

For calendar year 2020, or tax year beginning 01-01-2020, and ending 12-31-2020

Name of foundation THE MAYER FOUNDATION		A Employer identification number 02-0569535	
Number and street (or P.O. box number if mail is not delivered to street address) 300 EAST 74TH ST STE 35A		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code New York, NY 10021		B Telephone number (see instructions)	
G Check all that apply: <div><input type="checkbox"/> Initial return<input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return<input type="checkbox"/> Amended return <input type="checkbox"/> Address change<input type="checkbox"/> Name change</div>		C If exemption application is pending, check here <input type="checkbox"/> D 1. Foreign organizations, check here..... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶\$ 107,651	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)		
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	65,000			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	18	18		
	12 Total. Add lines 1 through 11	65,018	18		
	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	500			
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	76			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	464			
	24 Total operating and administrative expenses. Add lines 13 through 23	1,040	0		0
	25 Contributions, gifts, grants paid	129,600			129,600
	26 Total expenses and disbursements. Add lines 24 and 25	130,640	0		129,600
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	-65,622			
	b Net investment income (if negative, enter -0-)		18		
	c Adjusted net income (if negative, enter -0-)			0	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	173,273	107,651	107,651
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	173,273	107,651	107,651	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds	173,273	107,651	
	29 Total net assets or fund balances (see instructions)	173,273	107,651	
30 Total liabilities and net assets/fund balances (see instructions) .	173,273	107,651		

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	173,273
2 Enter amount from Part I, line 27a	2	-65,622
3 Other increases not included in line 2 (itemize) ▶ _____	3	
4 Add lines 1, 2, and 3	4	107,651
5 Decreases not included in line 2 (itemize) ▶ _____	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	107,651

Part IV Capital Gains and Losses for Tax on Investment Income

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) 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	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) $\left\{ \begin{array}{l} \text{If gain, also enter in Part I, line 7} \\ \text{If (loss), enter -0- in Part I, line 7} \end{array} \right\}$	2	
	3	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8		

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE**

1 Reserved			
(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
2 Reserved			2
3 Reserved.			3
4 Reserved			4
5 Reserved			5
6 Reserved			6
7 Reserved			7
8 Reserved ,			8

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
b	Reserved.	1	0
c	All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	0
6	Credits/Payments:		
a	2020 estimated tax payments and 2019 overpayment credited to 2020	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	8	
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	
11	Enter the amount of line 10 to be: Credited to 2021 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	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	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>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.</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ _____ (2) On foundation managers. <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	2	No
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? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	5	No
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 remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> NY		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	8b	Yes
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 2020 or the taxable year beginning in 2020? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	10	No

Part VII-A Statements Regarding Activities (continued)

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.MAYERFOUNDATION.COM</u>	13	Yes	
14	The books are in care of ► <u>CHARLES MAYER</u> Telephone no. ► <u>(212) 772-0004</u>			

Located at ► 300 EAST 74TH ST NEW YORK NYZIP+4 ► 10021

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here	<input type="checkbox"/>		
	and enter the amount of tax-exempt interest received or accrued during the year	► 15		
16	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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	
	Organizations relying on a current notice regarding disaster assistance check here. ► <input type="checkbox"/>		
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 2020?	1c	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____		
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.)	2b	No
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2020 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 Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2020.)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
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 2020?	4b	No

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

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

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
CHARLES MAYER 300 EAST 74TH ST NEW YORK, NY 10021	PRESIDENT 5.00	0	0	0
DANIEL BOOCKVAR 161 EST 75TH ST New York, NY 10023	SECYTREAS 1.00	0	0	0
ROBERT LOPATIN 581 OLD WHITE PLAINS RD Tarrytown, NY 10591	VPDIR 1.00	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

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

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

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

Part IX-A Summary of Direct Charitable Activities

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.

	Expenses
1 NONE	0
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 NONE	0
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3 ►

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	103,443
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	103,443
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	103,443
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	1,552
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	101,891
6	Minimum investment return. Enter 5% of line 5.	6	5,095

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

1	Minimum investment return from Part X, line 6.	1	5,095
2a	Tax on investment income for 2020 from Part VI, line 5.	2a	
b	Income tax for 2020. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	5,095
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	5,095
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	5,095

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	129,600
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	129,600
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	129,600

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				5,095
2 Undistributed income, if any, as of the end of the 2020:				
a Enter amount for 2019 only.				
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2020:				
a From 2015. 78,554				
b From 2016. 80,317				
c From 2017. 81,993				
d From 2018. 71,909				
e From 2019. 59,892				
f Total of lines 3a through e.	372,665			
4 Qualifying distributions for 2020 from Part XII, line 4: ► \$ 129,600				
a Applied to 2019, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2020 distributable amount.				5,095
e Remaining amount distributed out of corpus	124,505			
5 Excess distributions carryover applied to 2020. (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	497,170			
b Prior years' undistributed income. Subtract line 4b from line 2b.				
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.				
d Subtract line 6c from line 6b. Taxable amount—see instructions.				
e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions.				
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions).	78,554			
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a.	418,616			
10 Analysis of line 9:				
a Excess from 2016. 80,317				
b Excess from 2017. 81,993				
c Excess from 2018. 71,909				
d Excess from 2019. 59,892				
e Excess from 2020. 124,505				

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

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

CHARLES MAYER

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

NONE

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

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

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

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

c Any submission deadlines:

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

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	129,600
b <i>Approved for future payment</i>				
Total			▶ 3b	0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See instructions.)
1 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments.					
3 Interest on savings and temporary cash investments			03	18	
4 Dividends and interest from securities.					
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 property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory					
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 _____					
12 Subtotal. Add columns (b), (d), and (e). . .				18	
13 Total. Add line 12, columns (b), (d), and (e).					18

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

[illegible]

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of:				
(1) Cash.		1a(1)		No
(2) Other assets.		1a(2)		No
b Other transactions:				
(1) Sales of assets to a noncharitable exempt organization.		1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.		1b(2)		No
(3) Rental of facilities, equipment, or other assets.		1b(3)		No
(4) Reimbursement arrangements.		1b(4)		No
(5) Loans or loan guarantees.		1b(5)		No
(6) Performance of services or membership or fundraising solicitations.		1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.		1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.				

[illegible]

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

b If "Yes," complete the following schedule.		
(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2021-02-26	*****
	_____ Signature of officer or trustee	_____ Date	_____ Title

May the IRS discuss this return with the preparer shown below
 (see instr.) ☐ **Yes** ☒ **No**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input checked="checked" type="checkbox"/>	PTIN
	Bill Berger		2021-03-01		P01216822
	Firm's name ▶ William Berger				Firm's EIN ▶
	Firm's address ▶ 43 Wintergreen Dr Manalapan, NJ 07726				Phone no. (732) 536-5876

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CAROLINA BARRON 10 WEST 135 ST APT 17T New York, NY 10037	NONE		GENERAL WELFARE	1,250
CATHERINE CULLEN 34-10 75TH ST APT 6L Jackson Heights, NY 11372	NONE		GENERAL WELFARE	1,250
CATALINA SCHLIEBENA 307 EAST PARKWAY 4E Brooklyn, NY 11238	NONE		GENERAL WELFARE	1,250
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
ERIC HANSON 601 WEST 136TH ST APT 23 New York, NY 10031	NONE		GENERAL WELFARE	1,250
ALLISON PHILIPS 961 EASTERN PARKWAY APT A10 Brooklyn, NY 11213	NONE		GENERAL WELFARE	1,250
REGINALD MACK 20 NORTH 5TH ST APT 309 Brooklyn, NY 11249	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KAMILLAH BRYANT749 CYPRESS ST YOARON, PA 15037	NONR		GENERAL WELFARE	1,250
GEORGE STEVEN24-14 21ST APT 4 Astoria, NY 11102	NONE		GENERAL WELFARE	1,250
ANNE MARIE DASILVA 346 EAST 29TH ST APT 6A Brooklyn, NY 11226	NONE		GENERAL WELFARE	1,250
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ATIYA YANIGUE TAYLOR 737 EAST 228 ST APT 1 Bronx, NY 10466	NONE		GENERAL WELFARE	1,250
JENNNIFER WILLIAMS 2031 MAYFAIR MCCLEAN CT Falls Church, VA 22043	NONE		GENERAL WELFARE	1,250
ANDREW STONE4830 40TH ST APT 4G Sunnyside, NY 11104	NONE		GENERAL WELFARE	1,250
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KEVIN KELLY60-24 PUTNAM AVE APT 2R Ridgewood, NY 11385	NONE		GENERAL WELFARE	1,250
SIFIA TUESLLO660 MARTA ROSE AVE Teaneck, NJ 07666	NONE		GENERAL WELFARE	1,250
DIASSI JOHNSON 100 WOODRUFF AVE APT 6J Brooklyn, NY 11226	NONE		GENERAL WELFARE	1,250
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ANDREA MINCIE 30ST MARKS PLACE APT 6B New York, NY 10003	NONE		GENERAL WELFARE	1,250
RYAN CZERWONKS350 CORNELIA ST Brooklyn, NY 11237	NONE		GENERAL WELFARE	1,250
MAHDIYYAH MUHAMMED 2372 PACIFIC ST 3RD FL Brooklyn, NY 11233	NONE		GENERAL WELFARE	1,250
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MICHELLE VO25 PARADE PLACE APT 4C Brooklyn, NY 11226	NONE		GENERAL WELFARE	1,250
NIC ADAMS260 RIVERSIDE DR APT 3C New York, NY 10025	NONE		GENERAL WELFARE	1,250
JULIA ROSE STEVENS CO ROSE STEVENS 1535 N SCOTSDALE R Tempe, AZ 85281	NONE		GENERAL WELFARE	1,250
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
VOLUNTEERS IN MEDICINE 777 SOUTH MAIN ST Great Barrington, MA 01230	NONE		GENERAL WELFARE	5,000
LAWRENCE PARKER CO ST MARYS EPISCOPAL CHURCH New York, NY 10027	NONE		GENERAL WELFARE	1,200
GOLAR ADILI970 KENT AVE APT 405 Brooklyn, NY 11205	NONE		GENERAL WELFARE	1,200
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AARON LANDSMAN 219 EAST 7TH ST APT 14 New York, NY 10009	NONE		GENERAL WELFARE	1,200
GAMIN KANG1235 PARK AVE APT 16C New York, NY 10128	NONE		GENERAL WELFARE	1,200
TIFFANY PETERS 70-02 FOREST AVE APT 3 Ridgewood, NY 11385	NONE		GENERAL WELFARE	1,200
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ANNA PLAVINSKAYA 815 WEST 81 ST APT 3 New York, NY 10033	NONE		GENERAL WELFARE	1,200
NATAN FELIX 696 WILLOUGHBY AVE APT 17 Brooklyn, NY 11206	NONE		GENERAL WELFARE	1,200
VANESSA EDWARDS111 KIDDER ST Manchester, NH 03101	NONE		GENERAL WELFARE	1,200
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ELIZABETH BLUTH 344 MCGUINNESS BLVD APT 2L Brooklyn, NY 11222	NONE		GENERAL WELFARE	1,200
LOUISE BELCORT CO RICHARD MEYER 73 JUBEND RD EGARMONT, MA 02304	NONE		GENERAL WELFARE	1,200
PETER COLQUHOUN 105 DUANE ST APT 4C New York, NY 10007	NONE		GENERAL WELFARE	1,200
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LARISSA AESBADO 49 MEAGAGAN ST APT 1R Brooklyn, NY 11221	NONE		GENERAL WELFARE	1,200
JUAN MAHIIANCIE 325 KENT AVE APT N674 Brooklyn, NY 11221	NONE		GENERAL WELFARE	1,200
RUSETTA DEBENARDIS 86 WYCKOFF AVE PO BOX 370601 Brooklyn, NY 11221	NONE		GENERAL WELFARE	1,200
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DIANA JENSEN463 WEST ST APT926 New York, NY 10014	NONE		GENERAL WELFARE	1,200
DAVID PAUL SCHWENSER581 MAIN ST Vermilion, NH 44089	NONE		GENERAL WELFARE	1,200
BENITA DE WIT51 EAST 17TH ST Brooklyn, NY 11226	NONE		GENERAL WELFARE	1,200
Total ► 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ALEXANDER ROMERO269 DEVOE ST Brooklyn, NY 11226	NONE		GENERAL WELFARE	1,200
DARLESIA CEARCY42 GENTRY DR Englewood, NJ 07631	NONE		GENERAL WELFARE	1,200
TRACY LILLEY325 REMSEN AVE Brooklyn, NY 11206	NONE		GENERAL WELFARE	1,200
Total ► 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
VAYOI KEWAHITO 204 SCHOLLES ST APT 3 Brooklyn, NY 11212	NONE		GENERAL WELFARE	1,000
ETHAN SHOSHAN486 GREENWICH ST New York, NY 10013	NONE		GENERAL WELFARE	1,000
PETER VALENTINE34 3RD PLACE Brooklyn, NY 11231	NONE		GENERAL WELFARE	1,200
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
TUCKER EASON 674 JEFFERSON AVE APT 1 Brooklyn, NY 11231	NONE		GENERAL WELFARE	1,000
SHAMAER ANSARI 527 EAST 12TH ST APT A4 New York, NY 10009	NONE		GENERAL WELFARE	1,000
JOY MARCHETTI 330 WEST 141 ST APT 5B New York, NY 10030	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
LAURA DSALINGER 27 WEST 60TH ST APT20416 New York, NY 10023	NONE		GENERAL WELFARE	1,200
CHRISTINE FONTANELLI 400 WEST 43RD ST APT 18H New York, NY 10036	NONE		GENERAL WELFARE	1,200
AMANDA LEDERER 278 EAST 7TH ST APT 1C New York, NY 10009	NONE		GENERAL WELFARE	1,200
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ROBERT CASSANOP O BOX 090435 Brooklyn, NY 11209	NONE		GENERAL WELFARE	1,000
GAIAE GENOVESE 28-30 34TH ST APT 20 LI CITY, NY 11103	NONE		GENERAL WELFARE	1,200
SOPHIA DANSON551 EAST 93RD ST Brooklyn, NY 11236	NONE		GENERAL WELFARE	1,200
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MARA JILL HERMAN23-37 33RD ST Astoria, NY 11106	NONE		GENERAL WELFARE	1,000
ADAM WIESEMAN 329 BEACH 59TH ST APT 920913 ARVEREN, NY 11106	NONE		GENERAL WELFARE	1,000
KELSEY SHWETZ 1869 PUTNAM AVE APT 2E Ridgewood, NY 11385	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TANIA TAIWO 237 WEST 138ST BASEMENT New York, NY 10030	NONE		GENERAL FUND	1,000
STEVE GIOVINCO 166 SECOND AVE APT 11F New York, NY 10003	NONE		GENERAL WELFARE	1,000
DENISE GRANT31 LEONARD ST APT 2A Brooklyn, NY 11206	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FLAVIO ALVES 393 LAS OLAS WAY APT 2107 Fort Lauderdale, FL 33301	NONE		GENERAL WELFARE	1,000
SILVIE CHENG 610 WEST 139TH ST APT 2C New York, NY 10032	NONE		GENERAL WELFARE	1,000
JORDAN DYKSTRA 1051 PROSPECCT PLACE APT2B Brooklyn, NY 11213	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JOAN MULVIHILL 2501 MORRIS AVE APT5B Bronx, NY 10468	NONE		GENERAL WELFARE	1,000
FELIPE VARADEREY1627TH AVE APT C3 Brooklyn, NY 11215	NONE		GENERAL WELARE	1,000
ANNETA MARION857 9TH AVE APT 3A New York, NY 10009	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
STEPHAINE MORTIMORE 238 WEST 106 ST APT 2E New York, NY 10025	NONE		GENERAL WELFARE	1,000
MORITZ VON STUELPNAGEL PO BOX 220216 Brooklyn, NY 11222	NONE		GENERAL WELFARE	1,000
GABRIEL CORCHADO 1325 5TH AVE APT 9H New York, NY 10029	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BRUCE TETSUYA907 BERGEN ST APT 1C Brooklyn, NY 11216	NONE		GENERAL ELFARE	1,000
KATHY JEFFERS 160 ST MARKS PLACE A APT 5A New York, NY 10003	NONE		GENERAL WELFARE	1,000
EMILY LAROCHELLE 239 EAST 5TH ST APT 1D New York, NY 10003	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PAOLINA ZANKI308333RDST Astoria, NY 11102	NONE		GENERAL WELFARE	1,000
ROLF SCHULTE 128 WEST 72ND ST APT 5B New York, NY 10023	NONE		GENERAL WELFARE	1,000
SCOTT ATTIE242 EAST 74TH ST APT 3 New York, NY 10009	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MITCHELL LAZAR 201 EAST 20TH ST APT 4A New York, NY 10003	NONE		GENERAL WELFARE	1,000
MERYL JAMES WILLIAMS 64 LINCOLN RD APT 2B Brooklyn, NY 11225	NONE		GENERAL WELFARE	1,000
KONG TANTINOS STAMATIOU 221 14TH ST Brooklyn, NY 11215	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FELIZ REYES169 54TH ST APT 6 Long Island City, NY 11120	NONE		GENERAL WELFARE	1,000
MYRIAM PHIRO 21-14 45TH ROAD APT 14 Long Island City, NY 11101	NONE		GENERAL WELFARTE	1,000
WADE SCHAMING 625 WEST 57TH ST APT 919 New York, NY 10019	NONE		GENERAL WELFARE	1,200
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
IBRAHIMA CAMARA 1160 OCEAN AVD APT 1G Brooklyn, NY 11230	NONE		GENERAL WELFARE	1,000
PEDRO TRONCOSO 2094 CRESTON AVE APT 4A Bronx, NY 10453	NONE		GENERAL WELFARE	1,000
MONICA ELLIS 477 WILOUGHBY AVE APT 1 Brooklyn, NY 11206	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MICHAEL LYNCH313 106TH ST East Elmhurst, NY 11369	NONE		GENERAL WELFARE	1,000
ALLYSON CARR ARENIA 23-37 33RD ROAD Astoria, NY 11106	NONE		GENERAL WELFARE	1,000
ALEXANDRA MORRODOMO 180 MARTENESE ST APT 3 Brooklyn, NY 11226	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ANTHONY HUFFMAN 19 BELVIDERE ST APT 3 Brooklyn, NY 11206	NONE		GENERAL WELFARE	1,000
DANIEL DASILVA 310 EAST 75TH ST APT 3K New York, NY 10021	NONE		GENERAL WELFARE	1,000
HOWARD CASH 2070 SEWARD AVE APT 1D Bronx, NY 10473	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SCARLET PEREZ 1632 UNIVERSITY AVE APT 2D Bronx, NY 10453	NONE		GENERAL WELFARE	1,000
MICHAEL OPARKO159 PRICE ST APT 16 New York, NY 10012	NONE		GENERAL WELFARE	1,000
SARSH WANG247 EAST 116TH ST APT2 New York, NY 10029	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NATHANEL MYERS 149 NORTH 7TH ST APT 2 Brooklyn, NY 11249	NONE		GENERAL WELFARE	1,000
JENNIFER BILEK 66-14 WOODSIDE AVE APT 402A Woodside, NY 11377	NONE		GENERAL WELFARE	1,000
ARIELLE MCMANUS3372 12TH AVE FL 2 Brooklyn, NY 11218	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TOMMY SMITH946 FULTON ST APT 3 Brooklyn, NY 11238	NONE		GENERAL WELFARE	1,000
FIRUZ MAHMUD89-22 92ND ST FL 2 Woodhaven, NY 11421	NONE		GENERAL WELFARE	1,000
BORIANA TSVETKOVA 1503 3RD AVE APT 3D New York, NY 10028	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHLOE TRULOMG JOANES 175 EAST 111TH ST APT 2A New York, NY 10029	NONE		GENERAL WELFARE	1,000
CHASE KUESEL 196 GRAHAM AVE APT 3R Brooklyn, NY 11206	NONE		GENERAL WELFARE	1,000
ELISE KINNON 118 WEST 72ND ST APT 701 New York, NY 10023	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JOSE CARLOS CASADO 2280 FREDERICK DOUGLASS BLVD APT 5E New York, NY 10027	NONE		GENERAL WELFARE	1,000
SAL KJOK CO MOTHERSHIP 252 GREEN ST Brooklyn, NY 11222	NONE		GENERAL WELFARE	1,200
ANDREA STRONGWATER 465 WEST END AVE APT 7D New York, NY 10024	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TALIA SHULZE187 JEFFERSON ST APT 3 Brooklyn, NY 11206	NONE		GENERAL WELFARE	1,000
CARI MECKLER 105 WEST 55TH ST APT 9C New York, NY 10019	NONE		GENERAL WELFARE	1,000
DALE PIERCE NIELSON 30 SAINT JAMES PLACE FL 2 Brooklyn, NY 11205	NONW		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KHRISTINA CAYETANO145-72 220TH ST Springfield Gardens, NY 11413	NONE		GENERAL WELFARE	1,000
CARA PERLMAN40 LISPONARD ST New York, NY 10013	NONE		GENERAL WELFARE	1,000
CLAUDIA VARGAS 463 WEST ST APT D406 New York, NY 10014	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JOHNATHAN GOODMAN LEVITT 387 CUMBERLAND ST APT 2 Brooklyn, NY 11238	NONE		GENERAL WELFARE	1,000
SASIE EFRAT162 EAST 2ND ST APT 1A New York, NY 10009	NONE		GENERAL WELFARE	1,000
ZACH SCHANNE 531 WEST 151 ST APT 21 New York, NY 10031	NONE		GENERAL WELFARE	1,000
Total ▶ 3a				129,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GABRIELLIA LOPEZ 225 FDECATUR ST APT 2A Brooklyn, NY 11233	NONE		GENERAL WELFARE	1,000
Total  3a				129,600

TY 2020 Accounting Fees Schedule**Name:** THE MAYER FOUNDATION**EIN:** 02-0569535

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	500	0	0	0

TY 2020 Other Expenses Schedule**Name:** THE MAYER FOUNDATION**EIN:** 02-0569535**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK SERVICE CHARGES	464	0	0	0

TY 2020 Other Income Schedule

Name: THE MAYER FOUNDATION

EIN: 02-0569535

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
INTEREST	18	18	0

TY 2020 Taxes Schedule

Name: THE MAYER FOUNDATION
EIN: 02-0569535

Taxes Schedule

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAXES	76	0	0	0