Form 990-T		anization Bus			ax Return		OMB No 1545-0047
3		and proxy tax und		• • •	5000	ν	2040
Ø	For calendar year 2019 or other tax					_	2019
Department of the Treasury Internal Revenue Service	•	vw irs gov/Form990T for in bers on this form as it may				Ор 50	en to Public Inspection f
A Check box if address changed	Name of organization THE PETER	Check box if name of AND CARMEN L	-	and see instructions.) A BUCK			er identification number ees' trust, see ons)
B Exempt under section	Print FOUNDATION	, INC.		_		06	-1547852
X 501(c)(3)	Or Number, street, and ro	om or suite no. If a P.O. box	x, see ir	nstructions.	E		d business activity code ructions)
408(e) 220(e)	Type 633 THIRD	AVENUE, 16TH	FL	OOR		•	•
408A 530(a) 529(a)	NEW YORK,		r foreig	n postal code			
C Book value of all assets at end of year	F Group exemption nu	mber (See instructions.)	<u> </u>				
at end of year 576,876,0	58. G Check organization	ype 🕨 🔀 501(c) corp	poration		401(a) t		Other trust
H Enter the number of the	organization's unrelated trades of	· —	1		the only (or first) unre		, ,
	SEE STATEMEN		<u> </u>		, complete Parts I-V. If		
	lank space at the end of the prev	rious sentence, complete Pa	ırts I an	d II, complete a Schedule	e M for each additional	trade or	-
business, then complete							
	the corporation a subsidiary in a		nt-subs	idiary controlled group?	•	Yes	X No
	and identifying number of the pa						70 1040
J The books are in care of	▶ D. BEN BENO d Trade or Business In			· ·	one number > 86	0-5	
		ICOME	_	(A) Income	(B) Expenses		(C) Net
✓a Gross receipts or sale		┥					
b Less returns and allo		c Balance	1c			_	/
2 Cost of goods sold (S	· ·		2_				
3 Gross profit. Subtrac			3			\leftarrow	
4a Capital gain net incor			4a_				
b Net gain (loss) (Form	4797, Part II, line 17) (attach Fo	rm 4797)	4b				
 Capital loss deduction 			4c				
, ,	partnership or an S corporation	(attach statement)	5		RECEIV	ED	
6 Rent income (Schedu	ile C)		6				78
	ed income (Schedule E)		7	[2	NOV 2 3 2	020 -	<u> Ş </u>
8 Interest, annuities, ro	yalties, and rents from a controlle	d organization (Schedule F)	8	/	B		3
	f a section 501(c)(7), (9), or (17	organization (Schedule G)	9/		OCCOR!	11-	
10 Exploited exempt acti	vity income (Schedule I)		/10		OGDEN,	ᆜ	
11 Advertising income (Schedule J)	/	11				
12 Other income (See in	structions, attach schedule)		12				
13 Total Combine lines	3 through 12	/	13	0.			
Part If Deductions	ins Not Taken Elsewh	ere (See instructions fow with the unfelated busin	or limita iess ind	ations on deductions) come)			
14 Compensation of of	ficers, directors, and trustees (So	hedule K)				14	
15 Salaries and wages						15	
16 Repairs and mainter	nance					16	
17 Bad debts		/				17	<u> </u>
18 Interest (attach sche	edule) (see instructions)					18	
19 Taxes and licenses						19	
20 Depreciation (attach	Form 4562)			20	_		
21 Less depreciation cl	aimed on Schedule A and elsewh	ere on return		21a		21b	
22 Depletion						22	
23 Contributions to def	erred compensation plans					23	-
24 Employee benefit pr					Γ	24	
25 Excess exempt expe	• /				Γ	25	
26 Excess readership c	,				Ī	26	
27 Other deductions (at					T	27	
,	dd lines 14 through 27				ľ	28	(
,	taxable income before net operat	ing loss deduction. Subtract	t line 28	3 from line 13	F	29	C
/	erating loss arising in tax years				<u> </u>	Ť	
(see instructions)	oraling loop distance in tax years	Juganiany on or anter partua	., ., 20			30	0
<i></i>	axable income. Subtract line 30	from line 29			-	31 31	
31 Unrelated business	anable mounte. Subtract fine 30	1 0:11 1116 23				<u> </u>	Form 990-T (20

	0-T(2019) THE PETER AND CARMEN LUCIA BUCK FOUNDATION, INC.	06-154	1/852 Page 2
Part	/ 		
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32	<u> </u>
33	Amounts paid for disallowed fringes	33	
34	Charitable contributions (see instructions for limitation rules) STMT 23	34	0.
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction Subtract line 34 from the sum of lines 32 and 33	35	
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36	-
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	
39	Unrelated business taxable income Subtract line 38 from line 37. If line 38 is greater than line 37,	"	
33	enter the smaller of zero or line 37	39	0.
Dart	Tax Computation	1 33]	
	/ 	T 40	0.
40	Organizations Taxable as Corporations Multiply line 39 by 21% (0.21)	40	
41	Trusts Taxable at Trust Rates See instructions for tax computation. Income tax on the amount on line 39 from	 	
	Tax rate schedule or Schedule D (Form 1041)	41	
42	Proxy tax See instructions	42	
43	Alternative minimum tax (trusts only)	43	
44	Tax on Noncompliant Facility Income See instructions	44	
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	0.
Part	Y Tax and Payments		
46 a	Foreign tax gredit (corporations attach Form 1118; trusts attach Form 1116) 46a		
b	Other credits (see instructions) 46b]	
c	General business credit Attach Form 3800 46c	1	
d	Credit for prior year minimum tax (attach Form 8801 or 8827) 46d	1	
	Total credits Add lines 46a through 46d	46e	
47	Subtract line 46e from line 45	47	0.
48	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	48	
	_		0.
49	Total tax Add lines 47 and 48 (see instructions)	49	0.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	
	Payments: A 2018 overpayment credited to 2019 2019 estimated tax payments Tax deposited with Form 8868	4 j	
	2019 estimated tax payments Quit 2,000.	↓	
C	Tax deposited with Form 8868	↓	
d	Foreign organizations: Tax paid or withheld at source (see instructions) 51d	↓	
е	Backup withholding (see instructions) 51e	1	
f	Credit for small employer health insurance premiums (attach Form 8941) 51f		
9	Other credits, adjustments, and payments: Form 2439		
	Form 4136 Other Total 51g		
52	Total payments. Add lines 51a through 51g	52	2,000.
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached	53	
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	
55 🗸	IA .	55/	2,000.
56	Enter the amount of line 55 you want: Credited to 2020 estimated tax	56	2,000.
Part		7*	
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority		Yes No
υl	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file		Yes No
	· · · · · · · · · · · · · · · · · · ·		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country		
	here		- X
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		X
	If "Yes," see instructions for other forms the organization may have to file.		
59	Enter the amount of tax-exempt interest received or accrued during the tax year > \$		
0:	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowled correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	dge and belief, it is	true,
Sign		ay the IRS discuss	this return with
Here	to to the tree precior	e preparer shown b	
	Signature of officer Daté Title	structions)?	Yes No
	Print/Type preparer's name Preparer's signature Date Check if	f PTIN	
Paid	6) o b o	1	
	parer THOMAS F. BLANEY Roman 10/22/2020	P0023	4022
	Only Firm's name ▶ PKF O'CONNOR DAVIES, LLP Firm's EIN ▶		28945
USE	665 FIFTH AVENUE		
		212) 28	6-2600
923711			990-T (2019)

Form 990-T (2019) FOUNDATION, INC.

<u> </u>	- O-I-L					
Schedule A - Cost of Good	S SOIG. Enter I	method of inver				
1 Inventory at beginning of year	1		6 Inventory at end of ye		ļ.	6
2 Purchases	2		7 Cost of goods sold S		1116 0	** ** ** ** ** ** ** ** ** ** ** ** **
3 Cost of labor	3		from line 5. Enter here	e and in F	Part I,	
4 a Additional section 263A costs			line 2			7
(attach schedule)	4a		8 Do the rules of section	n 263A (v	with respect to	Yes No
b Other costs (attach schedule)	4b		property produced or	acquired	for resale) apply to	1 3 A
5 Total Add lines 1 through 4b	5		the organization?			
Schedule C - Rent Income	(From Real F	roperty and	l Personal Property I	Lease	d With Real Prope	rty)
(see instructions)						
1 Description of property						
(1)	•		- -			
(2)						
(3)						
(4)					·	
	2 Rent received				3/3) Deductions directly of	onnected with the income in
 (a) From personal property (if the per rent for personal property is more 10% but not more than 50%) 	e than	` 'of rent for p	and personal property (if the percenta personal property exceeds 50% or if nt is based on profit or income)	age	columns 2(a) and	2(b) (attach schedule)
(1)						
(2)						
(3)						
(4)						
Total	0.	Total	•	0.		
(c) Total income Add totals of columns here and on page 1, Part I, line 6, column		er		0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	0.
Schedule E - Unrelated Deb		ncome (see	instructions))	
		·	2 Gross income from		3 Deductions directly conne to debt-financed	
1 Description of debt-fil	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				<u> </u>		
<u>(1)</u> (2)		<u></u>		1		
(3)				-		
(4)				l	<u> </u>	
	5 0		•	<u> </u>	7.0	0.40
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or all debt-finance	djusted basis locable to ced property schedule)	6 Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)			%			
(2)			%			
(3)			%	ŀ	· 	
(4)			%			
					nter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Totals					0.	0.
Total dividends-received deductions in	ncluded in column	8	•		•	0.

Form 990-T (2019)

Schedule F - Interest, A	Annuities	s, Hoyal	ties, an	,	From Co Controlled O			itions	(see ins	structio	ns)
Name of controlled organizate	on	2 Em identifi num	cation	3 Net unr	related income e instructions)	4 To	tal of specified ments made	include	of column 4 ed in the contration's gross i	rolling	6 Deductions directly connected with income in column 5
(1)	-	-	-								
(2)	-										
(3)											
(4)					-						
Nonexempt Controlled Organia	zations										
7 Taxable Income		nrelated incon ee instruction:		9 Total	of specified payi made	nents	10 Part of colu in the controll gross	mn 9 that ing organ s income	is included ization's		eductions directly connected th income in column 10
(1)											· -
(2)											
(3)			<u> </u>								
(4)		•									
							Add colun Enter here and Ine 8, c		1, Part I		dd columns 6 and 11 here and on page 1, Part I, line 8, column (B)
Totals						▶			0.		0.
Schedule G - Investme (see instr		ne of a S	Section	501(c)(7	'), (9), or (17) Org	ganization				
1 Desc	ription of inco	ne			2 Amount of	ıncome	3 Deductio directly conne (attach sched	cted	4 Set-	asides schedule)	5 Total deductions and set-asides (col 3 plus col 4)
(1)											
(2)											
(3)											
(4)											
					Fater here and Part I, line 9, co	lumn (A)					Finter here and on page 1 Part I, line 9, column (B)
Totals Schedule I - Exploited	Evemnt	Activity	Income	• Other	Than Adv	0.	a Income				0.
(see instru	-	Activity	IIICOIIIC	z, Other	man Au	ei (isii	ig income				
1 Description of exploited activity	2 G unrelated incom- trade or t	business e from	directly c with pro of unr	penses connected oduction related s income	4 Net incon from unrelated business (co minus colum gain, comput through	trade or lumn 2 n 3) If a e cols 5	5 Gross inco from activity to is not unrelate business inco	hat ed	6 Exp attribut: colur	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)											
(1) (2) (3)											
(3)											
(4)	Enter her page 1, line 10,	Part I,		re and on I, Part I, col (B)			-				Enter here and on page 1, Part II, line 25
Totals -		0.		0.							0.
Schedule J - Advertisir											
Part I Income From I	Periodic	als Rep	orted or	n a Cons	solidated	Basis					
1 Name of periodical		2 Gross advertising income		3. Direct ertising costs			5. Circulat		6 Reade		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)											
(2)											1 :
(1) (2) (3)			1		*	,					1
(4)							-		-		1
···											
Totals (carry to Part II, line (5))	•	(0.	0	•						0 . Form 990-T (2016

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	Advertising gain or (loss) (cot 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1-5)	0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions

1 Name	2. Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		>	0.

Form 990-T (2019)

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 22
BUSINESS ACTIVITY

QUALIFIED TRANSPORTATION FRINGE BENEFITS

TO FORM 990-T, PAGE 1

FORM 990-T	CONTR	IBUTIONS SUMMARY		STATEMENT	23
	CONTRIBUTIONS SUBJECT				
FOR TAX FOR TAX FOR TAX FOR TAX	OF PRIOR YEARS UNUSED YEAR 2014 YEAR 2015 YEAR 2016 YEAR 2017 YEAR 2018	CONTRIBUTIONS 24,563,042			
TOTAL CARI	- RYOVER RENT YEAR 10% CONTRIBU	TIONS	24,563,042		
	TRIBUTIONS AVAILABLE NCOME LIMITATION AS AD	JUSTED	24,563,042		
EXCESS 10	NTRIBUTIONS :)% CONTRIBUTIONS ESS CONTRIBUTIONS	-	24,563,042 0 24,563,042	_	
ALLOWABLE	CONTRIBUTIONS DEDUCTI	ON		_	0
TOTAL CON	TRIBUTION DEDUCTION				0