Form 990-PF

CHANGE OF ACCOUNTING PERIOD **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.

Department of the Treasury ► Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2020 or tax year beginning JUL 1, 2020 2020 DEC 31 and ending Name of foundation A Employer identification number PAUL SIMONS FOUNDATION, INC. 13-3937693 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 200 HARBOR ROAD 631-689-0619 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here STONY BROOK, NY 11790 6 Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 97, 308, 717. (Part I, column (d), must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income 2,000,000. Contributions, gifts, grants, etc., received Check if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 1,188. 1.188 3 4 Dividends and interest from securities 5a Gross rents h Net rental income or (loss) 0. 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 0. 8 Net short-term capital gain Income modifications b Less Cost of goods sold c Gross profit or (loss) -1,248,3970. STATEMENT 11 Other income -1,247,209 2,001,188. 0 12 Total, Add lines 1 through 11 0. 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 6,106. STMT 2 6,106. 0. 0. 16a Legal fees 5,950 STMT 3 0. 0. 2,275. **b** Accounting fees c Other professional fees 17 Interest STMT 4 250. 30,295. 0. 18 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications OGD@! 23 Other expenses STMT 5 1,500. 0. 500. 24 Total operating and administrative 13,806. 30,295. 0. 9,881. expenses. Add lines 13 through 23 3,456,000. 3,456,000. Contributions, gifts, grants paid Total expenses and disbursements. 3,469,806. 30,295. 0. 3,465,881. Add lines 24 and 25 27 Subtract line 26 from line 12: -1,468,618. & Excess of revenue over expenses and disbursements 0. b Net investment income (if negative, enter -0-) 0. C Adjusted net Income (if negative, enter -0-)

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Form 990-PF (2020				3937693 Pag
Part II Bala	ance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	<u> </u>
	Column should be for charactycal amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	ı-ınterest-bearing	77,550.	972,020.	972,020
2 Savings a	nd temporary cash investments	5,561,651.	3,846,839.	3,846,839
3 Accounts				
Less: allov	vance for doubtful accounts 🕨			
4 Pledges re	ceivable 🕨	J		
Less: allov	vance for doubtful accounts 🕨			
5 Grants red	eivable			
6 Receivable	s due from officers, directors, trustees, and other]		
disqualifie	d persons			
7 Other notes an	l loans receivable	_		
Less: allov	vance for doubtful accounts			
8 Inventorie	for sale or use		-	
≘ `	penses and deferred charges		-	
10a Investmen	ts - U.S. and state government obligations			
1	ts - corporate stock			
_	ts - corporate bonds			
	and, buildings, and equipment basis			
	ted depreciation			·
ı	ts - mortgage loans			
1		79,062,277.	92,489,858.	92,489,858
1	lings, and equipment; basis	73,002,2773	32,403,030.	52,405,050
1				
	ted depreciation	 	.	
	ts (describe)			
	ts (to be completed by all filers - see the	94 701 479	07 309 717	07 308 717
	s. Also, see page 1, item I)	68,750.	97,308,717.	31,300,111
	payable and accrued expenses	00,750.	10,323.	
18 Grants pay	•			
19 Deferred r		-		
= 1	ifficers, directors, trustees, and other disqualified persons			
21 Mortgages	and other notes payable			
22 Other liabi	ities (describe)			
ľ			40.005	
	lities (add lines 17 through 22)	68,750.	18,925.	
Foundatio	ns that follow FASB ASC 958, check here			
and comp	ete lines 24, 25, 29, and 30.			
24 Net assets	without donor restrictions			
25 Net assets	with donor restrictions			
Foundatio	ns that do not follow FASB ASC 958, check here 🕨 🔀			
and comp	ete lines 26 through 30.			
24 Net assets 25 Net assets Foundatio and comp 26 Capital sto	ck, trust principal, or current funds	0.	0.	
27 Paid-in or	capital surplus, or land, bldg., and equipment fund	0.	0.	
Paid-in or 28 Retained e 29 Total net a	arnings, accumulated income, endowment, or other funds	84,632,728.	97,289,792.	
29 Total net	ssets or fund balances	84,632,728.	97,289,792.	
ž				
30 Total liabi	ities and net assets/fund balances	84,701,478.	97,308,717.	
	alysis of Changes in Net Assets or Fund B			
	<u> </u>			·
	or fund balances at beginning of year - Part II, column (a), line	29		04 404 75
, -	end-of-year figure reported on prior year's return)		. 1	84,632,728
	om Part I, line 27a		2	-1,468,618
Other increases	not included in line 2 (itemize) UNREALIZED	GAIN ON INVEST	MENTS 3	14,125,682
Add lines 1, 2, a	nd 3		4	97,289,792
Decreases not in	cłuded in line 2 (itemize) 🕨		5	_0
	or fund balances at end of year (line 4 minus line 5) - Part II, c		6	97,289,792

	J SIMONS FOUNDATI			<u> </u>	13-393	
Part IV Capital Gains a	ind Losses for Tax on Inv	restment Income	SEE	ATTAC:	HED STATEM	ENT
	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			low acquired - Purchase - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a						
b						
C					·	
d				:-		
е	<u> </u>				-	
(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 (
a		· ·				_
b					-	
C		· · · · · · · · · · · · · · · · · · ·			_	
d						
e 3,000,000.		229,2	17.		_	2,569,168.
	g gain in column (h) and owned by th		- / •		(I) Gains (Col. (h) gain	<u>"</u>
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		С	ol. (k), but not less than Losses (from col. (1 -0-) or
a		· · · · ·		•	=	
b			$\overline{}$			
C	·	··········		- "		
d	• • •			-		
e					_	2,569,168.
2 Capital gain net income or (net cap			}	2		2,569,168.
 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, of Part I, line 8 	s) as defined in sections 1222(5) and column (c). See instructions. If (loss)		}	3		0.
Part V Qualification Ur	nder Section 4940(e) for F	Reduced Tax on Net	Inve	stment Inc	ome	
SECTIO	N 4940(e) REPEALED O	N DECEMBER 20, 20	019 -	DO NOT C	OMPLETE.	
1 Reserved						
(a) Reserved	(b) Reserved		(c) Reserve	ed	Re	(d) served
Reserved	<u> </u>					j
Reserved						1
Reserved						i
Reserved]
Reserved						<u>-</u>
110001700	L				1 1	:
2 Reserved					2	
3 Reserved		• •			3	
4 Reserved					4	
5 Reserved					5	
6 Reserved					6	
7 Reserved					7	
8 Reserved					8	000 55
					F	orm 990-PF (2020)

	NC . on 4940(a) 4940(b) or 4948 - s	13-39.		Page 4
		ee mstruct	ions)	 ·
1a Exempt operating foundations described in section 4940(d)(2), check here		1 1		- 1
Date of ruling or determination letter: (attach copy of l	etter if necessary-see instructions)			لي
b Reserved	. }	1		0.
c All other domestic foundations enter 1.39% of line 27b. Exempt foreign organization	ions, enter 4%	1 1		į į
of Part I, line 12, col. (b)	J			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundation	ns only; others, enter -0-)	2		0.
3 Add lines 1 and 2		3		0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	ons only; others, enter -0-)	4		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, ent	ter -0-	5		0.
6 Credits/Payments:		_		ľ
a 2020 estimated tax payments and 2019 overpayment credited to 2020	6a 77,186	<u>i </u>		
b Exempt foreign organizations - tax withheld at source		<u> </u>		
c Tax paid with application for extension of time to file (Form 8868)).		- 1
d Backup withholding erroneously withheld	6d (<u> </u>		
7 Total credits and payments. Add lines 6a through 6d		7	77,18	
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2	2220 is attached	8		0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount of		10	77,18	
11 Enter the amount of line 10 to be: Credited to 2021 estimated tax	77,186. Refunded	<u>▶ 11 </u>		0.
Part VII-A Statements Regarding Activities				
1a During the tax year, did the foundation attempt to influence any national, state, or	local legislation or did it participate or interv	ene in	Yes	No
any political campaign?			1a	<u>X</u>
b Did it spend more than \$100 during the year (either directly or indirectly) for polit	tical purposes? See the instructions for the d	efinition	1b	<u> </u>
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities ar	nd copies of any materials published or			
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 year:			1
		<u>).</u>		- 1
e Enter the reimbursement (if any) paid by the foundation during the year for politic	cal expenditure tax imposed on foundation			
managers. > \$ 0.	ad to the IDC2			
2 Has the foundation engaged in any activities that have not previously been reported.	eo to the 142		2	<u> </u>
If "Yes," attach a detailed description of the activities.				
3 Has the foundation made any changes, not previously reported to the IRS, in its g	-	1, Of		X
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the cha	-	•	3 4a X	
4a Did the foundation have unrelated business gross income of \$1,000 or more during	ng the year?			
b If "Yes," has it filed a tax return on Form 990-T for this year?	- Marray 0		 	X
5 Was there a liquidation, termination, dissolution, or substantial contraction during	g the year?		5	^
If "Yes," attach the statement required by General Instruction T.	national authors			1
Are the requirements of section 508(e) (relating to sections 4941 through 4945) s	satistied either:			
By language in the governing instrument, or		4-4- 4		
By state legislation that effectively amends the governing instrument so that no	mandatory directions that conflict with the s	iate law		
remain in the governing instrument?			6 X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "\	res," complete 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 NY	e instructions. ►		_	
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-F	PF to the Attorney General (or designate)		- <u></u>	
of each state as required by General Instruction G? If "No," attach explanation	, <u>, , , , , , , , , , , , , , , , , , </u>		8b X	
9 Is the foundation claiming status as a private operating foundation within the mea	aning of section 4942(j)(3) or 4942(j)(5) for a	alendar		<u> </u>
year 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If			9	$\overline{\mathbf{x}}$ \mathbf{z}
10 Did any persons become substantial contributors during the tax year? If "Yes," atta			10	X
			Form 990-PF ((2020)

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Pa	rt VII-A Statements Regarding Activities (continued)			′
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		<u> </u>
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		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ ELIZABETH WILLIAMSON Telephone no. ▶ 631-68	<u> 39 – 0</u>	<u>619</u>	
	Located at ▶ 200 HARBOR ROAD, STONY BROOK, NY ZIP+4 ▶11	<u> 1790</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			
	and enter the amount of tax-exempt interest received or accrued during the year		/A	
16	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			ļ
Pa	irt 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
18	During the year, did the foundation (either directly or indirectly):			\neg
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1 1		- 1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	!		Ì
	a disqualified person? Yes X No			- 1
	(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) Transfer any income or assets to a disqualified person (or make any of either available			- 1
	for the benefit or use of a disqualified person)?			l i
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		x
	Organizations relying on a current notice regarding disaster assistance, check here			<u> </u>
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		X
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)):	1 1	1	1
а	At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines			1
	6d and 6e) for tax year(s) beginning before 2020?			- {
	If "Yes," list the years 			١.
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			- 1
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
c	if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			ī
	>			}
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			- 1
	during the year?	1 1		
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			ļ
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2020.) N/A	3b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			- 1
	had not been removed from jeopardy before the first day of the tax year beginning in 2020?	4b		X
_		rm 990)-PF	

Part VII-B Statements Regarding Activities for Which F		oguirod		13-3337	0 3 3		raye 6
	Orm 4/20 May be N	equired (continu	<u>ed)</u>		Yes	No
5a During the year, did the foundation pay or incur any amount to:		_	-	.		105	NO
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	• • • •	_ L	Yes	3 X No			1 1
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire	ectly,	-	[37]			1 1
any voter registration drive?	_	Ļ		s X No			1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes?		L	Yes	x X No			1 1
(4) Provide a grant to an organization other than a charitable, etc., organization	_	· ·			1		
4945(d)(4)(A)? See instructions			X Yes	s L No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	_						
the prevention of cruelty to children or animals?		L	Yes	x X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	· ·	n Regulations					
section 53.4945 or in a current notice regarding disaster assistance? See instru					5b	\vdash	X
Organizations relying on a current notice regarding disaster assistance, check h							i
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		_	ਰਾ				
· · · · · · · · · · · · · · · · · · ·	EE STATEMENT 8	5 L	X Yes	3			/ 1
If "Yes," attach the statement required by Regulations section 53.4945-5(d).							i I
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on	_	_	[32]			1
a personal benefit contract?	•	L	Yes	X No			ا_
b Did the foundation, during the year, pay premiums, directly or indirectly, on a po	ersonal benefit contract?				6b		X
If "Yes" to 6b, file Form 8870.			_	- I			i I
7a At any time during the tax year, was the foundation a party to a prohibited tax sl		. L	Yes	X No			
b If "Yes," did the foundation receive any proceeds or have any net income attribu				N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or	_	– 1	[TET]			
excess parachute payment(s) during the year? Part VIII Information About Officers, Directors, Truste	as Foundation Mo-	anna Ui		X No			
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	es, roundation mar	iagers, mi	gniy				
List all officers, directors, trustees, and foundation managers and the	eir compensation						
Eloc dil omoci di di cocoro, a docesi, ano foditalioni managero and al	(b) Title, and average	(c) Compens	ation	(d) Contributions to	T	(e) Exp	ense
(a) Name and address	hours per week devoted	(If not pai	đ,	(d) Contributions to employee benefit plans and deferred	3 a	(e) Expe	other
	to position	enter -0-	1	compensation	+	allowar	ices
SEE STATEMENT 7		1	0.	0 .			0.
SEE STATEMENT /			*		+		-•
		}					
			\rightarrow		+-		
			+		+		
					1		
Compensation of five highest-paid employees (other than those incl	uded on line 1). If none.	nter "NONE	."		1		
	(b) Title, and average	Ĭ		(d) Contributions to	. T	(e) Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compens	ation	employee benefit plans and deferred compensation	a	ccount, allowar	other
NONE	devoted to position			compensation	+	anowai	1003
HOND		<u> </u>					
					+		—
		1					
,		 	$\overline{}$	_	+		
· · · · · · · · · · · · · · · · · · ·							
	-		\dashv		+		—
		1					
		 	\dashv	_	+		
]					
Total number of other employees paid over \$50,000			1	<u> </u>			0
TORREST TRANSPORT OF OTHER STREET PARTY OF THE POPULATION OF THE P				Forr	n 99 ()-PF	
			•			,	·/

Form 990-PF (20	20) PAUL SIMONS FOUNDATION, INC.	13-	-3937693 Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highes	st-paid independent contractors for professional services. If none, enter "N	ONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NO	ONE		
	<u> </u>		
		 	
		_	
Total number of	fothers receiving over \$50,000 for professional services Summary of Direct Charitable Activities		▶ 0
	-		1
	ion's four largest direct charitable activities during the tax year. Include relevant statistical nizations and other beneficiaries served, conferences convened, research papers produced		Expenses
		ı, 6to.	
1N	/ A	 	1
-	· · · · · · · · · · · · · · · · · · ·		†
		· -	 -
2			1
•			1
3			
		•	1
	*** .	7-7	1
4			·
	· · · · · · · · · · · · · · · · · · ·]
Part IX-B	Summary of Program-Related Investments		
Describe the two	o largest program-related investments made by the foundation during the tax year on lines	3 1 and 2.	Amount
1 NONE		·	
			0.
2			
			1
			
	m-related investments. See instructions.		
3 NONE			1
			1
_			†
	N-,		1
	.	<u> </u>	0.
Total Add lines	s 1 through 3		0.

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Form **990-PF** (2020)

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_	m 990-PF (2020) PAUL SIMONS FOUNDATION, INC.		3-3937693	Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	dation	s, see instructions.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
а	Average monthly fair market value of securities	1a	84,554,	920.
Ь	Average of monthly cash balances	1b	84,554, 4,905,	825.
C	Fair market value of all other assets	1c		
d	Total (add lines 1a, b, and c)	1d	89,460,	745.
e	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation) 1e 0 •			
2	Acquisition indebtedness applicable to line 1 assets	2		0.
3	Subtract line 2 from line 1d	3	89,460,	745.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,341,	911.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	88,118,	834.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	2,221,	
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certai	n	
	foreign organizations, check here 🕨 🔛 and do not complete this part.)			
1	Minimum investment return from Part X, line 6	_1_	2,221,	<u>,035.</u>
2a	Tax on investment income for 2020 from Part VI, line 5			
b	Income tax for 2020. (This does not include the tax from Part VI.)	_		
C	Add lines 2a and 2b	2c		0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,221,	<u>,035.</u>
4	Recoveries of amounts treated as qualifying distributions	4		0.
5	Add lines 3 and 4	5	2,221,	
6	Deduction from distributable amount (see instructions)	6		0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,221,	<u>,035.</u>
P	art 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	3,465,	881.
b	Program-related investments - total from Part IX-B	1b		0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2		
3	Amounts set aside for specific charitable projects that satisfy the:			
a	Suitability test (prior IRS approval required)	3a		
b	Cash distribution test (attach the required schedule)	3ь		
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	3,465,	881.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment			
	income. Enter 1% of Part I, line 27b	5		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,465,	881.

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

Form **990-PF** (2020)

6 Adjusted qualifying distributions. Subtract line 5 from line 4

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
4 Distributable supposed for 2020 forms B of VI	Corpus	rears prior to 2015	2013	2020
1 Distributable amount for 2020 from Part XI, line 7] '	'	•	2,221,035.
2 Undistributed income, if any, as of the end of 2020				2/22/035
a Enter amount for 2019 only			0.	
b Total for prior years:			•	
2016 , 2017 , 2018		0.		
3 Excess distributions carryover, if any, to 2020:			-	
a From 2015 3,768,822.				
b From 2016 1,691,292.				ì
c From 2017 1,164,067.				
d From 2018 1,302,435.				
e From 2019 1,225,465.				
f Total of lines 3a through e	9,152,081.		-	
4 Qualifying distributions for 2020 from	5,1201,0011			
Part XII, line 4: ►\$ 3,465,881.				
a Applied to 2019, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				-
(Election required - see instructions)	0.			
d Applied to 2020 distributable amount				2,221,035.
e Remaining amount distributed out of corpus	1,244,846.			}
5 Excess distributions carryover applied to 2020 (If an amount appears in column (d), the same amount				
must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e. Subtract line 5	10,396,927.			J
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable		•		
amount - see instructions		0.		
e Undistributed income for 2019. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	•
f Undistributed income for 2020. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2021			•	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)	0.			
8 Excess distributions carryover from 2015				
not applied on line 5 or line 7	3,768,822.			
9 Excess distributions carryover to 2021.				
Subtract lines 7 and 8 from line 6a	6,628,105.			
O Analysis of line 9:				
a Excess from 2016 1,691,292.				
b Excess from 2017 1,164,067.				
c Excess from 2018 1,302,435.				i
d Excess from 2019 1,225,465.				•
e Excess from 2020 1,244,846.				

023581 12-02-20

Form 990-PF (2020)

023611 12-02-20

Total

▶ 3b

0.

Form 990-PF (2020)

Form 990-PF (2020) PAUL SIMONS F	OUNDATION,	INC.		13-3	1937693 Page 1
Part XVI-A Analysis of Income-Prod	lucing Activitie	s			
Enter gross amounts unless otherwise indicated.	Unrelated t	usiness income		y section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b					
G					
d					
e					
1					
g Fees and contracts from government agencies	_				
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	1,188.	
4 Dividends and interest from securities			1	1,100.	
•					
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			ļļ		
Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			\bot		· · · · · · · · · · · · · · · · · · ·
11 Other revenue:					
a	_		\bot		
b	_				
c					
d	_				
e	_				
12 Subtotal. Add columns (b), (d), and (e)		0.	<u> </u>	1,188.	
13 Total. Add line 12, columns (b), (d), and (e)				13	1,188.
(See worksheet in line 13 instructions to verify calculations.	.)				
Part XVI-B Relationship of Activities		plishment of Ex	empt Pur	poses	
Line No. Explain below how each activity for which ii	ncome is reported in c	olumn (e) of Part XVI-	A contributed	importantly to the accomp	lishment of
▼ the foundation's exempt purposes (other th	an by providing funds	for such purposes).		_	
					•
					
		<u>-</u>			
					
		· · · · · · · · · · · · · · · · · · ·			·
					.
				··	
-				<u></u> _	·

Form **990-PF** (2020)

023621 12-02-20

•		Exempt Organ	izations							
1	Did the o	organization directly or indi	rectly engage in any	of the followi	ng with any other organizati	on described in sect	tion 501(c)		Yes	No
	(other th	an section 501(c)(3) organ	nizations) or in sectio	n 527, relatin	g to political organizations?					
8	Transfer	s from the reporting found	ation to a noncharital	ble exempt or	ganızation of:					
	(1) Cas	h .						1a(1)		X
	(2) Oth	er assets						1a(2)		X
b	Other tra	insactions:								
	(1) Sale	es of assets to a noncharita	ıble exempt organizat	non .		_		1b(1)		X
	•	chases of assets from a no						1b(2)		_X
	(3) Ren	tal of facilities, equipment,	or other assets					1b(3)		X
		nbursement arrangements						1b(4)		X
	(5) Loans or loan guarantees									X
	(6) Perf	formance of services or me	embership or fundrais	sing solicitatio	ons			1b(6)		X
C	Sharing	of facilities, equipment, ma	uling lists, other asse	ts, or paid em	nployees .	-		1c		X
đ	If the ans	swer to any of the above is	"Yes," complete the f	ollowing sch	edule. Column (b) should al	ways show the fair	market value of the go	ods, other ass	ets,	
	or service	es given by the reporting fo	oundation. If the four	ndation receiv	ed less than fair market valu	ie in any transaction	or sharing arrangeme	ent, show in		
		(d) the value of the goods,				· · · · · · · · · · · · · · · · · · ·				
(a)∟	ine no	(b) Amount involved	(c) Name of		e exempt organization	(d) Descriptio	n of transfers, transactions	, and sharing arra	ingemen	ts
				N/A						
		 					·			
								_		
										
						+				
				 			 			
	-+		· · · · · · · · · · · · · · · · · · ·			+				
	\rightarrow	· · · · · · · · · · · · · · · · · · ·				+	· · · · · · · · · · · · · · · · · · ·			
	- -						·			
										
				·						
			<u> </u>							
						1				•
									,	
28	Is the for	undation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described				
	in sectio	n 501(c) (other than sectio	n 501(c)(3)) or in sec	ction 527?		-		Yes	X] No
b	If "Yes,"	complete the following sch	edule.			,				
		(a) Name of org	ganization		(b) Type of organization	ļ	(c) Description of rela	tionship		
		N/A					· · ·			
			<u> </u>							
	Llode	r nanalties of narum, I declare t	that I have evernined this	return including	accompanying schedules and st	atements, and to the he	st of my knowledge			
Siç					taxpayer) is based on all Informa			May the IRS d	prepare	r
He	re	A Solor N	Dellaric	~~	10/29/20	TREASU	TD FD	shown below?	See ins	No
		nature of officer or trustee	MANUTAL		Date	Title	JACDIC	143	<u> </u>) NO
	1 018	Print/Type preparer's na		Preparer's s		Date	Check if F	PTIN		
			-				self- employed			
Pa	id	SCOTT THOM	PSETT	۱۱کیور	Shangsett	10/21/2021	, -	P00741	490	
Pro	eparer	Firm's name ► GRA		ON LLP		*	Firm's EIN ► 36			
Us	e Only		-							
		Firm's address ► 75	7 THIRD A	VENUE,	3RD FLOOR					
		NE	W YORK, N	Y 1001	7-2013		Phone no. 212	<u>-599-0:</u>		
								Form 990)-PF (2020)

PAUL	SIMONS	FOUNDATION,	, INC.
Dart I	0	' d I d T	_ 1

Capital Gains and Los	ses for fax on investment income				
(a) List and 2-story br	describe the kind(s) of property sold ick warehouse; or common stock, 20	l, e.g., real estate, 0 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a FUND-OF-FUND RE	EDEMPTION SALES	P	01/01/16	12/31/20	
	ZED GAIN FROM LP		P		
	LIZED LOSS FROM L		P		
	RM CAPITAL GAIN F			· · · · · · · · · · · · · · · · · · ·	
					
	A CAPITAL GAIN FR	OM OBIT			<u> </u>
f LESS: 1231 GAIN	FROM UBTI				
g					
<u>h</u>					
1					
1					
k			ľ		
1					
<u></u>					
***					•
<u>n</u>					
(e) Gross sales price	(1) Depreciation allowed	(g) Cost or other basis		Gain or (loss)	
	(or allowable)	plus expense of sale	(e) t	lus (f) minus (g)	
a 3,000,000.	0.	229,217.			770,783.
b					788,162.
<u></u>					076,528.
d					-43,016.
e					-7,379.
f					-1,190.
9	· .				
h .					
<u>"</u>					
<u> </u>					
<u>k</u>					
<u> </u>					
<u>m</u>					
<u>n</u>					
0					
Complete only for assets showin	g gain in column (h) and owned by th	ne foundation on 12/31/69		ses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (ı) over col. (j), ıf any	Gains (excess of but n	of col. (h) gain over ot less than "-0-")	col. (k),
a				2.	770,783.
b				2.	788,162.
				_ <u>_ ,</u>	076,528.
c d		***************************************			-43,016.
	 				-7,379.
<u>e</u>					-1,190.
<u>f</u>					±,±30•
9				·	
<u>h</u>					
<u> </u>				· 	
k					
1					
m					
n					
0					
2 Capital gain net income or (net cap	pital loss) { If gain, also enter If (loss), enter "-0-	in Part I, line 7	2	-2.	569,168.
		`			<u> </u>
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) and	J (b).			
If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line 8		ŗ	9		0.
in (1055), circi -u- in Fart i, line o		<i>)</i>	3		

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Employer identification number Name of the organization 13-3937693 PAUL SIMONS FOUNDATION, Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entening "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

PAUL	SIMONS	FOUNDATION,	INC.

13-3937693

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	JIM SIMONS 160 FIFTH AVENUE, 7TH FLOOR NEW YORK, NY 10010	\$\$ \$	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
2	MARILYN SIMONS 160 FIFTH AVENUE, 7TH FLOOR NEW YORK, NY 10010	\$1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)	

Name of organization

Employer identification number

PAUL SIMONS FOUNDATION, INC.

13-3937693

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(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.)	(d) Date received
		\$	
(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.)	(d) Date received
		\$	
(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.)	(d) Date received
		\$	

Page 4 Schedule B (Form 990, 990-EZ, or 990-PF) (2020) **Employer identification number** Name of organization PAUL SIMONS FOUNDATION, 13-3937693 INC. Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info ence) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

07461020 153424 0181095-00029

FORM 990-PF	OTHER	INCOME	S	TATEMENT 1
DESCRIPTION			(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
PORTFOLIO LOSS FROM INVESTMEN LIMITED PARTNERSHIPS	TS IN	0.	-1,248,397.	0.
TOTAL TO FORM 990-PF, PART I,	LINE 11	0.	-1,248,397.	0.
FORM 990-PF	LEGA	L FEES	S	TATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS		ADJUSTED	(D) CHARITABLE PURPOSES
LOEB, BLOCK & PARTNERS LLP	6,106	. 0.	. 0.	6,106.
TO FM 990-PF, PG 1, LN 16A	6,106	. 0.	0.	6,106.
FORM 990-PF	ACCOUNTING FEES			TATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
GRANT THORNTON LLP	5,950	. 0.	. 0.	2,275.
TO FORM 990-PF, PG 1, LN 16B	5,950	0.	0.	2,275.
FORM 990-PF	TA	XES	S	TATEMENT 4
			 	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES	0	30,295.	. 0.	0.
STATE UNRELATED BUSINESS INCOME TAX	250	. 0.	. 0.	0.
TO FORM 990-PF, PG 1, LN 18	250	. 30,295.	0.	0.
_			- 	

FORM 990-PF	OTHER E	XPENSES	STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
STATE FILING FEES	1,500.	0.	0.	1,500.		
TO FORM 990-PF, PG 1; LN 23	1,500.	0.	0.	1,500.		

FORM 990-PF OTHER	RINVESTMENTS		STATEMENT 6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
LIMITED PARTNERSHIPS	FMV	63,586,403.	63,586,403.
ALTERNATIVE INVESTMENTS	FMV	25,903,455.	25,903,455.
INVESTMENT REDEMPTION RECEIVABLE	FMV	3,000,000.	3,000,000.
TOTAL TO FORM 990-PF, PART II, LINE	13	92,489,858.	92,489,858.

FORM 990-PF	PART VIII - TRUSTEES	- LIST OF OFFICERS, DIRECTORS STATEMENT 7 EES AND FOUNDATION MANAGERS					
NAME AND ADDRESS			TITLE AN		OMPEN- ATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JAMES H. SIMONS 200 HARBOR ROAD STONY BROOK, NY 11	790		PRESIDENT 0.25		0.	0.	0.
MARILYN SIMONS 200 HARBOR ROAD STONY BROOK, NY 11	790		SECRETARY 0.25		0.	0.	0.
ELIZABETH SIMONS 200 HARBOR ROAD STONY BROOK, NY 11	790		DIRECTOR 0.25		0.	0.	0.
NATHANIEL SIMONS 200 HARBOR ROAD STONY BROOK, NY 11	790		DIRECTOR 0.25		0.	0.	0.
KATHERINE GRIFFITH: 200 HARBOR ROAD STONY BROOK, NY 11			ASSISTANT 0.25	SECRETA	RY 0.	0.	0.
ELIZABETH WILLIAMS 200 HARBOR ROAD STONY BROOK, NY 11			TREASURER 0.25		0.	0.	0.
TOTALS INCLUDED ON	990-PF, PAG	€E 6,	PART VIII		0.	0.	0.

FORM 990-PF

EXPENDITURE RESPONSIBILITY STATEMENT PART VII-B, LINE 5C

STATEMENT 8

GRANTEE'S NAME

AVALON NATURE PRESERVE, INC.

GRANTEE'S ADDRESS

200 HARBOR ROAD STONY BROOK, NY 11790

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED VERIFICATION DATE

3,456,000.

12/15/20

3,456,000.

03/31/21

PURPOSE OF GRANT

FOR THE PRESERVATION AND MAINTENANCE OF A 217-ACRE NATURE PRESERVE.

DATES OF REPORTS BY GRANTEE

DECEMBER 31, 2020

ANY DIVERSION BY GRANTEE

NO

RESULTS OF VERIFICATION

THE DATES OF THE GRANTS WERE 8/12/20, 9/8/20, 10/6/20, 10/30/20, 11/2/20, 12/8/20 AND 12/15/20. TO THE BEST OF THE FOUNDATION'S KNOWLEDGE, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS (OR INCOME THEREFROM) FROM THE PURPOSE OF THE GRANT. BOTH THE PAUL SIMONS FOUNDATION AND AVALON NATURE PRESERVE, INC. ARE SUPERVISED BY THE SAME FINANCE TEAM AND THE FOUNDATION HAS ACCESS DAILY TO A DETAILED REPORT OF THE PRESERVE'S EXPENDITURES. THE FOUNDATION HAS NOT UNDERTAKEN AN INVESTIGATION OF THE GRANTEE'S REPORTS BECAUSE IT HAS NO REASON TO BELIEVE THAT THOSE REPORTS ARE OF DUBIOUS ACCURACY. THE GRANTEE HAS CERTIFIED THAT IT HAS EXPENDED, FOR CHARITABLE AND EDUCATIONAL PURPOSES, AN AMOUNT EQUAL TO THE VALUE OF THE GRANT NOT LATER THAN THE END OF THE GRANTEE'S FIRST TAXABLE YEAR AFTER THE TAXABLE YEAR IN WHICH THE GRANT WAS RECEIVED, IN ACCORDANCE WITH THE OUT-OF-CORPUS RULES OF SECTION 4942(G)(3) OF THE CODE.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 9

NAME OF MANAGER

JAMES H. SIMONS MARILYN SIMONS

GENERAL EXPLANATION

STATEMENT 10

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

FORM 990-PF, PART XII - QUALIFYING DISTRIBUTIONS

EXPLANATION:

THE GRANT OF \$3,456,000 TO AVALON NATURE PRESERVE, INC. SHALL BE TREATED AS A QUALIFYING DISTRIBUTION OF THE PAUL SIMON'S FOUNDATION. THIS IS PERMITTED UNDER 53.4942(A)(3)(C)(1) BECAUSE:

- A. NOT LATER THAN ONE YEAR AFTER THE END OF THE TAX YEAR IN WHICH THE AVALON NATURE PRESERVE, INC. RECEIVED FUNDING FROM THE PAUL SIMONS FOUNDATION, IT MADE A DISTRIBUTION EQUAL TO THE FULL AMOUNT OF THE CONTRIBUTION. THE DISTRIBUTION CONSTITUTES A QUALIFYING DISTRIBUTION THAT IS TREATED AS BEING MADE OUT OF CORPUS (OR WOULD BE TREATED AS SUCH IF AVALON NATURE PRESERVE, INC. WERE A PRIVATE NON-OPERATING FOUNDATION), AND
- B. AVALON NATURE PRESERVE, INC. HAS PROVIDED ADEQUATE RECORDS TO THE PAUL SIMONS FOUNDATION THAT IT HAS ACTUALLY PAID OUT THE GRANTED FUNDS TOWARDS EXPENDITURES USED IN FURTHERANCE OF OPERATING THE PRESERVE.

AVALON NATURE PRESERVE, INC. IS NOT RECOGNIZING THESE EXPENSES AS QUALIFYING DISTRIBUTIONS ON ITS OWN TAX RETURN. FOR PURPOSES OF SECTION 53.4942(A)(3)(C)(1), EXPENSES INCURRED IN THE FURTHERANCE OF FULFILLING THE PRESERVE'S CHARITABLE MISSION (E.G. OPERATING THE PRESERVE) CONSTITUTE A "PAYOUT" THAT SATISFIES THE QUALIFYING DISTRIBUTION REQUIREMENTS.