. C.	407,725.		
r	8	Net short-term capital gain		A		
-	9	Income modifications Gross sales less returns				
- 1		and allowances				SPECIAL SECTION OF SEC
ł		Less. Cost of goods sold				
1		Gross profit or (loss)	-25,467.	25,567.].	STATEMENT
- 1		Total. Add lines 1 through 11	450,822.	413,286.		
†		Compensation of officers, directors, trustees, etc.	0.	0 ₁ .	DEOEN (E)	
-	14	Other employee salaries and wages			KECEIVE)
,†	15	Pension plans, employee benefits				08
Ž		Legal tees	-	S	MAY 1 1 202	0
		Accounting fees		[
Administrative Expe		Other professional fees	2.	1	OCDEN, U	
		Taxes STMT 3	5,486.	1,013.		(
2		Depreciation and depletion	3,200.	2,023		
		Occupancy				AND THE RESIDENCE OF THE PROPERTY OF THE PROPE
3		Travel, conferences, and meetings				
3 1	22	Printing and publications				
2		Other expenses STMT 4	3,708.	3,402.		
1	24	Total operating and administrative	0 100	A 2-4 F	1	
5	^-	expenses. Add lines 13 through 23	9,196. 226,434.	4,417.		226,434
וכ		Contributions, gifts, grants paid				440,434
- 1		i ulai expenses enu uiscuiscuismos.	225 620	4,417.		226,441
- 1	26	-				
		Add lines 24 and 25	_235,630.			
	27	Add lines 24 and 25		,		
	27 a	Add lines 24 and 25	215,192.	408,869.		

2019.05093 CHARLES L.

10	augar, eg	Balance Sheets Attached schedules and amounts in the description column should be for end-al-year amounts only	Beginning of year	End o	
1.	ar,t:	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1-	Cash - non-interest-bearing	92,462.	40,181.	
	2	Savings and temporary cash investments	84,530.	186,912.	186,912.
		Accounts receivable			
	ľ	Less: allowance for doubtful accounts		12/2012 2 1000 1000 2007 200 1000 2000 2000	***************************************
	l a	Pledges receivable	*2************************************		27 (C)
	`	Less: allowance for doubtful accounts			20040276222204220404040404040404040404040404040
	_			_	
	_	Receivables due from officers, directors, trustees, and other			<u>-</u>
	0				
	۱.	disqualified persons Other notes and loans receivable 56,649.	\	100×0040.0000000000000000000000000000000	
	' '		0.	56,649.	56,649.
	١.	Edd, dilovation of addition accounts	<u> </u>	30,043.	30,043.
Assets		Inventories for sale or use			
188		Prepaid expenses and deferred charges	115.	0.	0.
		Investments - U.S. and state government obligations			
		Investments - corporate stock STMT 5	903,335.	1,009,072. 145,795.	2,014,843.
		Investments - corporate bonds STMT 6	60,091.	145-, 7-95.	150,532.
	11	investments - tand, buildings, and equipment basis			
	1	Less: accumulated depreciation			
	12	investments - mortgage loans Investments - other STMT 7			
	13	Investments - other STMT 7	62,360.	-27,903.	250.
	14	Land, buildings, and equipment basis			
	ŀ	Less: eccumulated depreciation			
	15	Other assets (describe		-	
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	1,202,893.	1,466,512.	2,449,367.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
95		Deferred revenue		48,427.	
Liabilities		Loans from officers, directors, trustees, and other disqualified persons			
abj	21	Mortgages and other notes payable	-		
		Other liabilities (describe)			
	23	Total liabilities (add-lines 17 through 22)	0.	48,427.	
		Foundations that follow FASB ASC 958, check here			
ø		and complete lines 24, 25, 29, and 30.			
andes	24	Net assets without donor restrictions	•		
ala	25	Net assets with donor restrictions			
		Foundations that do not follow FASB ASC 958, check here			
or Fund B		and-complete lines 26 through 30.			
7	26	Capital stock, trust principal, or current funds	-1,036.	-1,036.	
	-27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	724397
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds	1,203,929.	1,419,121.	
Ą.	29	Total net assets or fund balances	1,202,893.	1,418,085.	
ž				· · · · · · · · · · · · · · · · · · ·	
	30	Total liabilities and net assets/fund balances	1,202,893.	1,466-,512.	
7=			<u> </u>		The second secon
\$ 8	art	Analysis of Changes in Net Assets of Fund E	Dalaticos		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	29		
	(mu	st agree with end-of-year figure reported on prior year's return)		1	1,202,893.
2	Ente	r amount from Part I, line 27a		2	215,192.
3	Othe	r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4-	1,418,085.
		eases not included in line 2 (riemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 29		1,418,085.
_					Form 990-PF (2019)

orm 990-PF (2019) CHA	RLES L	. WEISBERG	FAMTL	Y FOIINDA	ጥፐር	ON		6	1-119	0609	Page 8
Part IV Capital Gains											- tage t
(a) List and describe	the kind(s) of p	property sold (for-exa mmon stock, 200 sh	ımple, real estal	****	(b) P D	How ac - Purcl - Dona	nase i .		acquired ay, yr.)	(d) Date (mo., da	
la											
b SEE ATTACHED) STATE	1ENT									
C											,
<u>d</u>		. <u>-</u>									
<u> </u>											
(e) Gross sales price	(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale (ain or (loss s (f) minus				
<u>a</u>			<u> </u>		_						
b	ļ		1								
<u>t</u>						-					
e 700,332.			-	292,60	7					407	,725
Complete only for assets showi		nn (h) and owned by	the foundation		- 		m (Paine (C	ol. (h) gain		, 123-
(i) FMV as of 12/31/69	(j) Ad	ljusted basis f 12/31/69	(k) Ex	cess of col. (i) col. (j), if any			còl. (1	k), but r	not less tha (from-col. (n -0-) or	
a			-	;							
<u> </u>					一						
c							·				
d											
ė										407	,725.
2 Capital gain net income or (net c	apital loss)	If gain, also enter -(er in Part I, line :)- in Part I, line	7 7	}	2				407	,725
Net short-term capital gain or (lo	ss) as defined i	n sections 1222(5) a	nd (6):								
If gain, also enter in Part I, line 8. If (loss), enter -0- in Part I, line 8	, column (c).				}	- 3			n/a	.	
Part V Qualification L	Jnder Sect	tion 4940(e) fo	r Reduced	Tax-on Net	lnv	estn	nent-inco	me			
For optional use by domestic privat f section 4940(d)(2) applies, leave t		subject to the section	4940(a) tax on	net investment in	come	2.)					
Vas the foundation liable for the sec f "Yes," the foundation doesn't-qual				•	iod?					Yes	X. No
Enter the appropriate amount in					ntries						*****
(a) Base period years Calendar year (or tax year beginn		(b) adjusted qualifying dis		Net-value of no	(c))	use assets	-	Distril	(d) button ratio vided by col.	(c))
2018	9/		2,784.		1	, 95	1,908.		,, (5) 44	.02	876 763
2017			3,768.		1	, 7.3	0,265.			0!	54193
2016		3	4,083.				3,846.			.06	59493
_2015		9	9,196.		1	,22	6,346.			.08	3088
2014		7	75,702.		1	,09	9,196.			.06	58870
2 Total of line 1, column (d)								2		.31	72210
Average distribution ratio for the	5-year base pe	riod - divide the total	on line 2 by 5.0), or by the numb	er of y	years					
the foundation has been in existe	ence if less than	5 years						3		01	74442
Enter the net value of noncharita	ble-use assets i	for 2019 from Part X,	, line 5		•			4		2,057	,821.
Multiply line 4 by line 3								5		153	, 1-88
Enter 1% of net investment inco	me (1% of Part	l, line 27b)						6		4_	,089
							-	·I·	I		

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.

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157,277.

226,441.

7 Add lines 5 and 6

CHARLES L. WEISBERG FAMILY FOUNDATION

1a UBS #3P 57416 - b UBS #3P 16364 S c UBS #3P 16364 L d SCHWAB #9380-89 e UBS #00088 ST -	T - RON T - RON 00 - ALAN	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation P	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a UBS #3P 57416 - b UBS #3P 16364 S c UBS #3P 16364 L d SCHWAB #9380-89 e UBS #00088 ST -	FRANK T - RON T - RON 00 - ALAN	00 shs. MLC Co.	D - Donation P	(mo., day, yr.)	.(mo., day, yr.)
b UBS #3P 16364 S c UBS #3P 16364 L d SCHWAB #9380-89 e UBS #00088 ST -	T - RON T - RON 00 - ALAN				
c UBS #3P 16364 L d SCHWAB #9380-89 e UBS #00088 ST -	T - RON 00 - ALAN		_ n		
d SCHWAB #9380-89 e UBS #00088 ST -	00 - ALAN		P		
e UBS #00088 ST -			P		
	D 017		P		
. TTD 0 40000 T M	#V#2V		P		
† UBS #00088 LT - g UBS #GO-109022	RON	TAN	P		
h CAPITAL GAINS D		TAN	F -		
CAPITAL GAINS D	TAIDEMDO		-		
					
k					
Ī	***		Ì		
m					
n					
0				<u>L</u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(e) t (µ) Gain or (loss) plus (f) minus (g)	
a 44,946.		34,101.			10,845.
b 4.		69.			-65
c 70,341.		1,565.			68,776.
d 317,725.		110,889.			206,836.
e 30,823.		28,516. 117,179.			2,307. 87,761.
f 204,940. g 16,037.		288.			15,749.
g 16,037. h 15,516.		230.			15,516.
13,310.		-			25,020.
					
k					-
1	•		···		
m				-	
n					
0		400100			
Complete only for assets showing		 	(I) Lo: Gains (excess	sses (from-col. (h)) of col. (h) gain ove	- r cal (k)-
(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	but r	not less than "-0-")	
a	· · · · · · · · · · · · · · · · · · ·		· ·		10,845
b					-65
C	<u>.</u> .				68,776. 206,836.
d					$\frac{200,830}{2,307}$
e f					87,761
g		 		J	15,749
h	· -	· · · · · · · · · · · · · · · · · · ·			15,516.
i	· 				
<u> </u>					
k					
<u> </u>					
n		ļ		 	
0	- If your nion notes	r in Part I line-7" -			
2 Capital gain net income or (net capi		,	2		40 7 ,725.
3 Net short-term capital gain or (loss) if gain, also enter in Part I, line 8, or If (loss), enter "-0-" in Part I, line 8		nd (5):	3	N/A	

Form 990-PF (2019) CHARLES L. WEISBERG FAMILY FOUR Part VII Excise Tax Based on Investment Income (Section 494)		61-119 r 4948 - see		Page 4
1a Exempt operating foundations described in section 4940(d)(2), check here - and-er		100000120000		
Date of ruling or determination letter: (attach copy of letter if nec				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	X and enter 1%	1	4,0	89.
of Part I, line 27b				
c All other domestic foundations enter 2% of line 27b. Exempt to eign organizations, enter 4%				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, of		2		0.
3 Add lines 1 and 2		3	4,0	89.
4 Subtitle A (income) lax (domestic section 4947(a)(1) trusts and taxable foundations only; of		4		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	4,0	89.
. 6 Credits/Payments;				
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a 9,013	L. . . .		
b Exempt foreign organizations - tax withheld at source		7.		
c Tax paid with application for extension of time to file (Form 8868)	6c	7.		
d Backup withholding erroneously-writhheld	6d (7.		
7 Total credits and payments. Add lines 6a through 6d	-	7	9,0	11.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta		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	4,9	22.
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax	4,922. Refunded	▶ 11 .		0.
Part VII-A Statements Regarding Activities				
1a Dunng the tax year, did the foundation attempt to influence any national, state, or local legis	lation or did it participate or interv	ene in	Yes	No
any political campaign?			1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpos			.1b	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of				1000
distributed by the foundation in connection with the activities.	•			
c Did the foundation file Form 1120-POL for this year?			1c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the				****
(1) On the foundation. > \$ 0 • (2) On foundation managers) .		
e Enter the reimbursement (if any) paid by the foundation during the year for political expendi		_		
managers.▶\$ ·0.	•			
2 Has the foundation engaged in any activities that have not previously been reported to the-life	RS?		2	X_
If "Yes," attach a detailed description of the activities.	•			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing i	instrument, articles-of incorporatio	n, or		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year	r?		4a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b	<u></u>
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?)		5	X
if "Yes," attach the statement required by General Instruction T.	•			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied el	ther:			
 By language in the governing instrument, or 				
 By state legislation that effectively amends the governing instrument so that no mandator 	y directions that conflict with the s	tate law		
remain in the governing instrument?			6 X	<u> </u>
7 Did the foundation have at least \$5,000 in assets at any time during: the year? If "Yes," comp	lete Part II, col. (c), and Part XV.		7 X	
8a Enter the states to which the foundation reports or with which it is registered. See instruction	ns. ►			
KY-				
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF-to the A	ttorney General (or designate)			
			8b X	
9 Is the foundation claiming status as a private operating foundation within the meaning of se			200 200	
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," com	plete Part XIV		9	<u>x</u> 0
10 Did any persons become substantial contributors during the tax year? if "yes," attach a scheol	ile-listing their names and addresses		10	X
		Ψ F	orm 990-PF	(2019)

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P	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
-	If "Yes," attach statement. See instructions	12		X
12	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
13	Website address ► N/A			
44	The books are in care of ► RON- WEISBERG Telephone no. ► 502-45	9-1	921	
14	Located at 295 N HUBBARDS LN #102, LOUISVILLE, KY ZIP+4 40		721	
4-	· · · · · · · · · · · · · · · · · · ·			ТТ
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 - check here	 NT	/A	ш
	and enter the amount of tax-exempt interest received or accrued during the year			Ma
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,	$\overline{}$	Yes	
	securities, or other financial account in a foreign country?	16	50306661 X	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
_	foreign country	***		******
P	art VII B Statements Regarding Activities for Which Form 4720 May Be Required	10		
	File Form 4720 If any item is checked in the "Yes" column, unless an exception applies.	*** *********************************	Yes	No
18	a 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? Yes. X No			
	- (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?			
	(5) Transter 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.)			
ı	o 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 N/A	1b	Z-BOOMOON.J	NO PROCESSORS
	Organizations relying on a current notice regarding disaster assistance, check here	8275	****	****
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2019?	1c-	100992000	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	34°58'\$		*** *********************************
_	defined in section 4942(j)(3) or 4942(j)(5)):			
,	a At the-end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
Ì	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years	323		
,	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			
		2b	*****	.0000000
	statement - see instructions.) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	30,256	\$88\$\$\$\$	78800888
•				***
	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time.			
38	V ▼ N			
1	o If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,	2000		202
	Schedule C, to determine if the foundation had excess business holdings in 2019.)	3b		
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable-purposes?	48	XXXXXXXX	X
t	Did the foundation make any investment in a prior year (but after December 34; 1969) that could peopardize its charitable purpose that			<u> </u>
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X

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Part VII-B Statements Regarding Activities for Which I	-orm 4720 May Be F	tequirea (contini	ued)			
Sa During the year, did the foundation pay or incur any amount to:				‱ Ye:	s No	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	14945(e))?		s X Nc-			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,						
, any voter registration drive?						
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	🗀 Ye	s X No			
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section	·				
4945(d)(4)(A)? See instructions			s X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or				
the prevention of cruelty to children or animals?			s X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und			_			
section 53.4945 or in a current notice regarding disaster assistance? See instri	uctions		N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check I	1ere		▶└─	X		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for						
expenditure responsibility for the grant?		[/A \ Ye	s No			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			ľ,			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to						
a personal benefit contract?		L Ye	B X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		[6b	X	
If "Yes" to 6b, file Form 8870.		—				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	L	s X No		3 12 33	
b. If "Yes," did the foundation receive any proceeds or have any net income attribu			₩\₩	7b	20 (6330000000	
8 is the foundation subject to the section 4960 tax on payment(s) of more than \$	31,000,000 in remuneration or	·	[22]			
excess parachute payment(s) during the year?						
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	inagers, Highly	y			
List all officers, directors, trustees, and foundation managers and t	heir compensation					
List di Officero, di ectoro, a astees, and foundation managero and a	(b) Title, and average	(c) Compensation	(d) Contributions to	-(e) E	xpense	
(a) Name and address	hours per week devoted to position	(ff not paid, enter -0-)	(d) Contributions to employee benefit plans and delened compensation	accour allow	xpense nt, other vances	
RANK WEISBERG .	VICE PRES.					
3550 GLENVIEW						
LOUISVILLE, KY 40025	1.00	0.	0	•	0.	
	PRESIDENT				<i>,</i>	
295 N HUBBARDS LN #102				Ī		
LOUISVILLE, KY 40207	1.00	0.	0	•	<u> </u>	
	TREASURER					
401 BRICKELL AVE #800	•	_	_		_	
MIAMI, FL 33131	1.00-	0.	. 0	•	0.	
All Market Marke	System on line 4) Marco	A CASE SALES E				
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter NUNE.	(d) Contributions to	(a) F	xpense	
(a) Name and address of each employee pard more than \$50,000	hours per week devoted to position-	(c) Compensation	(d) Contributions to employee benefit plans and detained compensation	accoul	nt, other vances	
NONE	· · · · · · · · · · · · · · · · · · ·			1		
			_	ļ-		
	•					
		-				
				,		
	<u> </u>				<u> </u>	
Total number of other employees paid over \$50,000	<u></u>	<u></u>			0	

Form 990-PF (2019) CHARLES L. WEISBERG FAMILY FOUNDATION Part VIII Information About Officers, Directors, Trustees, Foundation Managers, His Paid Employees, and Contractors (continued)	61-119 ghly	0609 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "NGNE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of	service	(c) Compensation
NONE		
	• •	
	-	
That number of attern recognism over \$50,000 for example courses		▶ 0
Total number of others receiving over \$50,000 for professional services		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	е	Expenses
1 N/A		
2		
3		
<u> </u>		
4		
Part IX-B Summary of Program-Related Investments Describe-the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		Allouit
2		
-All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	•	0.

Form **990-PF** (2019)

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

Eorm **990-PF** (2019)

222,352.

4940(e) reduction of tax in those years.

Form 990-PF (2019) Page 9 Part XIII Undistributed Income (see instructions) (b) (c) Corpus Years prior to 2018 2018 2019 1 Distributable amount for 2019 from Part XI. 98,902. line 7 2 Undistributed income, if any, as of the end of 2019 0 a Enter amount for 2018 only b Total for prior years: 0 3 Excess distributions carryover, if-any, to 2019: 23,364 a From 2014 38,341 b From 2015 29,320 c From 2016 14,576. dFrom 2017 100,846 e From 2018 206,447. f Total of lines 3a through e 4 Qualifying distributions for 2019 from Part XII, line 4: ►\$ 226,441 0 a Applied to 2018, but not more than line 2a b.Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 98,902 d Applied to 2019 distributable amount 127,539 e Remaining amount distributed out-of corpus Excess distributions carryover applied to 2019 (if an amount appears in column (d), the same amount 0. 0. must be shown in column (a).) 6 Enter the net total of each column as indicated below: 333,986 & Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b 0

deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2019. Subtract

undistributed income for which a notice cf-

c Enter the amount of prior years'

be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)

lines 4d and 5 from line 1. This amount must

8 Excess distributions carryover from 2014 not applied on line 5-or line 7

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

10 Analysis of line 9: 38,341 a Excess from 2015 29,320 b Excess from 2016 14,576. c Excess from 2017 100,846. dExcess from 2018 539 e Excess from 2019.

Form **990-PF** (2019)

0.

0

23,364

310,622

-

0

0

، 0_

	L. WEISBER				90609 Page 10
Part XIV Private Operating F			I-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
toundation, and the ruling is effective to	r 2019, enter the date of	the ruling	▶		
b Check box to indicate whether the found	lation is a private operati	ng foundation described		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed		} -			1
b 85% of line 2a				/	
c Qualifying distributions from Part XII,				APIR'S	
line 4, for each year listed		-			
d Amounts included in line 2c not					
used directly for active conduct of	i		, m	1	
exempt activities			_/		
e Qualifying distributions made directly	· · · · · · · · · · · · · · · · · · ·		/		
for active conduct of exempt activities.					
Subtract line 2d from line 2c		\ \.	+ .		
3 Complete 3a, b, or c for the					<u> </u>
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			}-	1	
fisted c "Support" alternative test - enter:	ł				
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section	1	1			
512(a)(5)) of royalties)				 	
(2) Support from general public and 5 or more exempt					
ofganizations as provided in					
section 4942(J)(3)(B)(III)			· · ·		
(3) Largest amount of support-from					
an exempt organization		<u>'</u>			
(4)-Gross investment income Part XV Supplementary Info		ata this part only	if the foundation	n had \$5 000 ar m	oro in accete
Part XV Supplementary Info			ii me ioungado	n nau \$5,000 o: m	Ole III assets
		ructions.;			
1 Information Regarding Foundation					
 a List any managers of the foundation wh year (but only if they have contributed r 	io have contributed more	than 2% of the total con	tributions received by th	e toundation before the clo	ise of any tax
	note than \$5,000). (See :	36011011 301 (U)(2);			
SEE STATEMENT 8		 			
b List any managers of the foundation wh			(or an equally large port	tion of the ownership of a p	iartnership-or
other entity) of which the foundation ha	Sa 10% of greater intere	SL			
NONE.	·				
2 Information Regarding Contribut					
Check here ► X if the foundation.					uests for funds. If
the foundation makes gifts, grants, etc.,					
a The name, address, and telephone-num	ber or email address of t	he person to whom appli	cations should be addre	ssed:	
b The form in which applications should t	oe submitted and informa	ation and materials they s	hould include:		
c Any-submission deadlines:					
			·		
d-Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	, kinds of institutions, or	r other factors:	

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Recipient Purpose of grant or contribution Foundation status of recipient Amount Name and address (home or business) or substantial contributor a Paid during the year GENERAL PUND SEE ATTACHED LIST NONE 226,434. ▶ 3a 226,434. Total **b** Approved for future payment NONE 0. Total Form **990-PF** (2019)

Enter gross amounts unless otherwise indicated.	Unrelated t	ousiness income		by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code		
a		<u>_</u>			
b					
c					
d					
e					
†					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
8 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	31,128.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property	-	· - ·			
6 Net rental income or (loss) from personal	-				
	1				
property	\vdash		14	-25,467.	
7 Other investment income	 		7.7	-23,407.	
8 Gain or (loss) from sales of assets other			10	407 725	
than inventory			18	407,725.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
8					
b					
c				i	
d		<u></u>			
e					
2 Subtotal. Add columns (b), (d), and (e)		(413,386.	0
E gaptowi van comius (b) (a) and (c)				13	413,386
8 Total. Add line 12, columns (b), (d), and (e)					
8 Total. Add line 12, columns (b), (d), aกซ์-(e)				urposes	
8 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B Relationship of Activities t	o the Accon	nplishment of	Exempt P		plichment of
8 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI:B Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
8 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B Relationship of Activities t	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B, Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
8 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI:B Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
8 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI:B Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
8 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B, Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
8 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B, Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B, Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B, Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B, Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B, Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B, Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B, Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
8 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B, Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B, Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
8 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B, Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B, Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B, Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
8 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI-B, Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of
8 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part:XVI_B; Relationship of Activities t Line No. Explain below how each activity for which inco-	o the Accon	nplishment of column (e) of Part XV	Exempt P		plishment of

923621 12-17-19

Part XVII		-	fers to a	nd Transacti	ions a	nd Relations	hips With Nonchar	itable	
1 Did the o	Exempt Organ rganization directly or indir		f the follows	a with any other or	nanızalın	n described in sec	tion 501(c)	1 1	Yes No
	an section 501(c)(3) organ			-	_	11 063611000 111 366	non so i(c)	1 1	163 140
•	s from the reporting found:	•			zaliuns.				
	, ,							1a(1)	X.
(1) Cast								1a(2)	X
	erassets							14(2)	
b Other trai		hla avazak azazak						القيقة	X
	s of assets to a noncharital							1b(1) 1b(2)	X
	chases of assets from a no								$\frac{x}{x}$
` '	tal of facilities, equipment,	•						15(3)	X
(4) Reiti	nbursement arrangements							1b(4) 1b(5)	X
	ns or loan guarantees							15(5)	X
	ormance of services or me							10(0)	X
•	of facilities, equipment, ma	•					market value of the goods, i		
or service		oundation. If the foun	dation receive				n or sharing arrangement, s		GID,
(a)Line no.	(b) Amount involved			e exempt organizati	on	(d) Description	on of transfers, transactions, and	sharing arr	zangements
,,		(-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	N/A			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
							······································	•	
									
				-					
							•		
	•								
				-					
					-				
							-		
in section	undation directly or indirect in 501(c) (other than sectio complete the following schi (a) Name of org	n.501(c)(3)) or in sec edule.					(c) Description of relations	Yes	X No
	N/A			(-, ., , , , , , , , , , , , , , , , , ,			(-)	F	
	11/11		 				u u=a		
		1							
									
	er penalties of perjury, I declare bellef, it is true, correct, and correct, and correct, and correct, and correct bellef				n all inform		er has any knowledge retu sha	im with the	? Se <u>e mat</u> r
Sig	nature of officer or trustee			Date		Title_			
	Print/Type preparer's na	ame	Preparer's s	ignature		Date	Check if PTIN		
							self- employed		
Paid	BARRY J CH	RISTENSEN	BARRY	J CHRIST	ENS	05/03/21	P0	0176	953
Preparer	Firm's name ► LOU					<u></u>	Firm's EIN ▶ 61-0	4802	36
Use Only			_	-					
•	Firm's address ▶ 21	00 GARDIN	ER LAN	E 207					
	1	UISVILLE,					Phone no. (502)	459-	8100
		,)-PF (2019)

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.

CHARLES L. WEISBERG FAMILY FOUNDATION

OMB No 1545-0047

2019

Name of the organization

Employer identification number

61-1190609

Organization ty	pe (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	S01(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
•	ganization is covered by the General Rule or a Special Rule. Stion 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule	
	organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or y) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
section any on	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 is 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 a 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; form 990-EZ, line 1. Complete Parts I and II.
year, to	organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the stal contributions of more than \$1,000 exclusively for religious; charitable, scientific, literary, or educational purposes, or for the tion of cruelty to children or animals. Complete Parts I, II, and III.
year, c ıs chec purpos	organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the ontributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., e. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively s, charitable, etc., contributions totaling \$5,000 or more during the year
	anization 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), ver "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, 999-EZ, or 990-PF).

Name of organization

Employer identification number

CHARLES L. WEISBERG FAMILY FOUNDATION

61-1190609

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RONALD WEISBERG 1902 TYLER LANE LOUISVILLE, KY 40205	_s <u>28,436.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
0		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4 ⁻	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) -No.	Name, address, and ZIP + 4-	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	_(c) Total_contributions	(d) Type of contribution
		\$	Person Payroll- Noncash (Complete Part II for noncash contributions.),

Name of organization

Employer identification number

CHARLES L. WEISBERG FAMILY FOUNDATION

61-1190609

	ES L. WEISBERG FAMILY FOUNDATION		-1130603
art II	Noncash Property (see instructions). Use duplicate copies of P	ert 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
1	250 SHARES HUMANA STOCK		
		s71,603.	10/18/19
(a) No. rom 'art l	(b). Description of noncash property given	- (c) FMV (or estimate) (See instructions.)	(d) Date received
1	700 SHARES APPLE STOCK		
1		\$170,251.	10/31/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	- (d) Date received
	225 SHARES HUMANA STOCK		
			
		\$82,533.	04/16/20
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			
_			
(a) No. from Part I-	(b) Description of noncash-property given	(c) FMV (or estimate) (See instructions.)	(dj̄ - - Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
—			•
		\$	

Employer Identification number Name of organization 61-1190609 CHARLES L. WEISBERG FAMILY FOUNDATION 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 (Entri this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (d) Description of how gift is held-(c) Use of gift (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4-Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part ! (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 - 1- 1

FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM SECU	RITIES	ST	PATEMENT	1
SOURCE	GROSS AMOUNT	CAPIT. GAIN DIVIDE	NS REVENUE					
INT & DIV-ALAN - C. SCHWAB INT-& DIV-BRIELLE	4,701.		0.	4,701	. 4,	701.		
& ETAN - UBS INT & DIV-FRANK -	371.		0.	371	•	371.		
UBS INT & DIV-MICHAEL	12,004.		0.	12,004	12,	004.		
- UBS INT & DIV-QUINTON	2,509.	1,	722.	787		787.		
- UBS INT & DIV-ROBYN -	262.		0.	262		262.		
UBS INT & DIV-RON -	548.		0.	548		548.		
UBS INT & DIV-SPENCER	25,675.	13,	794.	11,881		881.		
- UBS RABBIT HOLE	340. 234.		0. 0.	340 234		340. 234.		
TO PART I, LINE 4	15,	516.	31,128	31,	128.			
FORM 990-PF		OTHER	INCO	ME		SI	TATEMENT	2
DESCRIPTION				(A) VENUE BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTE NET INCO	
RECOVERY OF PRIOR YEAR DISTRIBUTION RABBIT HOLE - ORDINARY RABBIT HOLE SALE			· · · · · · · · · · · · · · · · · · ·	100. -29,181. 3,614.	-29,1 3,6	0. 81. 514.		
TOTAL TO FORM 990-P	F, PART I, I	LINE 11		-25,467.	-25,5	67.		

DESCRIPTION	FORM 990-PF	TAX	ES	STATEMENT				
### FEDERAL TAXES	DESCRIPTION	EXPENSES	NET INVES	NET INVEST-		CHARITABLE		
FORM 990-PF OTHER EXPENSES STATEMENT (A)							0.	
CA	TO FORM 990-PF, PG 1, LN 18 =	5,486.	1,0	013.			0.	
EXPENSES NET INVEST- ADJUSTED CHARITABI	FORM 990-PF	OTHER E	XPENSES			STATEMENT	4	
### BANK CHARGES	DESCRIPTION	EXPENSES	NET INVES	est- adjustei		CHARITABLE		
FORM 990-PF CORPORATE STOCK STATEMENT DESCRIPTION- BOOK VALUE VALUE CORPORATE STOCKS 1-,009,072. 2,014,843 TOTAL TO FORM 990-PF, PART II, LINE 10B 1,009,072. 2,014,843 FORM 990-PF CORPORATE BONDS STATEMENT DESCRIPTION BOOK VALUE VALUE CORPORATE BONDS 145,795. 150,532	BANK CHARGES	7.		0.	Annual Control of the		0. 7. 0.	
DESCRIPTION— BOOK VALUE FAIR MARKET VALUE CORPORATE STOCKS 1-,009,072. 2,014,843 TOTAL TO FORM 990-PF, PART II, LINE 10B 1,009,072. 2,014,843 FORM 990-PF CORPORATE BONDS STATEMENT DESCRIPTION BOOK VALUE FAIR MARKET VALUE CORPORATE BONDS 145,795. 150,533	TO FORM 990-PF, PG 1, LN 23	3,708.	3,4	402.			7.	
DESCRIPTION— BOOK VALUE VALUE CORPORATE STOCKS 1-,009,072. 2,014,843 TOTAL TO FORM 990-PF, PART II, LINE 10B 1,009,072. 2,014,843 FORM 990-PF CORPORATE BONDS STATEMENT DESCRIPTION BOOK VALUE VALUE CORPORATE BONDS 145,795. 150,533	FORM 990-PF	CORPORAT	E STOCK			STATEMENT	5	
TOTAL TO FORM 990-PF, PART II, LINE 10B 1,009,072. 2,014,843 FORM 990-PF CORPORATE BONDS STATEMENT PAIR MARKET VALUE CORPORATE BONDS 145,795. 150,532	DESCRIPTION-			вос	OK VALUE		T	
FORM 990-PF CORPORATE BONDS STATEMENT DESCRIPTION BOOK VALUE VALUE CORPORATE BONDS 145,795. 150,532	CORPORATE STOCKS				L-,009,072.	2,014-,8	43.	
DESCRIPTION BOOK VALUE CORPORATE BONDS FAIR MARKET VALUE 145,795. 150,532	TOTAL TO FORM 990-PF, PART II, LINE 10B				L,009,072.	2,014,8	2,014,843.	
DESCRIPTION BOOK VALUE VALUE CORPORATE BONDS 145,795. 150,532	FORM 990-PF CORPORATE BONDS					STATEMENT	6	
	DESCRIPTION			вос	OK VALUE		T	
TOTAL TO FORM 990-PF, PART II, LINE 10C 145,795. 150,532	.CORPORATE BONDS		-		145,795.	150,5	32.	
	TOTAL TO-FORM 990-PF, PART II, LINE 10C				145,795. 150			

FORM 990-PF OTHER	INVESTMENTS		STATEMENT	7
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET	r
OTHER INVESTMENTS	COST	27,903.	25	50.
TOTAL TO FORM 990-PF, PART II, LINE	27,903.	2!	50.	
FORM 990-PF PART XV LIST OF FOUND	- LINE 1A DATION MANAGE	ers	STATEMENT	8

NAME OF MANAGER

FRANK WEISBERG RONALD WEISBERG ALAN WEISBERG