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2020

OMB No. 1545-0052

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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.
 Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

or	caler	ndar year 2020, or tax year beginning 01-01-20)20 , ar	nd ending 12-31	L-2020	•
Nam	e of fou	ındation		A Employer i	identification numbe	r
TH	E TILLE	Y CHARITABLE FOUNDATION		20-3825855		
		d street (or P.O. box number if mail is not delivered to street address) IORE ROAD	Room/suite	B Telephone r	number (see instruction	ns)
		n, state or province, country, and ZIP or foreign postal code N, RI 02835		C If exemptio	n application is pendin	g, check here
i Ch	ieck al	Il that apply: Linitial return Linitial return of a	former public charity	_	organizations, check he	▶ ∟
		☐ Final return ☐ Amended return			organizations meeting eck here and attach co	
		☐ Address change ☐ Name change		E If private f	oundation status was t	erminated \Box
_	•	rpe of organization: Section 501(c)(3) exempt private			ion 507(b)(1)(A), chec	
			e private foundation			
of '	year (f	xet value of all assets at end from Part II, col. (c), ▶\$ 3,066,809 J Accounting method: □ Other (specify) (Part I, column (d) must	☑ Cash ☐ Accru		dation is in a 60-montl ion 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	197,402			
	2	Check ▶ ☐ if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	185	18	185	
Revenue	4	Dividends and interest from securities	56,416	56,41	.6 56,416	
	5a	Gross rents				
	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10	223,963			
	b	Gross sales price for all assets on line 6a1,306,084				
α	7	Capital gain net income (from Part IV, line 2)		223,96	53	
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances	[
	b	Gross profit or (loss) (attach schedule)				
	C	Other income (attach schedule)	9 73,577			
	11		551,543		54 56,601	
	12	•	331,343	260,30	30,001	
	13 14	Compensation of officers, directors, trustees, etc. Other employee salaries and wages				
	15	Pension plans, employee benefits				
Se	16a	Legal fees (attach schedule)				
<u> </u>	b	Accounting fees (attach schedule)	9 1,550		1,550	
Ϋ́	c	Other professional fees (attach schedule)	13,133			
Ve Ve	17	Interest	13,133	13,13	15,155	
تع ت	18		9 760	76	50	
<u> </u>	19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion		, ,	7	
Ē						
Ad	20 21	Occupancy				
ם ב	22	Printing and publications				
Operating and Administrative Expenses	23	Other expenses (attach schedule)	73	7	73 73	
E E	24	Total operating and administrative expenses.			1	
ě		Add lines 13 through 23	15,516	13,96	56 14,756	
5	25	Contributions, gifts, grants paid	120,000	·	· ·	120,000
	26	Total expenses and disbursements. Add lines 24 and 25	135 516	12.00	14.750	120.000
	27	Subtract line 26 from line 12:	135,516	13,96	14,756	120,000
	a	Excess of revenue over expenses and				
		disbursements	416,027			
	b	Net investment income (if negative, enter -0-)		266,59	98	
	С	Adjusted net income (if negative, enter -0-)			41,845	

Beginning of year

Page 2

End of year

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Net Assets or

30

Part III

2

3

		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 ▶			
اير	8	Inventories for sale or use			
sel	8 9 10a	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	2,625,661	3,044,747	3,044,747
	c	Investments—corporate bonds (attach schedule)			

Investments—land, buildings, and equipment: basis ▶ 11 Less: accumulated depreciation (attach schedule)

		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)	2,650,782	3,066,809	3,066,809
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe			
	23	Total liabilities(add lines 17 through 22)		0	
es		Foundations that follow FASB ASC 958, check here 🕨 🔽			
ĕ		and complete lines 24, 25, 29 and 30.			
Balances	24	Net assets without donor restrictions	2,650,782		
Б В	25	Net assets with donor restrictions			
pun ₋		Foundations that do not follow FASB ASC 958, check here 🕨 🗌			

and complete lines 26 through 30. Capital stock, trust principal, or current funds . . .

2,650,782

3,066,809

2,650,782

3,066,809

3,066,809 Form **990-PF** (2020)

416,027

1

2

3

4

5

6

26 Paid-in or capital surplus, or land, bldg., and equipment fund 27 28 Retained earnings, accumulated income, endowment, or other funds 2,650,782 29 Total net assets or fund balances (see instructions) 3,066,809

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Total net assets or fund balances at beginning of year-Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Page **3**

		kind(s) of property sold (e.g. se; or common stock, 200 sł			(b) How acqui P—Purcha D—Donat	ase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1 a V	ARIOUS SEE ATTACHED SHOP	RT TERM			Р		2020-01-01	2020-12-31		
b V	ARIOUS SEE ATTACHED LONG	TERM			Р		2000-01-01	2020-12-31		
c V	ARIOUS SEE ATTACHED LONG	TERM			Р		2000-01-01	2020-12-31		
d C	Capital Gain Dividends									
e										
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		Cost or	(g) other basis ense of sale			(h) or (loss) (f) minus (g)		
a	87,637					2,286	-24,			
b	1,072,775				84	6,422	226,3			
С	141,834				12	3,413		18,421		
d								3,838		
e										
	Complete only for assets showi	ng gain in column (h) and o	wned by	the foundation	on 12/31/69			(1)		
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		Excess	(k) of col. (i) . (j), if any		col. (k), but n	(h) gain minus ot less than -0-) or from col.(h))		
а								-24,649		
b								226,353		
С								18,421		
d										
3	Capital gain net income or (net Net short-term capital gain or If gain, also enter in Part I, lin in Part I, line 8	(loss) as defined in sections	1222(5 tions). I	(loss), enter -0	-		3 3 Come	-24,649		
	ON 4940(e) REPEALED									
	Reserved	•								
	(a) Reserved	(b) Reserved		(c) Reserved			(d) Reserved			
2 R	Reserved		<u> </u>			2				
3 R	eserved					3				
	Reserved		· · ·							
						4				
	Reserved					5				
	Reserved					6				
7 R	Reserved					7				
8 R	Reserved ,					8				

Pal	Lt ATT-R	Statements Regard	ııng	Activities for Which	Form 4/20 May Be	: Requirea (c	ontinue	ea)				
5a	During the	year did the foundation p	рау о	r incur any amount to:							Yes	No
	(1) Carry o	on propaganda, or otherw	vise a	ttempt to influence legisla	ation (section 4945(e))?	Γ	Yes	~	No			
	(2) Influen	ce the outcome of any sp	pecific	public election (see sect	ion 4955); or to carry		163		110			
	on, dire	ectly or indirectly, any vo	ter re	gistration drive?			Yes	~	No			
	(3) Provide	a grant to an individual	for t	avel, study, or other simi	ilar purposes?	Ī	Yes		No			
	(4) Provide	e a grant to an organizati	on ot	her than a charitable, etc	, organization described	d	_ 165	ب	110			
	in secti	on 4945(d)(4)(A)? See ir	nstru	ctions		٠. ٢	Yes	✓	No			
	(5) Provide	e for any purpose other t	han r	eligious, charitable, scient	tific, literary, or	_	c3					
	educati	ional purposes, or for the	prev	ention of cruelty to childr	en or animals?	[Yes	~	No			
b	If any answ	ver is "Yes" to 5a(1)-(5),	did a	ny of the transactions fa	il to qualify under the ex	ceptions describ	ped in	ب	110			
	Regulations	s section 53.4945 or in a	curre	nt notice regarding disas	ter assistance? See instr	uctions				5b		
	Organizatio	ns relying on a current n	otice	regarding disaster assist	ance check here		. ▶					
C		·		does the foundation claim	•				'			
	tax because	e it maintained expenditu	ıre re	sponsibility for the grant?	2	[Yes	П	No			
	If "Yes," att	tach the statement requi	red b	y Regulations section 53.	4945-5(d).	_		_				
6a	Did the fou	ndation, during the year,	rece	ive any funds, directly or	indirectly, to pay premiu	ums on						
	a personal	benefit contract?				. [Yes	V	No			
b	Did the fou	ndation, during the year,	pay	premiums, directly or ind	irectly, on a personal be	nefit contract?			'''	6b		No
	If "Yes" to 6	6b, file Form 8870.										
7a	At any time	during the tax year, wa	s the	foundation a party to a p	rohibited tax shelter trai	nsaction?	Yes	~	No			
b	If "Yes", did	d the foundation receive	any p	roceeds or have any net	income attributable to th	ne transaction?			''"	7b		
8	Is the found	dation subject to the sec	tion 4	960 tax on payment(s) o	f more than \$1,000,000	in remuneration	n or					
	excess para	achute payment during th	ne ye	ar?		· · _ [Yes	~	No			
	I VIII I	Information About (Offic	ers, Directors, Trust	ees, Foundation Ma	anagers, Hig				yees,		
Pa	rt VIII	and Contractors										
1	List all offi	cers, directors, truste	es, fo	oundation managers an	d their compensation	. See instruction	ons					
			(b) Title, and average	(c) Compensation (If	(d) Contrib			(e)	Expen	se acc	ount.
	(a) Nan	ne and address		hours per week devoted to position	not paid, enter -0-)	employee bene deferred con					lowanc	
TFVI	EN TILLEY		Presi		0		трепзас					
	SHORE ROAD		6.00	20110	O							
	STOWN, RI 02	835										
ATR)	ICIA TILLEY			President	0							
	SHORE ROAD STOWN, RI 02	1025	0.50									
	EN TILLEY II	.655	Secre	ntary	0				1			
	SHORE ROAD		0.25	ctary	U							
	STOWN, RI 02	835										
1ICH.	AEL TILLEY		Treas	surer	0							
	SHORE ROAD	1025	0.25									
2	Compensal		id en	nployees (other than th	ose included on line t	 _see instruct	ions)	If no	ne er	ter "	NONE	**
	Compensa	tion of five ingliest pa	ia cii			(d) Contrib			iic, ci	icci i	TOITE	
(a)	Name and ac	dress of each employee	paid	(b) Title, and average hours per week	(c) Compensation	employee					se acco	
	mor	re than \$50,000		devoted to position	(c) Compensation	plans and		d	ot	her all	owance	es
						compen	sation					
ION	=											
								-				
								-				
ota	I number of	other employees paid ov	er \$5	0,000								
									F	^^() DE/	2020

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter "NOI	NE".
(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	respectively.	
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
1		
2		
3		
4		
Deleted Towns of Deleted Towns of Construction		
Part IX-B Summary of Program-Related Investments (see in Describe the two largest program-related investments made by the foundation during the		Amount
1	ie tax year on illes 1 and 2.	Amount
2		
All other program-related investments. See instructions.		
3		
-		
Total. Add lines 1 through 3		
		- 000 5= (0000)

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

1

2

3

4

5

b

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

1a

1b

2

За 3h

4

5

120,000

120,000

120,000

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10 Analysis of line 9:

a Excess from 2016. . . .
 b Excess from 2017. . . .
 c Excess from 2018. . . .
 d Excess from 2019. . . .
 e Excess from 2020. . . .

4	Part XIII Olidistributed Ilicollie (see ilistructi			()	(1)
		(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1	Distributable amount for 2020 from Part XI, line 7				137,090
2	Undistributed income, if any, as of the end of 2020:				
а	Enter amount for 2019 only			119,796	
b	Total for prior years: 20, 20				
3	Excess distributions carryover, if any, to 2020:				
а	From 2015				
b					
c	: From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through e				
4	Qualifying distributions for 2020 from Part				
	XII, line 4: ► \$				
а	Applied to 2019, but not more than line 2a			119,796	
b	Applied to undistributed income of prior years (Election required—see instructions)				
c	: Treated as distributions out of corpus (Election required—see instructions)		0		
d	Applied to 2020 distributable amount.				204
	Remaining amount distributed out of corpus				
	Excess distributions carryover applied to 2020.				
3	· · · · · · · ·		+		
_	(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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
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				
е	Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see				
£	instructions		 		
T	lines 4d and 5 from line 1. This amount must be distributed in 2020				136,886
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)				
9	· · · · · · · · · · · · · · · · · · ·				
_	Subtract lines 7 and 8 from line 6a				

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F	Part XIV Private Operating Found	ations (see instr	uctions and Part \	VII-A, question 9)		
1a	If the foundation has received a ruling or de foundation, and the ruling is effective for 20					
b	Check box to indicate whether the organization	ion is a private oper	ating foundation des	scribed in section $ {\sf L} $	☐ 4942(j)(3) or ☐] 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2020	(b) 2019	(c) 2018	(d) 2017	(e) Total
b	85% of line 2a					
С	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					
е	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:					
а	"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					
С						
	(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					
	Supplementary Information			foundation had	\$5,000 or more	in
	assets at any time during th		ructions.)			
1 a	Information Regarding Foundation Man List any managers of the foundation who hav before the close of any tax year (but only if	e contributed more	than 2% of the tota ed more than \$5,00	al contributions recei 10). (See section 507	ved by the foundatio 7(d)(2).)	n
_	See Additional Data Table					
b	List any managers of the foundation who ow ownership of a partnership or other entity)	n 10% or more of th of which the foundat	ie stock of a corpora ion has a 10% or g	ation (or an equally l reater interest.	arge portion of the	
2	Information Regarding Contribution, Gr		• • • • • • • • • • • • • • • • • • • •	-		
	Check here ► ☑ if the foundation only mak unsolicited requests for funds. If the founda other conditions, complete items 2a, b, c, a	tion makes gifts, gra	ants, etc. to individu	le organizations and uals or organizations	does not accept under	
a	The name, address, and telephone number of	or email address of t	the person to whom	applications should	be addressed:	
b	The form in which applications should be sul	omitted and informa	tion and materials t	hey should include:		
С	Any submission deadlines:					
d	Any restrictions or limitations on awards, su factors:	ch as by geographic	al areas, charitable	fields, kinds of instit	utions, or other	

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Part XV Supplementary Informa	ition (continued)										
3 Grants and Contributions Paid	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	Purpose of grant or	Amount							
Name and address (home or business)		recipient	contribution	Amount							
a Paid during the year			1								
See Additional Data Table		<u> </u>	<u> </u>								
Total			> 3a	120,000							
b Approved for future payment											
		+									
	'	1									
	1	1									
	,	1									
	,	1									
	,	1									
		1									
Total			▶ 3b								

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ter gross amouni	ts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
Program service	revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
a						
						1
a						
	tracts from government agencies					
	es and assessments					
investments	ings and temporary cash					18
	interest from securities					56,416
	me or (loss) from real estate:					
	d property					
	me or (loss) from personal property	,				
	ent income.					
	rom sales of assets other than					
						223,96
	(loss) from special events:					
Other revenue:	(loss) from sales of inventory					
a UNREALIZED HO						73,57
	52B1110 5/1111					, 5,5,
_						
С						
de						
deSubtotal. Add d	columns (b), (d), and (e).					
deSubtotal. Add ine (See worksheet		culations.)			3	354,141 354,141
de Subtotal. Add of Total. Add line (See worksheet Int XVI-B Fine No. Explain the a	columns (b), (d), and (e). 12, columns (b), (d), and (e). in line 13 instructions to verify calc	culations.) the Accomplish th income is report	nment of Exem	pt Purposes f Part XVI-A contribu	ted importantly t	354,141
d	columns (b), (d), and (e). 12, columns (b), (d), and (e). in line 13 instructions to verify calc Relationship of Activities to the complishment of the foundation's	culations.) the Accomplish th income is report	nment of Exem	pt Purposes f Part XVI-A contribu	ted importantly t	354,141
d	columns (b), (d), and (e). 12, columns (b), (d), and (e). in line 13 instructions to verify calc Relationship of Activities to the complishment of the foundation's	culations.) the Accomplish th income is report	nment of Exem	pt Purposes f Part XVI-A contribu	ted importantly t	354,141
de Subtotal. Add of Total. Add line (See worksheet Int XVI-B Fine No. Explain the a	columns (b), (d), and (e). 12, columns (b), (d), and (e). in line 13 instructions to verify calc Relationship of Activities to the complishment of the foundation's	culations.) the Accomplish th income is report	nment of Exem	pt Purposes f Part XVI-A contribu	ted importantly t	354,141
d	columns (b), (d), and (e). 12, columns (b), (d), and (e). in line 13 instructions to verify calc Relationship of Activities to the complishment of the foundation's	culations.) the Accomplish th income is report	nment of Exem	pt Purposes f Part XVI-A contribu	ted importantly t	354,141
d	columns (b), (d), and (e). 12, columns (b), (d), and (e). in line 13 instructions to verify calc Relationship of Activities to the complishment of the foundation's	culations.) the Accomplish th income is report	nment of Exem	pt Purposes f Part XVI-A contribu	ted importantly t	354,141
de Subtotal. Add of Total. Add line (See worksheet Int XVI-B Fine No. Explain the a	columns (b), (d), and (e). 12, columns (b), (d), and (e). in line 13 instructions to verify calc Relationship of Activities to the complishment of the foundation's	culations.) the Accomplish th income is report	nment of Exem	pt Purposes f Part XVI-A contribu	ted importantly t	354,14:
d	columns (b), (d), and (e). 12, columns (b), (d), and (e). in line 13 instructions to verify calc Relationship of Activities to the complishment of the foundation's	culations.) the Accomplish th income is report	nment of Exem	pt Purposes f Part XVI-A contribu	ted importantly t	354,141
Subtotal. Add of Total. Add line (See worksheet art XVI-B Fine No. Explain the a	columns (b), (d), and (e). 12, columns (b), (d), and (e). in line 13 instructions to verify calc Relationship of Activities to the complishment of the foundation's	culations.) the Accomplish th income is report	nment of Exem	pt Purposes f Part XVI-A contribu	ted importantly t	354,141
Subtotal. Add of Total. Add line (See worksheet art XVI-B Fine No. Explain the a	columns (b), (d), and (e). 12, columns (b), (d), and (e). in line 13 instructions to verify calc Relationship of Activities to the complishment of the foundation's	culations.) the Accomplish th income is report	nment of Exem	pt Purposes f Part XVI-A contribu	ted importantly t	354,141
subtotal. Add of Total. Add line (See worksheet art XVI-B Fine No. Explant the a	columns (b), (d), and (e). 12, columns (b), (d), and (e). in line 13 instructions to verify calc Relationship of Activities to the complishment of the foundation's	culations.) the Accomplish th income is report	nment of Exem	pt Purposes f Part XVI-A contribu	ted importantly t	354,141
de Subtotal. Add of Total. Add line (See worksheet Int XVI-B Fine No. Explain the a	columns (b), (d), and (e). 12, columns (b), (d), and (e). in line 13 instructions to verify calc Relationship of Activities to the complishment of the foundation's	culations.) the Accomplish th income is report	nment of Exem	pt Purposes f Part XVI-A contribu	ted importantly t	354,141
Subtotal. Add of Total. Add line (See worksheet art XVI-B Fine No. Explant the a	columns (b), (d), and (e). 12, columns (b), (d), and (e). in line 13 instructions to verify calc Relationship of Activities to the complishment of the foundation's	culations.) the Accomplish th income is report	nment of Exem	pt Purposes f Part XVI-A contribu	ted importantly t	354,141

orm 9	90-PF	(2020)								Pa	ge 13
	: XVI	Exempt Organi	zations					nships With Nonc			
		rganization directly or in r than section 501(c)(3)							501	Yes	No
	•	from the reporting foun	-			-					
(1) Cash	1							1a(1)		No
(2) Othe	er assets							. 1a(2)		No
b Ot	her tra	nsactions:									
-	-	s of assets to a nonchari	•	-					. 1b(1)		No
-	-	chases of assets from a n							. 1b(2)		No
-	-	tal of facilities, equipmer	*						. 1b(3)		No
•	-	nbursement arrangemen ns or loan guarantees.							1b(4) 1b(5)		No No
•	•	rmance of services or m							1b(5)		No
•	•	of facilities, equipment, n		-					1c		No
d If t	he ans	swer to any of the above	is "Yes," comp	lete the follow	wing schedule. Colu	umn (b) s	should alv	vays show the fair ma	rket value		110
in	any tra	ods, other assets, or ser ansaction or sharing arra	ngement, show	in column (d) the value of the	goods, ot	her asset	s, or services receive	d.		
(a) Lin	e No.	(b) Amount involved	(c) Name of no	ncharitable exe	mpt organization	(d) Desc	cription of	transfers, transactions, ar	nd sharing arra	ngemen	its
	-										
	_										
2a Is	the fou	undation directly or indire	ectly affiliated v	vith, or relate	d to, one or more	tax-exem	pt organi	zations			
		in section 501(c) (other	•	*				_	✓ No		
		complete the following so		. , . , ,							
	·	(a) Name of organization	n	(b) Type of organization	n		(c) Description of	relationship		
	of r whi	der penalties of perjury, ny knowledge and belief ich preparer has any kno	, it is true, corr								
Sign		*****			2021-04-08	. *	****		May the IRS di return	scuss th	nis
Here					12022 0 1 00	b_			with the prepa	rer shov	wn
		Signature of officer or to	rustee		Date	т	itle		below (see instr.)	Yes	□ _{No}
		Print/Type preparer's	name P	reparer's Sigi	nature	Date		PT	IN		
								Check if self-	P0039:	L012	
Daid	ı	MIKE BISSONNETT	E					employed ▶ ☐			
Paid Prep	ı Darei	r Firm's name ▶ MELU	JCCI BISSONN	ETTE & CO I T	TD						
	Only							Fir	m's EIN ▶05	-04948	326
		Firm's address ► 71	IVAN STREET								
		NC	ORTH PROVIDE	NCE RI 0290	04			Ph	one no. (401) 305-	3900

Form 990PF Part XV Line 1a - 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).

STEVEN TILLEY PATRICIA TILLEY

STEVEN TILLEY II MICHAEL TILLEY

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year				
JOHNNYCAKE CENTER OF PEACEDALE 1231 KINGSTOWN ROAD PEACEDALE, RI 02883	NONE	PC	GENERAL OPERATING SUPPORT	5,000

PEACEDALE, RI U2883				
BOYS GIRLS CLUB OF WARWICK 42 FREDERICK STREET WARWICK, RI 02888	NONE	PC	GENERAL OPERATING SUPPORT	25,000
RI SPECIAL OLYMPICS	NONE	PC	GENERAL OPERATING SUPPORT	5,000

42 FREDERICK STREET WARWICK, RI 02888			SENCIONE SI EIGNIMO SSI I SINI	25,600
RI SPECIAL OLYMPICS 33 COLLEGE HILL ROAD BLD 31 WARWICK, RI 02886	NONE	PC	GENERAL OPERATING SUPPORT	5,000

WARWICK, RI 02888				
RI SPECIAL OLYMPICS 33 COLLEGE HILL ROAD BLD 31 WARWICK, RI 02886	NONE	PC	GENERAL OPERATING SUPPORT	5,000
Total	120.000			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

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

					<u> </u>
	a Paid during the year				
EAST GREENWICH, RI 02818	ONE ST ELIZABETH WAY	NONE	PC	GENERAL OPERATING SUPPORT	40,000

EAST GREENWICH, RI 02010				
OPERATION STAND DOWN RI 1010 HARTFORD AVENUE JOHNSTON, RI 02919	NONE	PC	GENERAL OPERATING SUPPORT	10,0

1010 HARTFORD AVENUE JOHNSTON, RI 02919	NONE	PC	GENERAL OPERATING SUPPORT	10,000
NORTH KINGSTOWN FOOD PANTRY INC 450 POST ROAD	NONE	PC	GENERAL OPERATING SUPPORT	5,000

000

1010 HARTFORD AVENUE JOHNSTON, RI 02919	No.		SEMERALE OF EIGHT OF SOME ON	10,000
NORTH KINGSTOWN FOOD PANTRY INC 450 POST ROAD NORTH KINGTOWN, RI 02852	NONE	PC	GENERAL OPERATING SUPPORT	5,000
Total			▶ 3a	120,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year				
FRIENDS OF RHODE ISALND CASA INC 1 DORRANCE PLAZA PROVIDENCE, RI 02903	NONE	PC	GENERAL OPERATING SUPPORT	5,000

PROVIDENCE, RI 02903				
RHODE ISLAND LEGAL SERVICES 56 PINE STREET SUITE 400 PROVIDENCE, RI 02903	NONE	PC	GENERAL OPERATING SUPPORT	5,000
BRIDGEMARK INC	NONE	PC	GENERAL OPERATING SUPPORT	20,000

56 PINE STREET SUITE 400 PROVIDENCE, RI 02903				
BRIDGEMARK INC 2020 ELMWOOD AVENUE WARWICK, RI 02888	NONE	PC	GENERAL OPERATING SUPPORT	20,000

PROVIDENCE, RI 02903				
BRIDGEMARK INC 2020 ELMWOOD AVENUE WARWICK, RI 02888	NONE	PC	GENERAL OPERATING SUPPORT	20,000
Total			▶ 3a	120,000

efile GRAPHIC print - DO NOT F	PROCESS As Filed Data - DLN: 93491098008431					
TY 2020 Accounting Fo	ees Sched	dule			_	
	Name:	THE TILLEY C	HARITABLE FO	UNDATION		
EIN: 20-3825855						
Software ID: 20011551						
Software Version: 2020v4.0						
Category	Amou	ınt Ne	t Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
ACCOUNTING FEES		1,550	0	1,550	0	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491098008431	
TY 2020 Other Expenses Schedule					
<u>.</u>					
Name:	THE TILLEY CHA	ARITABLE FOUND	ATION		
EIN:	: 20-3825855				
Software ID:	20011551				
Software Version:	Software Version: 2020v4.0				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
LICENSES AND PERMITS	73	73	73		

efile GRAPHIC print - DO NOT PROCESS	As Filed Da	ta -	DL	N: 93491098008431
TY 2020 Other Income Schedu	ule			
Name:	THE TILLEY (CHARITABLE FOUN	NDATION	
EIN:	20-3825855			
Software ID:	20011551			
Software Version:	2020v4.0			
Other Income Schedule				
Description		Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
UNREALIZED HOLDING GAIN		73,577		

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DL	N: 93491098008431	
TY 2020 Other Professional Fees Schedule					
Name: THE TILLEY CHARITABLE FOUNDATION					
EIN: 20-3825855					
Software ID: 20011551					
Software Version: 2020v4.0					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
PROFESSIONAL FEES	13,133	13,133	13,133	0	

efile GRAPHIC print - DO NOT I	PROCESS	As Filed Data	-	DL	N: 93491098008431
TY 2020 Taxes Schedule					
	Name:	THE TILLEY	CHARITABLE FOUN	NDATION	
EIN: 20-3825855					
Software ID: 20011551					
Software Version: 2020v4.0					
Taxes Schedule					1
Category	An	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAXES		760	760		

efile GRAPHIC print - DC	NOT PROCESS As Filed Data	<u>- L</u>		DLN: 93491098008431			
Schedule B	Sched	dule of Contributors		OMB No. 1545-0047			
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF. ► Go to <u>www.irs.gov/Form990</u> for the latest information.			2020			
Name of the organization THE TILLEY CHARITABLE F	OUNDATION		Employer i	dentification number			
Organization type (chec	k one).		20-3825855	;			
	,						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number)	501(c)() (enter number) organization					
	4947(a)(1) nonexempt ch	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	☐ 527 political organization	☐ 527 political organization					
Form 990-PF	☑ 501(c)(3) exempt private	✓ 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt ch	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private	501(c)(3) taxable private foundation					
	ion filing Form 990, 990-EZ, or 990 property) from any one contributor.						
Special Rules							
under sections 50 received from any	on described in section 501(c)(3) fil 9(a)(1) and 170(b)(1)(A)(vi), that cl one contributor, during the year, to 1h, or (ii) Form 990-EZ, line 1. Co	hecked Schedule A (Form 990 o otal contributions of the greater o	or 990-EZ), Part II, line 13	, 16a, or 16b, and that			
during the year, to	on described in section 501(c)(7), (8 otal contributions of more than \$1,0 ne prevention of cruelty to children	000 <i>exclusively</i> for religious, char	ritable, scientific, literary,				
during the year, c If this box is chec purpose. Don't co	on described in section 501(c)(7), (a contributions exclusively for religious ked, enter here the total contribution mplete any of the parts unless the le, etc., contributions totaling \$5,00	s, charitable, etc., purposes, but ons that were received during the General Rule applies to this org	no such contributions tot year for an exclusively re panization because it rece	aled more than \$1,000. eligious, charitable, etc., eived <i>nonexclusively</i>			
990-EZ, or 990-PF), but i	that isn't covered by the General F t must answer "No" on Part IV, line rt I, line 2, to certify that it doesn't r	e 2, of its Form 990; or check the	box on line H of its Form	rm 990, ı 990-EZ			
For Paperwork Reduction Action Form 990, 990-EZ, or 990-	t Notice, see the Instructions PF.	Cat. No. 30613X	Schedule B (Form 990	0, 990-EZ, or 990-PF) (2020)			

Employer identification number

HE TILLEY CHAR	ITABLE FOUNDATION	20-3825855	
Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if addi	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PATRICIA TILLEY 602 EAST SHORE ROAD JAMESTOWN, RI 02835	\$ 197,402	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 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 Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)