

For calendar year 2020, or tax year beginning 07-01-2020, and ending 06-30-2021

Name of foundation Charleigh Charitable Trust		A Employer identification number 46-3376803	
Number and street (or P.O. box number if mail is not delivered to street address) 200 OLD COUNTRY RD 274		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code MINEOLA, NY 11501		B Telephone number (see instructions) (516) 739-9777	
G Check all that apply: <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		C If exemption application is pending, check here <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		D 1. Foreign organizations, check here..... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 0		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
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.)			

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)	1,298,545			
	2 Check <input 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 . . .	5,204	5,204	5,204	
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	449,002			
	b Gross sales price for all assets on line 6a _____ 1,059,543				
	7 Capital gain net income (from Part IV, line 2) . . .		449,002		
	8 Net short-term capital gain			13,479	
	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)	27,617			
	12 Total. Add lines 1 through 11	1,780,368	454,206	18,683	
	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages	273,625			273,625
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	3,240			3,240
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .				
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	405,478	1,946		403,532
	24 Total operating and administrative expenses. Add lines 13 through 23	682,343	1,946		680,397
	25 Contributions, gifts, grants paid	473,738			473,738
	26 Total expenses and disbursements. Add lines 24 and 25	1,156,081	1,946		1,154,135
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	624,287			
	b Net investment income (if negative, enter -0-)		452,260		
				18,683	

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	117,916	285,858	
	2 Savings and temporary cash investments			
	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)	267,548	399,083	
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)	1,028	1,028		
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	386,492	685,969	0	
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 ▶ _____)		7,500	
	23 Total liabilities (add lines 17 through 22)		7,500	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions	386,492		
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input 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			
	29 Total net assets or fund balances (see instructions)	386,492	678,469	
30 Total liabilities and net assets/fund balances (see instructions) .	386,492	685,969		

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	386,492
2 Enter amount from Part I, line 27a	2	624,287
3 Other increases not included in line 2 (itemize) ▶ _____	3	
4 Add lines 1, 2, and 3	4	1,010,779
5 Decreases not included in line 2 (itemize) ▶ _____	5	332,310
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	678,469

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.)
1 a VARIOUS Charles Schwab - 4197 - ST-Covered	P	2021-01-01	2021-12-31
b VARIOUS Charles Schwab - 4197 - LT - Covered	P	2001-01-01	2021-12-31
c			
d			
e			

(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 259,812		246,333	13,479
b 799,731		364,208	435,523
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			13,479
b			435,523
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	449,002
	3	13,479
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	6,286
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	
3	Add lines 1 and 2.	3	6,286
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-.	5	6,286
6	Credits/Payments:		
a	2020 estimated tax payments and 2019 overpayment credited to 2020	6a	2,728
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	10,000
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	12,728
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached.	8	6
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	6,436
11	Enter the amount of line 10 to be: Credited to 2021 estimated tax 6,436 Refunded	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. ► \$ _____ (2) On foundation managers. ► \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ _____		
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	No
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) ► VT _____		
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>N/A</u>	13	Yes	
14	The books are in care of ▶ <u>ERNEST D LOEWENWARTER & CO</u> Telephone no. ▶ <u>(516) 739-9777</u>			

Located at ▶ 200 OLD COUNTRY ROAD SUITE 274 MINEOLA NYZIP+4 ▶ 11501

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.**

1a	During the year did the foundation (either directly or indirectly):		Yes	No
	(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 <input type="checkbox"/>	1b		No
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? <input type="checkbox"/>	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.) <input type="checkbox"/>	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. ▶ 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.) <input type="checkbox"/>	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)

5a	During the year did the foundation pay or incur any amount to:		Yes	No
(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	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
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?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>			
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	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			
	<i>If "Yes" to 6b, file Form 8870.</i>			
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		7b	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?			
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 MERINOFF 200 OLD COUNTRY ROAD STE 274 MINEOLA, NY 11501	COO 0.00	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.				

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	
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	
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	0
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	0
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	
3	Subtract line 2 from line 1d.	3	0
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5.	6	0

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	
2a	Tax on investment income for 2020 from Part VI, line 5.	2a	6,286
b	Income tax for 2020. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	6,286
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	6,286
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	6,286
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	0

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	1,154,135
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	1,154,135
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	1,154,135

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				0
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.				
b From 2016.				
c From 2017.				
d From 2018.	245,116			
e From 2019.	330,367			
f Total of lines 3a through e.	575,483			
4 Qualifying distributions for 2020 from Part XII, line 4: ► \$ 1,154,135				
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).	0			
d Applied to 2020 distributable amount.				
e Remaining amount distributed out of corpus	1,154,135			
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	1,729,618			
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).				
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a.	1,729,618			
10 Analysis of line 9:				
a Excess from 2016.				
b Excess from 2017.				
c Excess from 2018.	245,116			
d Excess from 2019.	330,367			
e Excess from 2020.	1,154,135			

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 ☐ 4942(j)(3) or ☐ 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 MERINOFF

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.

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	473,738
b <i>Approved for future payment</i>				
Total			▶ 3b	

Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
Enter gross amounts unless otherwise indicated.				
1 Program service revenue:				
a AGROLIVING EDUCATION				27,617
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				
4 Dividends and interest from securities.				5,204
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				449,002
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).				481,823
13 Total. Add line 12, columns (b), (d), and (e).				481,823

[illegible]

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

		Yes	No
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1a(1)	No
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1a(2)		No
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1b(1)	No
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1b(2)		No
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1b(3)		No
--------------	--	-----------

1b(4)		No
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1b(5)		No
--------------	--	-----------

1b(6)		No
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1c		No
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value
ue[illegible]

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.

2022-05-16

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 William Kolbert	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P01021918
Firm's name ▶ Loewenwarter & Co LLP				Firm's EIN ▶ 13-5553617
Firm's address ▶ 200 Old Country Road Suite 274 Mineola, NY 11501				Phone no. (516) 739-9777

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>				
PECONIC LAND TRUST 296 HAMPTON ROAD PO BOX 1776 SOUTHAMPTON, NY 11969	NONE	NC	EDUCATION IN FARMING METHODS. ENVIROMENT	1,000
NEIGHBORHOOD CONNECTIONS P O BOX 207 LONDONBERRY, VT 05148	NONE	501(C)3	HELP VULNERABLE RESIDENTS IN COMMUNITY	1,000
ROCKLAND COUNTRY DAY SCHOOL 34 KINGS HIGHWAY CONGERS, NY 10920	NONE	EOF	STUDENTS EDUCATION	499
Total ▶ 3a				473,738

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>				
BIODYNAMICS ASSOCIATION P O BOX 557 EAST TROY, WI 53120	NONE	501 (C) 3	TO TEACH BIODYNAMIC PRINCIPLES	10,000
FACING HISTORY AND OURSELVES HURD ROAD BROOKLINE, MA 02445	NONE	501(C) 3	TO EDUCATE AGAINST BIGOTRY AND PREJUDICE	2,500
LILI KOLISKO INSTITUTE 1005 RICHARDS ROAD SUITE D HARLAND, WI 53029	NONE	501(C) 3	EDUCATION OF ANTHROPOSOPHIC MEDICINE	250
Total ▶ 3a				473,738

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>				
VERMONT AGENCY OF AGRICULTURE 116 STATE STREET MONTPELIER, VT 05620	NONE	NC	IMPLEMENTATION OF FARM TO SCHOOLPROGRAMS AT VERMONT SCHOOLS	20,000
HOLISTIC MANAGEMENT INTERNATIONAL 5941 JEFFERSON STREET NE SUITE B ALBUQUERQUE, NM 87109	NONE	NC	EDUCATION OF LAND USE FOR FARMING	10,000
WEST RIVER COMMUNITY PROJECT 6573 VT 30 WEST TOWNSHEND, VT 05359	NONE	NC	SUPPORT LOCAL AGRICULTURAL ECONOMIC AND SOCIAL ACTIVITIES	141,000
Total ▶ 3a				473,738

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>				
RURAL VERMONT46 E STATE STREET MONTPELIER, VT 05602	NONE	NC	EDUCATION FOR AGRICULTURE	2,500
SPIKENARD FARM 445 FLOYD HIGHWAY NORTH FLOYD, VA 24091	NONE	501(C) 3	EDUCATION OF BEE KEEPING	10,000
GRACE COTTAGE HOSPITAL 185 GRAFTON ROAD TOWNSHEND, VT 05353	NONE	501(C) 3	CHARITABLE	20,000
Total ▶ 3a				473,738

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>				
GREATER NEWARK CONSERVANCY 32 PRINCE STREET NEWARK, NJ 07103	NONE	501(C) 3	CHARITABLE	1,031
POST OIL SOLUTIONSP O BOX 431 TOWNSHEND, VT 05353	NONE	501(c) 3	CONTRIBUTION	1,000
AFRICAN HERITAGE ECONOMIC INITIATIV 48 DORRIS AVENUE BUFFALO, NY 14215	NONE		SUPPORT LOCAL AGRICULTURAL ECONOMIC AND SOCIAL ACTIVITIES	25,000
Total ► 3a				473,738

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>				
ALS ASSOCIATIONPO BOX 37022 BOONE, IA 50037	NONE		SUPPORT LOCAL AGRICULTURAL ECONOMIC AND SOCIAL ACTIVITIES	1,000
AMERICA SHARE 15 W 26TH STREET 11TH FLOOR NEW YORK, NY 10010	NONE		SUPPORT LOCAL AGRICULTURAL ECONOMIC AND SOCIAL ACTIVITIES	1,000
AMERICAN CHESTNUT FOUNDATION 50 NORTH MERRIMON AVENUE ASHVILLE, NC 28804	NONE		SUPPORT LOCAL AGRICULTURAL ECONOMIC AND SOCIAL ACTIVITIES	40
Total ▶ 3a				473,738

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>				
AMERICAN FARMLAND TRUST 112 SPRING STREET SARATOGA SPRINGS, NY 12866	NONE		SUPPORT LOCAL AGRICULTURAL ECONOMIC AND SOCIAL ACTIVITIES	1,000
BIO4CLIMATE SPIRIT OF RESILIENCE PO BOX 390469 CAMBRIDGE, MA 02139	NONE		SUPPORT LOCAL AGRICULTURAL ECONOMIC AND SOCIAL ACTIVITIES	268
BOY SCOUTS OF AMERICA 475 RIVERSIDE DRIVE NEW YORK, NY 10115	NONE		The Boy Scouts of America (BSA) provides the nations foremost youth program of character development and values-based leadership training, which helps young people be Prepared. For Life.	10,000
Total ► 3a				473,738

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>				
BRIDGES OUTREACH INCPO BOX 1444 SUMMIT, NJ 07902	NONE		REACHES OUT TO HOMELESS IN NYC	100
CHESTER AGRICULTURE CENTER 50 OGDEN DRIVE MOUNTAINVILLE, NY 10953	NONE		SUPPORT LOCAL AGRICULTURAL ECONOMIC AND SOCIAL ACTIVITIES	20,000
CHILDREN'S HEALTH DEFENSE 1227 N PEACHTREE PARKWAY PEACHTREE CITY, GA 30269	NONE		Its mission is to end childhood health epidemics by working aggressively to eliminate harmful exposures, hold those responsible accountable, and to establish safeguards to prevent future harm.	20,000
Total ▶ 3a				473,738

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>				
EAST HAMPTON FIRE DEPARTMENT 1 CEDAR STREET EAST HAMPTON, NY 11954	NONE		PUBLIC SAFTEY	250
EAST HAMPTON POLICE BENEVOLENT PO BOX 1035 EAST HAMPTON, NY 11937	NONE		PUBLIC SAFTEY	250
FRIEND'S OF UNFPA605 THIRD AVE NEW YORK, NY 10158	NONE		Friends of UNFPA promotes the health, dignity, and rights of women and girls around the world by supporting the lifesaving work of UNFPA	10,000
Total ▶ 3a				473,738

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>				
WESTON A PRICE FOUNDATION 4200 WISCONSIN AVENUE WASHINGTON, DC 20016	NONE		The Foundation is dedicated to restoring nutrient-dense foods to the human diet through education, research and activism.	30,000
HAWORTH AMBULANCEPO BOX 263 HAWORTH, NJ 07641	NONE		PUBLIC SAFTEY	100
HAWORTH DRUG ALLIANCE 300 HAWORTH AVENUE HAWORTH, NJ 07641	NONE		PUBLIC SAFTEY	100
Total ► 3a				473,738

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>				
HAWORTH FIRE CO 7 HARDENBURGH AVENUE HAWORTH, NJ 07641	NONE		PUBLIC SAFTEY	100
HAWORTH POLICE AUXILIARYPO BOX 6 HAWORTH, NJ 07641	NONE		PUBLIC SAFTEY	100
GREEN FAITH1216 BROADWAY NEW YORK, NY 10001	NONE		building resilient, caring communities and economies that meet everyones needs and protect the planet.	500
Total ▶ 3a				473,738

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>				
HOPE FOR YOUTH FOUNDATION 201 DIXON AVE AMITYVILLE, NY 11701	NONE		scholarships to local high school students and local programs that promote healthy academic, emotional or athletic programs.	2,500
JOSEPHINE PORTER INSTITUTE 652 THOMPSON RD FLOYD, VA 24091	NONE		through biodynamic preparations, education and research, and to build a dynamic integrated network so our legacy is accessible to all future generations.	500
LA WATER KEEPER120 BROADWAY SANTA MONICA, CA 90401	NONE		safeguarding our inland and coastal waters using the law, science and community action.	1,000
Total ► 3a				473,738

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>				
LONDONDERRY VOLUNTEER RESCUE SQUAD 6068 VERMONT RTE 100 LONDONDERRY, VT 05148	NONE		PUBLIC SAFTEY	100
MUSEUM OF JEWISH HERITAGE 36 BATTERY PL NEW YORK, NY 10280	NONE		educating diverse visitors about Jewish life before, during, and after the Holocaust.	25,000
NATIONAL MULTIPLE SCLEROSIS SOCIETY 733 3RD AVE NEW YORK, NY 10017	NONE		MSAA is a resource for the MS community, improving lives through vital services & support.	2,500
Total ▶ 3a				473,738

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>				
NOFA VTPO BOX 697 RICHMOND, VT 05477	NONE		build an economically viable, ecologically sound and socially just Vermont agricultural system that benefits all living things.	25,000
PROJECT BIOME237 A ST PMB 51154 SAN DIEGO, CA 92101	NONE		SUPPORT LOCAL AGRICULTURAL ECONOMIC AND SOCIAL ACTIVITIES	2,500
PROJECT SAVE ARMENIAN PHOTOGRAPH AR 65 MAIN ST 3RD FL WATERTOWN, MA 02472	NONE		documents, preserves, and shares images of all subjects and time periods relating to the Armenian people and the work of Armenian photographers.	250
Total ▶ 3a				473,738

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>				
REAL ORGANIC PROJECT82 WILSON RD EAST THETFORD, VT 05043	NONE		TO SUPPORT ORGANIC FARMING	5,000
RESCUE INC54 PLEASANT STREET NEWBURYPORT, MA 01950	NONE		ANIMAL RESCUE	1,000
SCHUMACHER CENTER FOR A NEW ECONOMI 140 JUG END ROAD GREAT BARRINGTON, MA 01230	NONE		envision the elements of a just and regenerative global economy; undertakes to apply these elements in its home region of the Berkshires in western Massachusetts; and then develops the educational programs to share the results more broadly, thus encouraging replication.	100
Total ▶ 3a				473,738

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>				
SOJOURNS CENTER FOR A NEW ECONOMICS 4923 US ROUTE FIVE WESTMINSTER, VT 05158	NONE		Invision a just and regenerative economy; apply the concepts locally; then share the results for broad replication.	10,000
STAND FOR A CURE 376 GRABTWOOD AVENUE STATEN ISLAND, NY 10312	NONE		build a compassionate community engaged in raising funds and awareness to fight breast cancer through events and programs that celebrate a healthy lifestyle.	1,000
THE CENTER FOR CARTOON STUDIES 94 S MAIN ST WHITE RIVER JUNCTION, VT 05001	NONE		sequential art, specifically comics and graphic novels Located in the village of White River Junction, in the town of Hartford	250
Total ▶ 3a				473,738

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>				
THE NATURE CONSERVANCY - LONG ISLAND 322 8TH AVENUE NEW YORK, NY 10001	NONE		Our planet faces the interconnected crises of rapid climate change and biodiversity loss. We have years, not decades, to address these existential threats.	5,000
THE NIGERIAN SCHOOL PROJECT 890 BELLE AVENUE TEANECK, NJ 07666	NONE		TO PROVIDE EDUCATION TO NIGERIAN CHILDREN	10,000
THE PFEIFFER CENTER 260 HUNGRY HOLLOW RD SPRING VALLEY, NY 10977	NONE		biodynamics to grow food with living forces that nourish the whole human being; to foster a learning community where people can develop a loving relationship to the land; and to build a rich inclusive social life serving our home and surrounding communities.	500
Total ► 3a				473,738

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>				
THE TOWNSHEND COMMUNITY FOOD SHELF 46 COMMON RD TOWNSHEND, VT 05353	NONE		volunteer run community food shelf offering supplemental food assistance to all people in need.	100
THE TOWNSEND HISTORICAL SOCIETY 72 MAIN ST TOWNSEND, MA 01469	NONE		seeks to foster a deep discussion about our local history.	100
TOWNSHEND VOLUNTEER FIRE DEPARTMENT TOWNSHEND TOWNSHEND, VT 05353	NONE		PUBLIC SAFETY	100
Total ▶ 3a				473,738

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

Recipient Name and address (home or business)	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
a <i>Paid during the year</i>				
TRUE EATS LOCAL FOOD EDUCATION 301 WEST 108TH STREET NEW YORK, NY 10025	CHARITABLE		We seek to inspire greater understanding and appreciation of nutritional food options by educating consumers and other stakeholders about the benefits of small farm production and environmentally sustainable agricultural practices.	25,000
UNIVERSITY OF DENVER 2199 S UNIVERSITY BLVD DENVER, CO 80208	NONE		private institution built on exploration through research and collaboration among educators and students, as well as local and global communities.	10,000
VERMONT HISTORICAL SOCIETY 60 WASHINGTON ST BARRE, VT 05641	NONE		preserve and record the cultural history of the US state of Vermont.	100
Total ► 3a				473,738

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>				
VERMONT INDEPENDANT MEDIA PO BOX 1212 BRATTLEBORO, VT 05302	NONE		SUPPORT LOCAL NEWS	100
WELFARE100 W 10TH STREET WILMINGTON, DE 19801	NONE		promote the social welfare of people and communities across the State of Delaware and in southern Chester County, Pennsylvania.	5,000
WINDHAM COMMUNITY ORGANIZATION 5978 WINDHAM HILL ROAD WINDHAM, VT 05359	NONE		SUPPORTING LOCAL AREA	100
Total ▶ 3a				473,738

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>				
WINDHAM VOLUNTEER FIRE COMPANY 290 WHITE RD WINDHAM, VT 05143	NONE		PUBLIC SAFETY	250
WWOOF-USACALIFORNIA CALIFORNIA, CA 90000	NONE		ORGANIC FARMING	100
Total ▶ 3a				473,738

TY 2020 Accounting Fees Schedule**Name:** Charleigh Charitable Trust**EIN:** 46-3376803**Software ID:** 20011551**Software Version:** 2020v4.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	3,240	0	0	3,240

TY 2020 Investments - Other Schedule**Name:** Charleigh Charitable Trust**EIN:** 46-3376803**Software ID:** 20011551**Software Version:** 2020v4.0**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
CHARLES SCHWAB PORTFOLIO	AT COST	399,083	

TY 2020 Other Assets Schedule**Name:** Charleigh Charitable Trust**EIN:** 46-3376803**Software ID:** 20011551**Software Version:** 2020v4.0**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
MSOA FAMILY OFFICE LLC	1,028	1,028	

TY 2020 Other Expenses Schedule**Name:** Charleigh Charitable Trust**EIN:** 46-3376803**Software ID:** 20011551**Software Version:** 2020v4.0**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ALARM EXPENSE	239			239
ANIMAL FEED	1,144			1,144
ANIMAL SUPPLIES	146			146
ANIMALS	3,960			3,960
ANNUAL REPORT	35			35
AUTO EXPENSES	1,463			1,463
AUTO REPAIR	3,725			3,725
BANK SERVICE CHARGES	732			732
BEE SUPPLIES	696			696
BLACKSMITH SHOP	1,152			1,152

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BROKER FEE	1,788	1,788		
BUTCHER SHOP	233			233
BUTCHERING	764			764
CERAMIC SHOP	2,779			2,779
COMPUTER & INTERNET EXPENSES	4,415			4,415
DAIRY SUPPLIES	138			138
EDUCATIONAL RESEARCH	7,605			7,605
EMPLOYEE PROVIDED FOOD ITEMS	18,158			18,158
FARM & FOOD SERVICE MANAGMENT	15,000			15,000
FARM HOUSE SUPPLIES	9,663			9,663

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FARM SUPPLIES	23,653			23,653
FOREIGN TAX PAID	158	158		
GARBAGE REMOVAL	2,988			2,988
GRAPHIC DESIGN	8,383			8,383
GRAPHIC DESIGN BADGES	7,017			7,017
HAY	8,303			8,303
INSURANCE	36,392			36,392
LANDSCAPING	6,485			6,485
LUMBER	717			717
OFFICE EXPENSES	3,023			3,023

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL SERVICE FEES	15,390			15,390
PAYROLL TAXES	46,105			46,105
PROPERTY TAXES	27,534			27,534
REPAIR AND MAINTENANCE	79,711			79,711
SALES TAX	441			441
SEEDS AND PLANTS	2,241			2,241
SMALL TOOLS AND EQUIPMENT	10,928			10,928
SOLAR	6,168			6,168
SUBSCRIPTIONS	517			517
UPGRADES	10,568			10,568

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
UTILITIES	29,180			29,180
veternarian	691			691
YOUNG FARMER PROGRAM	4,155			4,155
YURT	895			895

TY 2020 Other Income Schedule**Name:** Charleigh Charitable Trust**EIN:** 46-3376803**Software ID:** 20011551**Software Version:** 2020v4.0**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
AGRO LIVING EDUCATION	27,617		

TY 2020 Other Liabilities Schedule**Name:** Charleigh Charitable Trust**EIN:** 46-3376803**Software ID:** 20011551**Software Version:** 2020v4.0

Description	Beginning of Year - Book Value	End of Year - Book Value
CREDIT CARDS		7,500

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491136020492	
Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information.			OMB No. 1545-0047
					2020
Name of the organization Charleigh Charitable Trust				Employer identification number 46-3376803	

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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

- ☒ 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 other 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 33¹/₃% 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, 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 990PF, 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
Charleigh Charitable Trust

Employer identification number
46-3376803

Part I

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHARLES MERINOFF 317 MASSACHUSETTS AVENUE HAWORTH, NJ 07641	\$ 1,297,835	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization Charleigh Charitable Trust	Employer identification number 46-3376803
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions). Use duplicate copies of Part II if additional space is needed.</small>	(c) FMV (or estimate) (See instructions)	(d) Date received
1	TRANSFER OF SECURITIES	\$ 587,835	2021-03-08
(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
-		\$	

46-3376803

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ _____
Use duplicate copies of Part III if additional space is needed.

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