		ગ ∂-T	E	cempt Organiz						n	OMB N	No 1545-0047
		,,,,,,	_	•	•		der section	•	· ' \ ' //		<u></u>	@ 4 0
			For cale	or calendar year 2019 or other tax year beginning, 2019, and ending, 20						.0	2	W19
	-	tment of the Treasury		•							Open to P	Public Inspection for Organizations Only
	interna	al Revenue Service	▶ Do	not enter SSN numbers on	1							Organizations Only cation number
	L	Check box if address changed		Name of organization (_ Check be	JX II IIali	ne changed and se	ee instruction	15)			e instructions)
			NEW YORK-DRESDYTEDIAN FUND INC									
	_	Exempt under section NEW YORK-PRESBYTERIAN FUND, INC. X 501/ C 1/3 Print Number, street, and room or suite no. If a PO box, see instructions						12.2	160256			
	1	501(C	or	Number, street, and room	or suite no T	iaro	box, see instruction	oris			160356	ss activity code
	\vdash	408(e) 220(e)	Type	FOE DACE COMU	CHDCC	T T)	OV 156				ated busine: structions)	ss activity code
	_	408A530(a)		525 EAST 68TH								
	ليا	529(a)		City or town, state or prov		y, and Z	IP or foreign posta	l code		F 0 2 0	0.0	
		ok value of all assets end of year		NEW YORK, NY						5239	00	
				up exemption number (S				- 1		1		<i>-I</i>
				eck organization type 🕨		•		501(c) trust	401(a)		Other trust
			_	inization's unrelated trades	s or busine	sses				•	(or first) ur	
		ade or business her						-	complete Parts I			describe the
	fır	st in the blank spa	ce at the	end of the previous sen	tence, cor	nplete	Parts I and II, co	omplete a S	chedule M for each	ch additioi	nal	
		ade or business, the									1	
				corporation a subsidiary					controlled group?	7.0		Yes No
				identifying number of the	parent cor	rporatio	on ► ATCI		XXX I	<u>) </u>	4510	2015
				CHAEL BRESLIN					ne number ▶ 21		_	
				or Business Income	1	1	(A) Inco	me	(B) Expen	ses	ļ	(C) Net
	1 a	Gross receipts or s	sales									1
		Less returns and allowa		, -	Balance -						-	
	2	-	•	ule A, line 7)		2						
	3	•		2 from line 1c		3	1.50	4 000	•			
	4 a	Capital gain net in	ncome (a	ittach Schedule D)		4a	1,58	4,009.				<u>1,584,009.</u>
	b	Net gain (loss) (Fo	rm 4797,	Part II, line 17) (attach Form	4797)	4b						
	С			rusts		4c	3 00	2 262				
	5			r an S corporation (attach stateme		5	7,88	3,863.	ATCH 3			7,883,863.
	6	Rent income (Sch	edule C)			6		_				
	7	Unrelated debt-fir	nanced in	come (Schedule E)		7						
	8	Interest, annuities, roya	alties, and re	ents from a controlled organization	(Schedule F)	8						
	9			1(c)(7), (9), or (17) organization		-						
	10		-	ncome (Schedule I)		10		_/_				
	11	Advertising incom	ne (Sched	dule J)		11	, v	<u>/</u>				
	12	•		ctions, attach schedule).		12	22.15	- 070	•		+	2.467.070
	13			ough 12		13		7,872.				9,467,872.
	Par			Taken Elsewhere (S			ns for limitat	ions on d	ieductions.) ([Jeducti	ons must	t be directly
				ne unrelated busines		' ,/'				1	1	
	14			directors, and trustees (Se							-	
	15											
	16						ECEIVE			16	1	
	17	Bad debts		/	∤ .	<u> r</u>	· C ア C I Y C			17		0 (14
1	18	Interest (attach so	chedule)	(see instructions)	٠٠٠ إين		13	ევე-S 	ATCH 4		-	8,614.
í	19	Taxes and licenses	s	<i></i>	18	. ·N	IOV (2 😘 202	(P) - O		<u>19</u>		250.
)	20			4562)	∤₽	`	🞾 📙					
1	21			on Schedule A and elsev						21b		1 574 212
	22			. <i>f</i>			GDEN, L					1,574,940.
1	23			compensation plans								
	24			s							1	
1	25	Fxcess exempt ex	penses (Schedule I), "		, .				. 25	ļ	
リトラこうの	26	Excess readership	costs (S	chedule J)					<u>.</u>	26	ļ	
	27			schedule)								8,910,148.
Ĺ	28			s 14 through 27								0,493,952.
ر ک	29			le income before net								1,026,080.
	30/			ig loss arising in tax year	-	-				_		
	31			e income Subtract line 3	0 from line	29 .	<u> </u>		<u> </u>	. , 31		1,026,080.
	For E	Panerwork Reduct	ion Act N	Notice see instructions			·			-		000-T (2010)

Firm's address ▶ 5 TIMES SQUARE,

Use Only

NEW YORK, NY 10036

Phone no 212-7 73-3000-

Form 990-T_(2019)

PAGE 2

Form 990-T (2019)				_				Р	age 3
Schedule A - Cost of Go	ods Sold	Enter metho	d of invento	ry valuation	>				
1 , Inventory at beginning of ye						ar	. 6		
2 Purchases	2					old Subtract line			
3 Cost of labor	3			6 from li	ne 5 Enter	here and in Part	t		
4a Additional section 263A co	sts			I, line 2			. 7		
(attach schedule)	4a						(with respect to	Yes	No
b Other costs (attach schedul	()			property	produced	or acquired fo	or resale) apply		
5 Total Add lines 1 through	4b · 5			to the org	anization?				X
Schedule C - Rent Income	(From Rea	al Property a	nd Persor	nal Property	Leased V	With Real Prope	erty)		
(see instructions)									
Description of property									
(1)									
(2)									
(3)									
(4)									
	2 Rent r	eceived or accru	ed						
(a) From personal property (if the percentage of rent for personal property is more than 10% but not			(b) From real and personal property (if the ercentage of rent for personal property exceeds 50% or if the rent is based on profit or income)			3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)			
(1)									
(2)									
(3)									
(4)									
Total		Total				1			
(c) Total income Add totals of co	olumns 2(a) ar					(b) Total deduct Enter here and o			
here and on page 1, Part I, line 6,						Part I, line 6, coli	umn (B) 🕨		
Schedule E - Unrelated De	ebt-Finance	ed Income (s	ee instruction	ons)					
				ncome from or	3 1		connected with or allocat nced property	ole to	
1 Description of deb	t-financed prope	erty		o debt-financed operty		ht line depreciation ach schedule)	(b) Other deductions (attach schedule)		
(1)						· · · · · · · · · · · · · · · · · · ·		<u> </u>	
(2)			·						
(3)									
(4)							,		
4 Amount of average adjusted basis of or allocable to allocable to debt-financed property (attach schedule) 5 Average adjusted basis of or allocable to debt-financed property (attach schedule)		llocable to nced property	4	Column divided column 5		income reportable n 2 x column 6)	(column 6 x total	8 Allocable deductions column 6 x total of columns 3(a) and 3(b))	
(1)				%					
(2)				%					
(3)				%					
(4)				%					
					Enter her Part I, lir	re and on page 1, ne 7, column (A)	Enter here and o Part I, line 7, co		
Totals				▶					

Form **990-T** (2019)

Page 4

Schedule F - Interest, Ann	uilles, Koyaities			ntrolled Org			auons	(see	mstructi	uns)	
1 Name of controlled organization	2 Employer identification numb	er 3 N	et unrela	ated income nstructions)	4 Total	of specified included in		uded in	f column 4 that is in the controlling ion's gross income		6 Deductions directly connected with income in column 5
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organiz	zations					1 40	Dark of an		45-4		1. Dadications denotity
7 Taxable Income	8 Net unrelated in (loss) (see instruct			Total of specific ayments made		inc	Part of co luded in th inization's	he contr	polling		1 Deductions directly nected with income in column 10
(1)				-							
(2)										1	
(3)								_			
<u>(4)</u>						_	dd column		140	<u> </u>	dd columns 6 and 11
Totals	ncome of a Sec	tion 501(c)(7),	(9), or (17		Pa	er here an rt I, line 8, on (see	, column	n (A)		ter here and on page 1, rt I, line 8, column (B)
1 Description of income	2 Amount of	income		directly cor	3 Deductions 4 Set-asides (attach schedule)			5 Total deductions and set-asides (col 3 plus col 4)			
(1)									_		
(2)											
(3)											
(4) Totals ▶	Enter here and o	olumn (A)					,				Enter here and on page 1 Part I, line 9, column (B)
Schedule I - Exploited Exe	empt Activity In	come, Oti	ner Th	an Advert	ising Ir	come	see in	struct	ions)		-
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expendirectly connected production unrelated business in	ly I with on of ed	from unrelated or business 2 minus collections of the gain, collections	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7		able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)			
(1)							•				i ·
(2)	1			<u> </u>							
(3)											
(4)											-
	Enter here and on page 1, Part I, line 10, col (A)	Enter here a page 1, P line 10, co	art I,	on page				Enter here and on page 1, Part II, line 25			
Totals ▶ Schedule J- Advertising Ir	ICOME (see instr	uctions)		<u> </u>							
Part I Income From Per			onsol	idated Rad	sis						
income From Per	iouicais Report	cu on a C	JIIJUI	Tagren Da							7
1 Name of periodical	2 Gross advertising income	3 Dire advertising		4 Adver gain or (los 2 minus ci a gain, co cols 5 thr	ss) (col ol 3) If mpute	5	Circulation income	1	6 Read cos	-	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)											
(2)											
(3)		-		· .	1						
(4)				1							
Totals (carry to Part II, line (5))						<u> </u>					5 990 T (2040

Form **990-T** (2019)

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	4 Advertising gain or (loss) (col 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 ▶						
	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) ▶				'		<u> </u>

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, lin	e 14		

Form **990-T** (2019)

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- 1	2	-3	7	_	Λ	$^{\circ}$		1
- 1	٦.			n	1,	_ >	٠,	r

ATT	ACHM	(ENT	1

ORGANIZATION'S ONLY UNRELATED TRADE OR BUSINESS ACTIVITY

INVESTMENT INCOME FROM LIMITED PARTNERSHIPS

NEW	YORK-PRESBYTERIAN	FUND,	INC
•	•		

13-3160356

ATTACHMENT 2

NAME AND FEIN OF PARENT CORPORATION 13-3957095

ATTACHMENT 3

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS OR S CORPORATIONS

INTEREST INCOME - PARTNERSHIP DIVIDEND INCOME - PARTNERSHIP ORDINARY INCOME - PARTNERSHIP RENTAL INCOME - PARTNERSHIP ROYALTY INCOME - PARTNERSHIP CANCELLATION OF DEBT OTHER INCOME - PARTNERSHIP	191,439. 133,098. 7,155,953. 542. 110,713. 49,653. 242,465.
INCOME - PARTNERSHIP INCOME (LOSS) FROM PARTNERSHIPS	7,883,863.

1	2	-3	1	6	へつ	_	c
	. ၁	- 0	· Т	יס	JO	\cdot	О

ATTACH	MENT	4	

FORM 990T - PART II - LINE 18 - INTEREST

INVESTMENT INTEREST EXPENSE - PARTNERSHIP

PART II - LINE 18 - INTEREST

8,614.

8,614.

ATTACHMENT 5

FORM 990T - PART II - LINE 27 - TOTAL OTHER DEDUCTIONS

DEDUCTIONS ROYALTY INCOME	11,960.
SECTION 59(E)(2) EXPENSES	7,497,614.
INTANGIBLE DRILLING COST	531,821.
DEDUCTIONS- PORTFOLIO (OTHER)	3,989.
OTHER DEDUCTIONS	860,014.
TAX PREPARATION FEES	4,750.

PART II - LINE 27 - OTHER DEDUCTIONS

8,910,148.

SCHEDULE D (Form 1120)

Department of the Treasury

Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T

► Go to www irs gov/Form1120 for instructions and the latest information

OMB No 1545-0123

2019

Employer identification number Name 13-3160356 NEW YORK-PRESBYTERIAN FUND, INC. X No Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss Short-Term Capital Gains and Losses (See instructions.) (g) Adjustments to gain See instructions for how to figure the amounts to enter on (h) Gain or (loss) (e) or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part I, line 2, column (d) and combine This form may be easier to complete if you round off cents to (sales price) (or other basis) the result with column (g) column (q) whole dollars 1a. Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However if you choose to report all these transactions on Form 8949 leave this line blank and go to line 1b . . . 1b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 2,662. 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 6 Unused capital loss carryover (attach computation) 2,662. Long-Term Capital Gains and Losses (See instructions (h) Gain or (loss) (g) Adjustments to gain See instructions for how to figure the amounts to enter on the lines below or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part II, line 2, column (d) and combine This form may be easier to complete if you round off cents to (sales price) (or other basis) column (g) the result with column (g) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However if you choose to report all these transactions on Form 8949 leave this line blank and go to line 8b . . . 8b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 10 Totals for all transactions reported on Form(s) 8949 1,165,785. 415,562. Enter gain from Form 4797, line 7 or 9 11 Long-term capital gain from installment sales from Form 6252, line 26 or 37 12 12 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 13 Capital gain distributions (see instructions) Net long-term capital gain or (loss) Combine lines 8a through 14 in column h 15 1,581,347. Part III Summary of Parts I and II Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 16 2,662. 1,581,347. Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7). 17 17 Add lines 16 and 17 Enter here and on Form 1120, page 1, line 8, or the proper line on other returns 18 1,584,009. Note If losses exceed gains, see Capital Losses in the instructions

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2019

Sales and Other Dispositions of Capital Assets

► Go to www irs gov/Form8949 for instructions and the latest information

Department of the Treasury Internal Revenue Service

► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No 1545-0074

Name(s) shown on return NEW YORK-PRESBYTERIAN FUND, INC.				Social	Social security number or taxpayer identification number 13-3160356			
Before you check Box A. B. or C below.			v Form(s) 1099-B	or substitute st			titute	
statement will have the same informat broker and may even tell you which bo	ion as Form 10							
Part I Short-Term. Transactinstructions) For long	g-term trans	actions, see	page 2	•	_	,		
Note : You may aggree reported to the IRS and Schedule D, line 1a	and for whic	h no adjustr	ments or codes	are require	ed. Enter the t	otals directly or	า	
You must check Box A, B, or C be complete a separate Form 8949, for one or more of the boxes, com	low. Check of page 1, for e	only one box. ach applicab	If more than one	e box applie ve more sho	s for your short rt-term transac	-term transaction	ns,	
(A) Short-term transactions (B) Short-term transactions X (C) Short-term transactions	reported on F	orm(s) 1099	-B showing basis			e Note above)		
1 (a)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed of (Mo , day, yr)	(d) Proceeds (sales proce) (see instructions)	(e) Cost or other bas	If you enter an enter a co	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f) See the separate instructions (h) Gain or (loss) Subtract column		
Description of property (Example 100 sh XYZ Co)				and see Column in the separate instructions		(g) Amount of adjustment	from column (d) and combine the result with column (g)	
FORM K-1	VARIOUS	VARIOUS					2,662	
	_							
	_					-		
<u> </u>								
2 Totals Add the amounts in columns negative amounts) Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C at	I here and inc is checked), lin	lude on your e 2 (if Box B					2,662	

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

For Paperwork Reduction Act Notice, see your tax return instructions. JSA 9X2615 2 000 3163AN B85P

Form **8949** (2019)

Attachment Sequence No 12A

		9-
Name(s) shown on return. Name and SSN or taxpayer identification no not required if shown on other side	Social security number or taxpayer identification number	
NEW YORK-PRESBYTERIAN FUND, INC.	13-3160356	

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check

Part II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions) For short-term transactions, see page 1

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

	(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
	(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
X	(F) Long-term transactions not reported to you on Form 1099-B

(a) Description of property (Example 100 sh XYZ Co)	Date acquired dispo	(c) Date sold or	Date sold or disposed of (sales price)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	If you enter an amount in column (g), enter a code in column (f) See the separate instructions		(h) Gain or (loss) Subtract column (e) from column (d) and
		(Mo , day, yr)			(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
FORM-K1	VARIOUS	VARIOUS					1,165,785
				•			
2 Totals Add the amounts in columns negative amounts) Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	here and incl is checked), line	ude on your e 9 (ıf Box E					1,165,785

Note If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Form 8949 (2019)