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2019

OMB No 1545-0052

## **Return of Private Foundation**

Form 990-PF

Department of the Treasury

Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

	er identification number
THE LAURA & ISAAC PERLMUTTER	
FOUNDATION INC 65-07423	8
Number and street (or P O box number if mail is not delivered to street address) PO BOX 1028 Room/suite	e number (see instructions)
(516) 569	1610
City or town, state or province, country, and ZIP or foreign postal code  LAKE WORTH, FL 33460  C If exem	tion application is pending, check here
G Check all that apply $\square$ Initial return $\square$ Initial return of a former public charity D 1. Forei	ın organızatıons, check here
	gn organizations meeting the 85%
☐ Address change ☐ Name change	check here and attach computation
	re foundation status was terminated ection 507(b)(1)(A), check here
Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation	
	nundation is in a 60-month termination ection 507(b)(1)(B), check here
Part I Analysis of Revenue and Expenses (The total (a) Revenue and (b) Not worked	(d) Disbursements
of amounts in columns (b), (c), and (d) may not necessarily expenses per expenses per	nt (c) Adjusted net for charitable income purposes
equal the amounts in column (a) (see instructions) ) books	(cash basis only)
1 Contributions, gifts, grants, etc , received (attach schedule) 13,954,000	
2 Check ▶ ☐ If the foundation is <b>not</b> required to attach	
Sch B	502
	,503
5a Gross rents	,000
b Net rental income or (loss)	
` '	
b Gross sales price for all assets on line 6a	
b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2)	0
8 Net short-term capital gain	
9 Income modifications	
10a Gross sales less returns and allowances	
b Less Cost of goods sold	
c Gross profit or (loss) (attach schedule)	
11 Other income (attach schedule)	
<b>12 Total.</b> Add lines <b>1</b> through <b>11</b> 15,059,503 1,109	,503
	,750 281,250
14 Other employee salaries and wages	
15 Pension plans, employee benefits	0 32,564
16a Legal fees (attach schedule)	0 32,364
15 Pension plans, employee benefits	
c Other professional fees (attach schedule)	
17   Interest	0 23,318
Taxes (attach schedule) (see instructions)	25,510
20 Occupancy	<del>                                     </del>
20 Occupancy	+
22 Printing and publications	+
23 Other expenses (attach schedule)	945 61
23 Other expenses (attach schedule)	+ + + + + + + + + + + + + + + + + + + +
Add lines 13 through 23	,695 337,193
25 Contributions, gifts, grants paid	7,632,418
26 Total expenses and disbursements. Add lines 24 and 25 8.064.306 99	605
25 8,064,306 90  27 Subtract line 26 from line 12	,695 7,969,611
a Excess of revenue over expenses and	
disbursements 6,995,197	
b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)	808,
For Paperwork Reduction Act Notice, see instructions.  Cat No 11	

Form 990-PF (2019) Page 2 Balance Sheets Attached schedules and amounts in the description column Beginning of year End of year Part II should be for end-of-year amounts only (See instructions ) (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash—non-interest-bearing 49,685 199,578 199,578 2 15,660,226 8,559,531 8,559,531 3 Accounts receivable Less allowance for doubtful accounts ▶ Pledges receivable Less allowance for doubtful accounts ▶ 5 

54,825,000

70,534,911

70,534,911

70,534,911

70,534,911

0

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86,778,000

95,537,109

8,001

8,001

95.529.108

95,529,108

95.537,109

1

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3

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70,534,911

6,995,197

17,999,000

95,529,108

95.529.108

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0

86,778,000

95,537,109

Receivables due from officers, directors, trustees, and other

Less allowance for doubtful accounts ▶

Inventories for sale or use . . . . .

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe -\_

Grants payable

Prepaid expenses and deferred charges . . . .

Investments—land, buildings, and equipment basis ▶

Investments—other (attach schedule) . . . . . .

Less accumulated depreciation (attach schedule)

Accounts payable and accrued expenses . . . . . .

Foundations that follow FASB ASC 958, check here ▶

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . . .

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Capital stock, trust principal, or current funds . . . . . . . . .

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

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

**Analysis of Changes in Net Assets or Fund Balances** 

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

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

Paid-in or capital surplus, or land, bldg, and equipment fund

Total assets (to be completed by all filers—see the

Deferred revenue . . . . . . . . . . . . . . . . .

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions . .

Net assets with donor restrictions . . .

and complete lines 26 through 30.

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

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Less accumulated depreciation (attach schedule) ▶ 

disqualified persons (attach schedule) (see instructions) . . . . . Other notes and loans receivable (attach schedule)

Investments—U S and state government obligations (attach schedule) 

	4
	5 6
	7
ţ	8
Assets	9
Ă	10a
	b
	С

b

11

12 13

14

15

16

17 18

19

20

21

22

23

24

25

26

28

30

Part III

2

Liabilities

Balances

Fund

ŏ

Assets 27

Net 29

	<b>(b)</b> How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
(g) st or other basis s expense of sale		( <b>l</b> Gain o (e) plus (f)	r (loss)

	(e)	(f)	(g)			(h)	
	Gross sales price	Depreciation allowed (or allowable)	Cost or other ba plus expense of			n or (loss) s (f) minus (g)	
a							
b							
C							
d							
е							
	Complete only for assets show	ring gain in column (h) and owned by	the foundation on 12/3	1/69		(I)	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (յ), ıf any		Gains (Col (h) gain minus col (k), but not less than -0-) Losses (from col (h))		
a							
b							
С							
d							
е							
2	Capital gain net income or (n	1 3	n, also enter in Part I, lin ss), enter -0- in Part I, lir		2		
3	Net short-term capital gain or	r (loss) as defined in sections 1222(5	5) and (6)				
	If gain, also enter in Part I, li in Part I, line 8	ne 8, column (c) (see instructions)	f (loss), enter -0-	}	3		
Pari	V Qualification Unde	r Section 4940(e) for Reduce	d Tax on Net Inves	tment Inc	come		
	_						
LOI. O	odonal use by domestic private	foundations subject to the section 4	940(a) tax on net invest	ment incom	le )		

Net value of noncharitable-use assets

58,428,093

63,028,806

40,091,541

43,202,990

35,418,023

2

3

4

5

6

7

8

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the

. . . . . . . . . . .

Enter the appropriate amount in each column for each year, see instructions before making any entries

1,949,529

5,099,787

1,825,369

4,821,592

1,552,374

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5

**6** Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

Adjusted qualifying distributions

If section 4940(d)(2) applies, leave this part blank

(a)

Base period years Calendar

year (or tax year beginning in)

2018

2017

2016

2015

2014

2 Total of line 1, column (d)

**5** Multiply line 4 by line 3

instructions

1a

Page 3

(d)

Distribution ratio

(col (b) divided by col (c))

0 033366

0 080912

0 045530

0 111603

0 043830

0 315241

0 063048

82,814,182

5,221,269

5,231,377

7,969,611

Form 990-PF (2019)

10,108

Yes 🗸 No

Page **6** 

	930 11 (2013)										age (
	_		Activities for Which	Form 4720 May Be	Required (co	ntinue	ed)				I _
5a	During the year did the foundation		ay or incur any amount to    You have attempt to influence legislation (section 4945(e))?   Yes   You have legislation   Yes   Yes								No
						Yes	<b>✓</b>	No			
	(2) Influence the outcome of any s		•	•							
	on, directly or indirectly, any vo		-		• • [	Yes	<b>✓</b>	No			
	(3) Provide a grant to an individual		, ,,	•		Yes	<b>✓</b>	No			
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.										
	, , , , , ,		• • [	Yes	<b>✓</b>	No					
	(5) Provide for any purpose other t										
	educational purposes, or for the		·		• • [	Yes	<b>✓</b>	No			
Ь	If any answer is "Yes" to $5a(1)-(5)$ ,		=			ed in					
	Regulations section 53 4945 or in a						•		5b		
	Organizations relying on a current r		-			. ▶					
С	If the answer is "Yes" to question 5			•							
	tax because it maintained expenditi				• • [	Yes		No			
	If "Yes," attach the statement requi	red b	y Regulations section 53 -	4945–5(d)							
6a	Did the foundation, during the year,	, rece	ive any funds, directly or	indirectly, to pay premit	ıms on						
	a personal benefit contract?					Yes	<b>✓</b>	No			
b	Did the foundation, during the year,	, pay	premiums, directly or ind	irectly, on a personal be	nefit contract? .				6b		No
	If "Yes" to 6b, file Form 8870										
7a	At any time during the tax year, wa	s the	foundation a party to a p	rohibited tax shelter trai	nsaction?	Vec	<b>~</b>	No			
b	If "Yes", did the foundation receive	any p	roceeds or have any net	income attributable to th	ne transaction? .			110	7b		
8	Is the foundation subject to the sec	tion 4	960 tax on payment(s) o	f more than \$1,000,000	ın remuneration	or					
	excess parachute payment during the	he ye	ar <sup>9</sup>		· · г	Yes	<b>✓</b>	No			
	Information About (	Offic	ers. Directors. Trust	ees, Foundation Ma	nagers, High				vees,		
Pa	and Contractors		,	,	3 , 3	•		•	•		
1	List all officers, directors, truste	es, fo	oundation managers an	d their compensation	See instruction	ns					
			<b>b)</b> Title, and average	(c) Compensation (If	(d) Contrib		:0	(0)	Evner	SA 300	ount
	(a) Name and address		hours per week	not paid, enter -0-)	employee benefit plans and				d (e) Expense acco		
ISAAC	PERLMUTTER	DRES	devoted to position  IDENT - DIRECTOR	-0-)	deferred compensation			0			
	OX 1028	1 00	IDENT DIRECTOR	0				Ί			
	WORTH, FL 33460										
LAUR	A PERLMUTTER		PRESIDENT - DIRECTOR	0	D			0			C
	OX 1028	1 00									
	WORTH, FL 33460	TOFACURED DIRECTOR			20						
	J NISSEL	TREASURER - DIRECTOR 20 00		375,000			0			Ĺ	
	ARBERRY LANE DSBURGH, NY 11598										
2	Compensation of five highest-pa	id en	ployees (other than th	ose included on line 1	_see instruct	ions). I	[f no	ne, e	nter "	NONE.	."
			(b) Title, and average		(d) Contrib				_		
(a)	Name and address of each employee more than \$50,000	paid	hours per week	(c) Compensation	employee plans and			(e) Expense acco			
	more than \$50,000		devoted to position		compen		1	01	ilei ali	owanc	<b>C</b> 3
NON											
Tota	I number of other employees paid ov	or ¢F	L			•	-+				
TOLA	I number of other employees paid ov	ei \$3	0,000					Г	OO	0-PF (	(2010
								LOL	<b>サ</b> ブ	U-PF (	1701A

Form 990-PF (2019)	store Foundation Manager Highly Baid F	Page <b>7</b>
Part VIII Information About Officers, Directors, Trus and Contractors (continued)	stees, Foundation Managers, Highly Paid E	:mpioyees,
3 Five highest-paid independent contractors for professiona	l services (see instructions). If none, enter "NO	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NEAL J NISSEL CPA	CHARITY PLANNING INVESTIGATIVE ANALYSIS	375,000
835 BARBERRY LANE WOODSBURGH, NY 11598		
Total number of others receiving over \$50,000 for professional service	es	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. In		Expenses
organizations and other beneficiaries served, conferences convened, research paper	ers produced, etc	<u> </u>
1		
2		
3		
4		
-		
Part IX-B Summary of Program-Related Investments	s (coo instructions)	
		A == = = +
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		0
		Form <b>990-PF</b> (2019)

2

3a 3h

4

5

7,969,611

7.959.503

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10.108

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

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

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

Amounts set aside for specific charitable projects that satisfy the

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

3

4

5

4.130.601

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0

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Part XIII	_

**b** Total for prior years

a From 2014. . . . .

**b** From 2015. . . . . c From 2016. . . . d From 2017. . . . .

e From 2018. . . . .

O-PF	(2)	01	9	)	
7111					_

0-PF (20	019)			
XIII	Undistributed Income	(see	instructions	)

1 Distributable amount for 2019 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2019 a Enter amount for 2018 only. . . . . .

Excess distributions carryover, if any, to 2019

f Total of lines 3a through e. . . . . . . .

**d** Applied to 2019 distributable amount. . . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a) )

**5** Excess distributions carryover applied to 2019

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

(If an amount appears in column (d), the

6 Enter the net total of each column as

**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 e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . f Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . . . 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 2014 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2020.

10 Analysis of line 9

a Excess from 2015. . **b** Excess from 2016. . c Excess from 2017. . . .

d Excess from 2018. . . e Excess from 2019. . .

Subtract lines 7 and 8 from line 6a . . . . .

indicated below:

4 Qualifying distributions for 2019 from Part XII, line 4 > \$ 7,969,611 a Applied to 2018, 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). . . . . . . . . .

1,720,805

1.962.445

1.720.805

1,962,445

3.839.010

(a)

Corpus

3.683.250

3,839,010

7,522,260

7,522,260

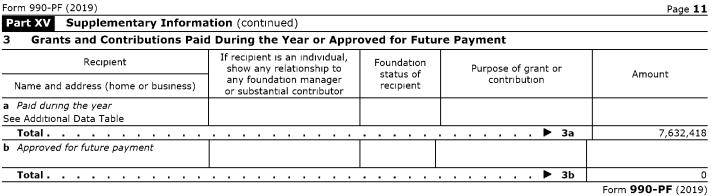
(b)

Years prior to 2018

(c)

2018

- 4,130,601



Enter gross amounts unless otherwise indicated		Unrelated business income (a) (b)		Excluded by section	512, 513, or 514	(e) Related or exempt
Program service revenue  a  b		(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income (See instructions )
g Fees	and contracts from government agencies					
	rship dues and assessments					
3 Interes	t on savings and temporary cash nents			14	225,503	
	ds and interest from securities			14	880,000	
	tal income or (loss) from real estate					
	financed property					
	ebt-financed property					
	tal income or (loss) from personal property	+				
	(loss) from sales of assets other than					
invento	• ,					
9 Net inc	ome or (loss) from special events					
0 Gross	profit or (loss) from sales of inventory					
1 Other r	evenue <b>a</b>					
d						
L2 Subtota	al Add columns (b), (d), and (e)		0		1,105,503	
.2 Subtota .3 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)				1,105,503	
.2 Subtota .3 Total. (See wo	al Add columns (b), (d), and (e)	lations )		13		
.2 Subtoto 3 Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13  pt Purposes  F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13  pt Purposes  F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13  pt Purposes  F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13  pt Purposes  F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13  pt Purposes  F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13  pt Purposes  F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	
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2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations )  Accomplish  Income is report	nment of Exempled in column (e) of	13 pt Purposes F Part XVI-A contribu	ted importantly to	

(	/
XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations
	Exchipt organizations

Part	XVI		Information Re Exempt Organi:		ransters To	and Iransacti	ons and Rela	ationships With Noncha	ritable		
		rganı		directly enga				zation described in section 50 ations?	1	Yes	No
<b>a</b> Tra	nsfers	from	the reporting found	dation to a n	oncharitable ex	kempt organizatio	n of				
(1)	Casl	ո							1a(1)		No
(2)	Oth	er ass	ets						1a(2)		No
<b>b</b> Oth											
	(1) Sales of assets to a noncharitable exempt organization								1b(1)	_	No
									1b(2)	_	No
			facilities, equipmen	•					1b(3)	_	No
٠,			ement arrangemen loan guarantees.						1b(4) 1b(5)	_	No No
									1b(6)	_	No
					_				1c		No
											110
of t	he go	ods, d	ther assets, or serv	vices given b	y the reporting	foundation If the	e foundation red	ceived less than fair market v assets, or services received			
(a) Line	No	(b)	Amount involved	(c) Name of	noncharitable exe	empt organization	(d) Description	on of transfers, transactions, and s	haring arra	ingemer	nts
<b>2a</b> Is t	he fou	ındatı	on directly or indire	ctly affiliated	d with, or relate	ed to, one or more	tax-exempt or	ganizations			
					n 501(c)(3)) or	ın section 527? .		🗆 Yes	<b>✓</b> No		
b If"	Yes,"		lete the following so  a) Name of organizatio		1 /	( <b>b)</b> Type of organizat	ion I	(c) Description of rel	ationehin		
		,,	1) Name of Organization		,	(b) Type of Organizat		(c) Description of Tel	ationship		
	Lln	day 50	analtice of namumi	I daalara tha	+ T have evame	mad this water w	aludina sasamm			+a +b a	boot
	of	ny kr		, it is true, co				eanying schedules and statem ther than taxpayer) is based			
Sign	1	****	**	-		2020-03-03	****:		y the IRS d urn	ıscuss tl	กเร
Here		Sign	ature of officer or tr	ustee		<u>l</u> Date	Title	bel	h the prepa ow e instr )	_	
	1	Pr	nt/Type preparer's	name	Preparer's Sig	ınature	Date	PTIN	•		<u> </u>
			· ·					Check if self- employed ▶ ☑	P0001	9790	
Paid			NEAL J NISSEL				2020-03-0				
Prep Use		1	m's name ► NEAL	. J NISSEL C	PA			Firm's	EIN ►11	-62234	 179
<b>53</b> E	J.111	_	m's address ► 83	5 BARBERRY	LANE						
			Wo	OODSBURGH	, NY 11598			Phone	e no (516	5) 569-	1610

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total
contributions received by the foundation before the close of any tax year (but only if they have contributed more
than \$5,000).

ISAAC PERLMUTTER

LAURA PERLMUTTER

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMERICAN FRIENDS OF MAGEN DAVID NONE NONPROFIT TO ASSIST NONPROFIT 2,500 ADOM PUBLIC CHA PURPOSE OF CHARITY

3300 PGA BLVD PALM BEACH GARDENS, FL 33410				
BIG DOG RANCH RESCUE FOUNDATION 14444 OKEECHOBEE BLVD LOXAHATCHEE GROVES, FL 33470	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	1,500
BREAST CANCER RESEARCH	NONE	NONPROFIT	TO ASSIST NONPROFIT	2 350

BIG DOG RANCH RESCUE FOUNDATION 14444 OKEECHOBEE BLVD LOXAHATCHEE GROVES, FL 33470	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	1,500
BREAST CANCER RESEARCH FOUNDATION 28 WEST 44 STREET NEW YORK, NY 10036	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	2,350

<u>'</u>				
BREAST CANCER RESEARCH FOUNDATION 28 WEST 44 STREET NEW YORK, NY 10036	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	2,350
Total			▶ 3a	7,632,418

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BRUCE AND MARSHA MOSKOWITZ NONE NONPROFIT TO ASSIST NONPROFIT 50,000 FOUNDATION INC PUBLIC CHA PURPOSE OF CHARITY

225 LIST ROAD PALM BEACH, FL 33480				
CENTER FOR SECURITY POLICY 2020 PENNSYLVANIA AVE NW WASHINGTON, DC 20006	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	10,000
HOLY TRINITY NURSING & REHABILITATION CENTER 300 BARBER AVENUE	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	2,500

WASHINGTON, DC 20006		PUBLIC CHA	PURPOSE OF CHARITY	
HOLY TRINITY NURSING & REHABILITATION CENTER 300 BARBER AVENUE WORCESTER, MA 01606	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	2,50
·				1

Total .

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Amount contribution

Purpose of grant or contribution

a Paid during the year

HOSPITAL SPECIAL SURGERY 535 EAST 70TH STREET NEW YORK, NY 10021	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	101,000
KRAVIS CENTER701 OKEECHOBEE BLVD	NONE	NONPROFIT	TO ASSIST NONPROFIT	5.000

KRAVIS CENTER701 OKEECHOBEE BLVD WEST PALM BEACH, FL 33401	NONE		TO ASSIST NONPROFIT PURPOSE OF CHARITY	5,000
MORSE LIFE FOUNDATION 4847 DAVID S MACK DRIVE WEST PALM BEACH, FL 33417	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	350

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NACDL EQUINDATION FOR CRIMINAL NONE NONDBOETT TO ASSIST NONDPOSIT 50.000

JUSTICE 1660 L STREET WASHINGTON, DC 20036	NONE	PUBLIC CHA	PURPOSE OF CHARITY	50,000
NATIONAL REVIEW INSTITUTE	NONE	NONPROFIT	TO ASSIST NONPROFIT	5,000

NATIONAL REVIEW INSTITUTE 19 WEST 44 STREET NEW YORK, NY 10036	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	5,0
NORTHWELL HEALTH FOUNDATION 2000 MARCUS AVE	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	

П	19 WEST 44 STREET NEW YORK, NY 10036	NONE	PUBLIC CHA	PURPOSE OF CHARITY	5,00
	NORTHWELL HEALTH FOUNDATION 2000 MARCUS AVE	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	5

Total .

NEW YORK, NY 10036				
NORTHWELL HEALTH FOUNDATION 2000 MARCUS AVE NEW HYDE PARK, NY 11042	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	50

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

or substantial contributor

Total .

a Paid during the year				
NYU LANGONE MEDICAL CENTER 25 WEST FOURTH STREET NEW YORK, NY 10012	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	6,253,118

THE FEDERALIST SOCIETY 1776 I STREET NW WASHINGTON, DC 20006	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	6
THE GREEN TURTLE CAY FOUNDATION	NONE	NONPROFIT	TO ASSIST NONPROFIT	-

1776 I STREET NW WASHINGTON, DC 20006		PUBLIC CHA	PURPOSE OF CHARITY	
THE GREEN TURTLE CAY FOUNDATION 1001 FANNIN HOUSTON TX 77002	NONE		TO ASSIST NONPROFIT PURPOSE OF CHARITY	10,000

60,000

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

or cubetantial contributor

Total .

	or substantial contributor			
a Paid during the year				
THE PROMISE FUND OF FLORIDA INC 340 ROYAL POINCIANA WAY	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	1,000

340 ROYAL POINCIANA WAY PALM BEACH, FL 33480		PUBLIC CHA	PURPOSE OF CHARITY	
TOWN OF PALM BEACH UNITED WAY 44 COCOANUT ROW PALM BEACH FL 33480	NONE		TO ASSIST NONPROFIT PURPOSE OF CHARITY	10,000

TOWN OF PALM BEACH UNITED WAY 44 COCOANUT ROW PALM BEACH, FL 33480		NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	10
TRI-COUNTY ANIMAL RESCUE	NONE	NONPROFIT	TO ASSIST NONPROFIT	

PALM BEACH, FL 33480		PUBLIC CHA	PURPOSE OF CHARITY	
TRI-COUNTY ANIMAL RESCUE 21287 BOCA RIO ROAD BOCA RATON, FL 33433	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	50

FALM BLACH, I'L 33400				
TRI-COUNTY ANIMAL RESCUE 21287 BOCA RIO ROAD BOCA RATON, FL 33433	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	50

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or husiness)

Total .

Traine and dualess (nome or business)	or substantial contributor			
a Paid during the year				
TURNING POINT USA	NONE	NONPROFIT	TO ASSIST NONPROFIT	1,000,000

TURNING POINT USA 217 1/2 ILLINOIS STREET LEMONT, IL 60439	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	1,000,000
URBAN REVITALIZATION COALITION 3128 MAYFIELD ROAD	NONE	NONPROFIT PUBLIC CHA	TO ASSIST NONPROFIT PURPOSE OF CHARITY	50,000

URBAN REVITALIZATION COALITION 3128 MAYFIELD ROAD CLEVELAND HEIGHTS, OH 44118	NONE		TO ASSIST NONPROFIT PURPOSE OF CHARITY	50,000
YOUNG ISRAEL OF WOODMERE	NONE	NONPROFIT	TO ASSIST NONPROFIT	18,000

3128 MAYFIELD ROAD CLEVELAND HEIGHTS, OH 44118		PUBLIC CHA	PURPOSE OF CHARITY	·
YOUNG ISRAEL OF WOODMERE 859 PENINSULA BLVD WOODMERE.NY 11598	NONE		TO ASSIST NONPROFIT PURPOSE OF CHARITY	18,000

*			
YOUNG ISRAEL OF WOODMERE 859 PENINSULA BLVD WOODMERE, NY 11598	NONE	 TO ASSIST NONPROFIT PURPOSE OF CHARITY	18,000

erile draffite print - Do Not Process   As thed Data -	DEN. 95491072000150
TY 2019 Investments Corporate Stock Schedule	
11 2029 211 Cottinents Corporate Stock Schedule	
Name: THE LAURA & ISAAC PERLMUTTER	

DIN: 02/010720061E0

86,778,000

86,778,000

FOUNDATION INC

**EIN:** 65-0742318

PUBLIC TRADED SECURITIES

efile GPAPHIC print - DO NOT PPOCESS | As Filed Data -

Investments Corporation Stock Schedule

Name of Stock
End of Year Book
Value
Market Value

efile GRAPHIC print - DO NOT PRO	CESS	As Filed Data	-	DLI	N: 93491072006150
TY 2019 Legal Fees Sche	dule				
r	lame:	THE LAURA	& ISAAC PERLMUT	TER	
		FOUNDATIO	N INC		
	EIN:	65-0742318			
Category		Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ARNOLD PORTER KAYE SCHOLER		32,564	0		32,564

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	: 93491072006150	
TY 2019 Other Expenses Schedule					
Name:	THE LAURA & IS	SAAC PERLMUTTE	R		
	FOUNDATION INC				
EIN:	<b>65-0742318</b>				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
FILING FEES	61	0		61	

INVESTMENT FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491072006150		
TY 2019 Other Increases Schedule					
Name:	THE LAURA &	ISAAC PERLMUTTER			
	FOUNDATION	INC			
EIN:	65-0742318				
De	escription		Amount		
UNREALIZED GAIN ON INVESTMENT IN PUBLICLY TRADED STOCK		17,999,000			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		D	LN: 93491072006150	
TY 2019 Other Liabilities Schedule					
Name:	THE LAURA &	ISAAC PERLN	<b>JUTTER</b>		
	FOUNDATION	INC			
EIN:	65-0742318				
Description	n		Beginning of Year - Book Value	End of Year - Book Value	
EXCHANGE DUE TO OFFICER			0	8,001	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491072006150
TY 2019 Substantial Contribut Schedule	cors		
	THE LAURA & ISAAC F FOUNDATION INC 65-0742318	ERLMUTTER	
Name		Addı	ress
ISAAC PERLMUTTER		PO BOX 1028 LAKE WORTH, FL 33460	
LAURA PERLMUTTER		PO BOX 1028 LAKE WORTH, FL 33460	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491072006150	
TY 2019 Taxes Schedule					
Name:	THE LAURA	& ISAAC PERLMUT	TER		
	FOUNDATIO	N INC			
ETN.	65-0742318				
EIN:	05-0/42318				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
FEDERAL TAX ON INVESTMENT INCOME	23,318	0		23,318	

efile GRAPHIC print - DO	NOT PROCESS As Filed Data -		DLN: 93491072006150				
Schedule B	Schedule of Contributors		OMB No 1545-0047				
(Form 990, 990-EZ, or 990-PF)  Department of the Treasury Internal Revenue Service  Attach to Form 990, 990-EZ, or 990-PF  Go to www irs gov/Form990 for the latest information  2019							
Name of the organization THE LAURA & ISAAC PERLM	JTTER	Employer id	lentification number				
FOUNDATION INC  Organization type (check	one)	65-0742318					
organization type (oncor	one,						
Filers of:	Section:						
Form 990 or 990-EZ	Form 990 or 990-EZ						
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a p	private foundation					
	☐ 527 political organization	☐ 527 political organization					
Form 990-PF	☑ 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
	on filing Form 990, 990-EZ, or 990-PF that received, during the yroperty) from any one contributor. Complete Parts I and II. See ii						
Special Rules							
under sections 509 received from any	n described in section 501(c)(3) filing Form 990 or 990-EZ that m (a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 one contributor, during the year, total contributions of the greater 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	or 990-EZ), Part II, line 13,	16a, or 16b, and that				
during the year, to	n described in section 501(c)(7), (8), or (10) filing Form 990 or 99 al contributions of more than \$1,000 exclusively for religious, charge prevention of cruelty to children or animals. Complete Parts I, I	arıtable, scientific, literary, c					
during the year, co If this box is check purpose Don't cor	n described in section 501(c)(7), (8), or (10) filing Form 990 or 95 intributions exclusively for religious, charitable, etc., purposes, but ed, enter here the total contributions that were received during the piete any of the parts unless the <b>General Rule</b> applies to this ore, etc., contributions totaling \$5,000 or more during the year	ut no such contributions tota ne year for an <i>exclusively</i> re rganization because it recel	aled more than \$1,000 eligious, charitable, etc , ived <i>nonexclusively</i>				
990-EZ, or 990-PF), but it	that isn't covered by the General Rule and/or the Special Rules of must answer "No" on Part IV, line 2, of its Form 990, or check the I, line 2, to certify that it doesn't meet the filing requirements of	ne box on line H of its Form					
For Paperwork Reduction Act for Form 990, 990-EZ, or 990-		Schedule B (Form 990	, 990-EZ, or 990-PF) (2019)				

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Page 2 Name of organization **Employer identification number** THE LAURA & ISAAC PERLMUTTER 65-0742318 FOUNDATION INC Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed Contributors (a) (c) (d) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person ISAAC AND LAURA PERLMUTTER 1 PO BOX 1028 Payroll \$ 13,954,000 Noncash LAKE WORTH, FL 33460 (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** \$ Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** \$ Noncash (Complete Part II for noncash contributions) (c) (d) (a) (b) **Total contributions** Name, address, and ZIP + 4 Type of contribution No. Person **Payroll** \$ Noncash (Complete Part II for noncash contributions) (a) (b) (C) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)			Page 4
	rganization A & ISAAC PERLMUTTER ION INC			Employer identification number 65-0742318
Part III	Exclusively religious, charitable, etc., con than \$1,000 for the year from any one con	tributor. Complete of e total of exclusively e instructions.) ►	zations described columns (a) throug religious, charita	in section 501(c)(7), (8), or (10) that total more
(a) No. from Part I	(b) Purpose of gift	(c) U	se of gift	(d) Description of how gift is held
	Transferee's name, address, and	` '	nsfer of gift Relati	ionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) U	se of gift	(d) Description of how gift is held
	Transferee's name, address, and	, ,	nsfer of gift Relati	ionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and		nsfer of gift Relati	ionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) U	se of gift	(d) Description of how gift is held
	Transferee's name, address, and		nsfer of gift Relati	ionship of transferor to transferee
			90	thedule B (Form 990, 990-EZ, or 990-PF) (2019)