Return of Private Foundation

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 www.irs gov/Form990PF for instructions and the latest information.

For calendar year 2019 or tax year beginning JUI	N 5, 2019	, and ending	DEC 31, 2019	
Name of foundation	<u>,</u>		A Employer identification	number
Warne of Tourisation				
RATHER FAMILY FOUNDATION			84-1996035	
Number and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
599 LEXINGTON AVE.		1800	(212) 893-9	9570
City or town, state or province, country, and ZIP or foreign	postal code		C If exemption application is per	nding check here
NEW YORK, NY 10022				, ,
G Check all that apply: X Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations,	check here
Final return	Amended return		Ţ	
Address change	Name change		 Foreign organizations mee check here and attach con 	sting the 85% test, nputation
H Check type of organization X Section 501(c)(3) 6	exempt private foundation	n2-	E If private foundation stat	us was terminated
Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation U	under section 507(b)(1)(. —
	ling method X Cash	Accrual	F If the foundation is in a 6	60-month termination
	Other (specify)		under section 507(b)(1)(. —
▶\$ 2,960,769. (Part I, colu	ımn (d), must be on cash bas	is)		
[Pantil] Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
necessarily equal the amounts in column (a)	expenses per books	income	income	(cash basis only)
1 Contributions gifts, grants, etc., received	3,100,000.		MACEN/ACEDICA	
2 Check I it the foundation is not required to attach Sch. B				
3 - Interest on savings and temporary cash investments		DEC		
4 Dividends and interest from securities	3,739.	3,739	FIVED	STATEMENT 17
5a Gross rents		121	70_	
b Net rental income or (loss)	WAR STATE		2000	
6a Net gain or (foss) from sale of assets not on line 10		GLE RESIDENCE	PATERY DESIGNATION OF THE PATER	
Gross sales price for all b assets on line 6a				
7 Capital gain net income (from Part IV, line 2)		ار های	ENGUE EAR BY	
8 Net short-term capital gain	er taken a taken a			
9 Income modifications			had a company month, a wine bitter the mineral and an analysis for the bitter of the b	
Gross sales less returns and allowances				
b Less Cost of goods sold		100		
c Gross profit or (loss)				
11 Other income			:	
2 12 Total. Add lines 1 through 11	3,103,739.	3,739.		2. The street of the street
2 13 Compensation of officers, directors trustees etc	0.	0.		0.
Other employee salaries and wages				
15 Pension plans, employee benefits	42 414			42 414
16a Legal fees STMT 2	43,414.	0.		43,414.
b Accounting fees				
c Other professional fees		<u> </u>		
17 Interest				
18 Taxes		 		24 18 8
19 Depreciation and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				<u> </u>
22 Printing and publications				
23 Other expenses			 	
24 Total operating and administrative	1	0.		12 111
ting average Add lines 19 through 99	12 11 1		I	43,414. 99,550.
expenses. Add lines 13 through 23	43,414.	75.	- 1434 TAY - 4-1	1 00 550
25 Contributions gifts, grants paid	43,414. 99,550.		with this is a	99,550.
25 Contributions gifts, grants paid 26 Total expenses and disbursements.	99,550.			
25 Contributions gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25	43,414. 99,550. 142,964.	0.		99,550.
25 Contributions gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12	99,550.			
25 Contributions gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements	99,550.	0.		
25 Contributions gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12	99,550.			

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29			1 1	
	(must agree with end-of-year figure reported on prior year's return)				_ 0.
2	Enter amount from Part I, line 27a			2	2,960,775.
3	Other increases not included in line 2 (itemize)	SEE	STATEMENT 3	3	17,900.
4	Add lines 1, 2, and 3			4	2,978,675.
5	Decreases not included in line 2 (itemize)	SEE	STATEMENT 4	5	3,739.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29		6	2,974,936.	
					222 55

Form 990-PF (2019)

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)) P	How acq - Purcha - Donati	ase I	(c) Date at (mo , day	cquired y, yr.)	(d) Date sold (mo , day, yr)	
1	NONE			· · · · · · · · · · · · · · · · · · ·						
	NE				 					
					 					
					 	-	-			
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		est or other basis expense of sale		(h) Gain or (loss) ((e) plus (f) minus (g))				
	<u> </u>					•		*		
···-	ļ									
	<u> </u>				-					
	L			10.00 1.000						
Complete only for assets shown	1							(I) Gains (Co of (k), but no		
(i) FMV as of 12/31/69	l	(ı) Adjusted basıs as of 12/31/69		xcess of col (i) r col (j), if any	1		C		from col. (I	
	Į	as UI 12/31/US	UVE	COI (j), if alty					· · · · · · ·	
	 									
	 				\dashv					
										
	 				\rightarrow					
					-					
Constal and not make as fact a	مما املیم	If gain, also ea If (loss), enter	nter in Part I, line	2	1	ا				
Capital gain net income or (net ca	•	•		e /	7	-2		····	··-	
Net short-term capital gain or (lo			and (6)		٦					
If gain, also enter in Part I, line 8,		c).)	_ 1				
If (loss), enter -0- in Part I, line 8	5									
art:Val Qualification U	Inder S	ection 4940(e) fo	or Reduced	Tax on Net	Inve	stme	nt Inc	ome	·	
	Inder S						nt Inc	ome		N/A
Part: Val Qualification Upon optional use by domestic private section 4940(d)(2) applies, leave t	Inder S e foundati	ons subject to the section					nt Inc	ome		N/A
or optional use by domestic private section 4940(d)(2) applies, leave t	Inder S e foundati his part bl	ons subject to the section	ın 4940(a) tax or	net investment in	come		nt Inc	ome		
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Form 990-PF (2019) RATHER FAMILY FOUNDATION 84-1990 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	5035	tions	Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in 1a Exempt operating foundations described in section 4940(d)(2), check here	130 00	tions	·)
Date of ruling or determination letter (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		•	75.
Į į į			*
of Part I, line 27b c All other domestic foundations enter 2% 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-)	•	_	0.
			75.
3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 4			0.
5 Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-			75.
			<u>,</u>
6 Credits/Payments: a 2019 estimated tax payments and 2018 overpayment credited to 2019 6a 0.			
b Example for organizations was assessed			
o land many special and the control of the control			
a state management of the state			
			0.
			75.
	-		, , , .
11 Enter the amount of line 10 to be Credited to 2020 estimated tax ► Refunded ► 11 Part VII-A Statements Regarding Activities			
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	\top	Yes	No
any political campaign?	1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		X
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.	1 1	4,0	
c Did the foundation file Form 1120-POL for this year?	10		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	-"		
(1) On the foundation ► \$ 0 . (2) On foundation managers ► \$ 0 .	1 1		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	1 1		
managers > \$ 0.	1 1	'	•
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
If "Yes," attach a detailed description of the activities.			
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? If "Yes," attach a conformed copy of the changes	3	,	Х
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b		
5 Was there a liquidation, termination, dissolution or substantial contraction during the year?	5		X
If "Yes," attach the statement required by General Instruction T			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	1 1	,	
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	1 1		•
remain in the governing instrument?	6	Х	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c) and Part XV	7	Х	
, , , , , , , , , , , , , , , , , , , ,			
8a Enter the states to which the foundation reports or with which it is registered. See instructions			
NY, DE			
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 G2 If "No," attach explanation	8b	Х	
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 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes," complete Part XIV	9		$_{\rm X}$ $^{\rm Z}$
10 Did any persons become substantial contributors during the tax year? If "Yes" attach a schedule listing their names and addresses STMT 6	10	Х	
	orm 990)-PF	(2019)

l Fe	Statements Regarding Activities (continued)			
		The Part of	es	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		ŀ	
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1 1	- 1	
	If "Yes," attach statement. See instructions	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	_
	Website address ► N/A			
14	The books are in care of ► JONATHAN M RATHER Telephone no. ► (212)	893-	957	/ 0
	Located at ►C/O WCAS, 599 LEXINGTON AVE, STE 1800, NEW YORK, ZIP+4 ►1	0022		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	3T /	ু ▶	
	and enter the amount of tax-exempt interest received or accrued during the year 15	N/		NIa
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		es	No X
	securities, or other financial account in a foreign country?	16	NA COL	^_
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
(Pa	foreign country Comparison		البنيد	
7.00			/es	No
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	47900 I	53	NO.
Ia	During the year, did the foundation (either directly or indirectly). (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		爱	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No		 	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	200 S	33	25
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			90
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1	1	بر محمدتان
	for the benefit or use of a disqualified person)?	2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	7	No.
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		3	
	if the foundation agreed to make a grant to or to employ the official for a period after		48	14
	termination of government service, if terminating within 90 days)		<i>\$</i> .	٠,
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 N/A	16		
	Organizations relying on a current notice regarding disaster assistance, check here	12.45	À	
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	٠,٠		
	before the first day of the tax year beginning in 2019?	10	Í	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		-; ,;	Ţ,
	defined in section 4942(j)(3) or 4942(j)(5))		- 2	•
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	1.1	٠,	
	6d and 6e) for tax year(s) beginning before 2019?		- 1	
	If "Yes," list the years \blacktriangleright	1,- 1	ł	
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	1 1	ļ	
	statement - see instructions) N/A	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	1 1]	
)			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		-	
	during the year?			
b	If "Yes," did it have excess business holdings in 2019 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	1 1	- 1	
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	\longrightarrow	<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		- 1	v
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b orm 990-	DE	X 3010)
	Fi .	JUL SSU-	rr (ZU19)

Form 990-PF (2019)

Total number of other employees paid over \$50,000

923561 12-17-19

Form 990-PF (2019)

Р	Minimum Investment Heturn (All domestic foundations must complete this part Foreign four	idations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	175	
а	Average monthly fair market value of securities	1a	386,666. 30,619.
	Average of monthly cash balances	1b	30,619.
С	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	10	417,285.
е	Reduction claimed for blockage or other factors reported on lines 1a and	1 16 1	
	1c (attach detailed explanation) 1e 0.	<u> </u>	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	417,285.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	6,259.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	411,026.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	11,824.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar	id certain	
	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	11,824.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI)		•
C	Add lines 2a and 2b	2c	75.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	11,749.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	11,749.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	11,749.
P	art XII Qualifying Distributions (see instructions)		V
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	142,964.
b	Program-related investments - total from Part IX-B	1b	0.
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	
Ь	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	142,964.
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	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	142,964.
	Note The amount on line 6 will be used in Part V column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualifies fo	
			Form 990-PF (2019)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	² (c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				11,749.
2 Undistributed income, if any, as of the end of 2019	HOTELS TO SERVE		E-ASSESSED TO A STANDARD CONTRACTOR	
a Enter amount for 2018 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2019.				
a From 2014				
b From 2015				
c From 2016				
^d From 2017				
e From 2018				
f Total of lines 3a through e	0.	37.4330000000000000000000000000000000000		PER MEMBERS OF THE PERSON NAMED IN COLUMN TO THE PERSON NAMED IN C
4 Qualifying distributions for 2019 from				
Part XII, line 4: ►\$ 142,964.				
a Applied to 2018, but not more than line 2a			. 0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.	IN THE SECOND SECOND	
c Treated as distributions out of corpus	,	1 2 2 2 2 2 2 2 2 3 2 3 2 3 2 3 2 3 2 3		
(Election required - see instructions)	0.	P. SAMETAN		
d Applied to 2019 distributable amount	建筑建筑设置在1000000000000000000000000000000000000	2010年2010年2010年2010年2010年2010年2010年2010		11,749.
e Remaining amount distributed out of corpus	131,215.	AND FARENCE STRAIN		
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below.	,			
a Corpus Add lines 31, 4c, and 4e Subtract line 5	131,215.			
b Prior years' undistributed income. Subtract	WARREN BOOK STORY	2		
line 4b from line 2b		0.		
c Enter the amount of prior years'	SPAROTHER STATES	,	TO TAX TO A CONTROL OF THE SECOND	
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable	8957564 3575		TEAL THE NEW PROPERTY	PATERIAL SECTION OF SE
amount - see instructions	THE STATE OF THE S	0.		
e Undistributed income for 2018. Subtract line	SEX COLORS	I 3		
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2019. Subtract	TO THE PROPERTY OF THE PARTY OF		The Astronomy and	
lines 4d and 5 from line 1. This amount must	And the second	19 19 19 19 19 19 19 19 19 19 19 19 19 1	Ban Grand Strategic Strategic	
be distributed in 2020		, , ,		0.
7 Amounts treated as distributions out of			(g) (e) (i) (i) (i) (i) (ii) (ii)	9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
corpus to satisfy requirements imposed by			· ` ` `	
section 170(b)(1)(F) or 4942(g)(3) (Election			,	F
may be required - see instructions)	0.		, ,	
8 Excess distributions carryover from 2014		,	,	
not applied on line 5 or line 7	0.	 	<u> </u>	. " ,
9 Excess distributions carryover to 2020			· ,	′ኤ՝
Subtract lines 7 and 8 from line 6a	131,215.	- /	- · · · · · · · · · · · · · · · · · · ·	ما و المار
0 Analysis of line 9:				1 x = 1 1 1 1
a Excess from 2015				٤
b Excess from 2016				
c Excess from 2017				
d Excess from 2018			,	
e Excess from 2019 131,215.				
123581 12-17-19				Form 990-PF (2019)

	AMILY FOUND			84-199	06035 Page
Part XIV Private Operating Fo	undations (see inst	ructions and Part VII-	A, question 9)	N/A	
1 a If the foundation has received a ruling or		•			
foundation, and the ruling is effective for	2019 enter the date of the	e ruling	▶	, 	
b Check box to indicate whether the founda	tion is a private operating	foundation described in		4942(j)(3) or 494	(<u>i)(5)</u>
2 a Enter the lesser of the adjusted net	Tax year	U > 0040	Prior 3 years	11110010	(.) -
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed					
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		-		ļ	
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	/				
Rart XV. Supplementary Infor at any time during the			the foundation	had \$5,000 or more	e in assets
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who year (but only if they have contributed me			butions received by the	foundation before the close	of any tax
SEE STATEMENT 7					
b List any managers of the foundation who other entity) of which the foundation has			or an equally large portion	on of the ownership of a par	tnership or
NONE					
2 Information Regarding Contribution	n Grant Gift Loan S	Scholarship etc. Pro	norams	· · · · · · · · · · · · · · · · · · ·	
Check here X if the foundation on the foundation makes gifts, grants, etc., t	ly makes contributions to	preselected charitable of	organizations and does r		sts for funds. If
a The name, address, and telephone number	er or email address of the	person to whom applica	ations should be address	Sed.	
b The form in which applications should be	submitted and information	on and materials they sh	ould include	 	
c Any submission deadlines:			<u> </u>	*· · · · · · · · · · · · · · · · · · ·	
d Any restrictions or limitations on awards	such as by geographical	areas, charitable fields, l	kinds of institutions, or (otner factors.	

Part XV Supplementary Informat Grants and Contributions Paid During to		Payment		
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
wante and address (nome or business)	or substantial contributor	recipient		
Paid during the year	,			
INNER-CITY SCHOLARSHIP FUND	NONE	EXEMPT ORG	GENERAL SUPPORT	
1011 FIRST AVENUE, SUITE 1800				
NEW YORK, NY 10022				54,05
		1		
		1		
BOSTON COLLEGE	NONE	EXEMPT ORG	GENERAL SUPPORT	
140 COMMONWEALTH AVENUE				
CHESTNUT HILL, MA 02467		 		25,00
		ŀ		
		ĺ		
ST JOSEPH PARENTING CENTER	NONE	EXEMPT ORG	GENERAL SUPPORT	
90 FAIRFIELD AVENUE		•		10.00
STAMFORD , CT 06902				10,00
		}		
ALVIN AILEY DANCE FOUNDATION	NONE	EXEMPT ORG	GENERAL SUPPORT	
405 WEST 55TH STREET NEW YORK, NY 10019				10,00
TOWN, NI TOOLS				10,00
		L	<u></u>	
PERSON-TO-PERSON 1864 POST ROAD	NONE	EXEMPT ORG	GENERAL SUPPORT	,
DARIEN, CT 06820				25
	CONTINUATION SHEE	T(S)	► 3a	99,55
b Approved for future payment				
NONE				
110112			1	
		1		
		<u> </u>		
		1		
Tatal	L	<u> </u>	▶ 3b	
Tota?			<u> </u>	orm 990-PF (20

Part XVI-A	Analysis of Income-Producing Activit	ies
Title Carre and Start	Analysis of moonie i readoing nounc	

Enter gross amounts unless otherwise indicated	Unrelated	business income		led by section 512 513 or 514	(e)
1 Program service revenue.	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
· ·	0000		1 1		
ab	 		1 1		
			1 1		
c					
de			1		
f					
g Fees and contracts from government agencies	 		+		
2 Membership dues and assessments			\top		
3 Interest on savings and temporary cash			+		
investments			1 1		
4 Dividends and interest from securities			14	3,739.	
5 Net rental income or (loss) from real estate.	7 75 77 33	THE WARRY		The same of the sa	CATTER STATE OF
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal			\top		
property	1 1				
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a			1 1		
b					
С					
d				····	
8					
12 Subtotal. Add columns (b), (d), and (e)	1.2	0	. 141	3,739.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		_	13	3,739.
(See worksheet in line 13 instructions to verify calculation	s)				
Relationship of Activities		nplishment of E	xempt	Purposes	
Line No. Explain below how each activity for which	uncome is reported to	column (a) of Part V/I	- A contrib	utod importantly to the seese	anlichment of
Explain below how each activity for which the foundation's exempt purposes (other:	•	, ,	-4 counting	отео порогания то ше ассоп	ihusuuneur ni
The regulation of worther purposes (office)	by provious grant	55 .51 000.1 porposos;		·	
	· · · · · · · · · · · · · · · · · · ·				<u> </u>

Form 990-PF (2019) 923621 12-17-19

orm 990		R FAMILY FOUNDATION		996035	Pa	age 13
Part X	VII) Information Re Exempt Organ	egarding Transfers to and Transactions an izations	d Relationships With Nonch	naritable		
		rectly engage in any of the following with any other organization	n described in section 501(c)	١٤١	Yes	No
•	(), ()	izations) or in section 527, relating to political organizations?			7,, ;	126
		ation to a noncharitable exempt organization of:		12/1)	انتشنا	X
٠,	Cash			1a(1)	 	X
٠,	Other assets er transactions.			1a(2)	تستقف	
	Sales of assets to a noncharital	hle exempt prognization		1b(1)	لتعشق	X
٠,,		ncharitable exempt organization		1b(2)		X
١,	Rental of facilities, equipment,	, 3		16(3)		X
٠,,	Reimbursement arrangements	of other assets		16(4)	 	X
٠,	Loans or loan guarantees			1b(5)		Х
٠,	•	mbership or fundraising solicitations		1b(6)		X
		iling lists, other assets, or paid employees		10		Х
d If th or s	e answer to any of the above is ervices given by the reporting fo	"Yes," complete the following schedule Column (b) should alw bundation. If the foundation received less than fair market value other assets, or services received.	•		ets,	
a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers transactions	s, and sharing arr	angemer	nts
		N/A				
						
			-			
						
····	 					
					<u> </u>	
	 	 				

	<u> </u>					 	
•				T		 	
2a Is the	foundation directly or indire	ectly affiliated with, or related	to, one or more tax-	exempt organization	ons described		
		ion 501(c)(3)) or in section 5		. •		Vec	X No

If "Yes," complete the following schedule		_
(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

		<u> </u>				
Sign Here	and be	penalties of perjury, I declare that have examined this later it is true correct and comprise Cedaration of pro			has any knowledge	May the IRS discress this return with the preparer shown below? See instr
		Print/Type preparer's name	Preparer's signature	Date	Check if	PTIN
Paid		JING MAO	Joneym	6/17/2020	self- employed	P01345554
Prepa Use C		Firm's name ► ECHELON ADVI	SORS, LLC		Firm's EIN ► 46	5-4409177
		Firm's address ► 63 TAYLOR A	VE.			
		MANASQUAN,	NJ 08736		Phone no. (73	32) 903-7338

Phone no. (732) 903-7338
Form 990-PF (2019)

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
UILDING ONE COMMUNITY	NONE	EXEMPT ORG	GENERAL SUPPORT	
5 SELLECK STREET				
ramford , CT 06902		 		2!
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Total from continuation sheets				2

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545 0047

2019

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

Name of the organization		Employer identification number
I	RATHER FAMILY FOUNDATION	84-1996035
Organization type (check	k one)	
Filers of.	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
•	(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le See instructions
General Rule		
-	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling my one contributor. Complete Parts I and II. See instructions for determining a contributor.	·
Special Rules		
sections 509(a)(any one contribi	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, utor, during the year, total contributions of the greater of (1) \$5 000, or (2) 2% of the amount EZ, line 1 Complete Parts I and II	or 16b, and that received from
year, total contr	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from abutions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educately to children or animals. Complete Parts I, II, and III	-
year, contribution is checked, ente purpose Don t	tion described in section 501(c)(7) (8), or (10) filing Form 990 or 990-EZ that received from one exclusively for religious charitable etc., purposes but no such contributions totaled mer here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it able, etc. contributions totaling \$5,000 or more during the year.	ore than \$1,000 If this box s, charitable, etc
but it must answer "No"	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fon Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fet the filing requirements of Schedule B (Form 990-990-EZ or 990-PF)	

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Page 2 Name of organization Employer identification number 84-1996035 RATHER FAMILY FOUNDATION Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (c) (d) (a) No. Name, address, and ZIP + 4 Total contributions Type of contribution 1 JONATHAN RATHER Person Payroll 241 FAIRVIEW AVENUE 3,100,000. Noncash (Complete Part II for STAMFORD, CT 06902 noncash contributions) (a) (b) (c) (d) Name, address, and ZIP + 4 Total contributions No. Type of contribution Person Payrol! Noncash (Complete Part II for noncash contributions) (a) (c) (d) Name, address, and ZIP + 4 Total contributions Type of contribution No. Person Payrol! Noncash (Complete Part II for noncash contributions) (c) (a) (b) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) Total contributions Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) Νo Name, address, and ZIP + 4 Total contributions Type of contribution Person

Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

RATHER FAMILY FOUNDATION

84-1996035

ATHER FAMI	ILY FOUNDATION		-1996035
art III Nonca	ash Property (see instructions) Use duplicate copies of Pa	rt II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	N. The state of th	s	

923454 11-06-19

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

FORM 990-PF	DIVIDENDS	AND INTERE	ST FROM SECUR	RITIES ST	PATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MORGAN STANLEY	3,739.	0	3,739	3,739.	
TO PART I, LINE 4	3,739.	0	3,739	3,739.	
=				= =====================================	=======================================
FORM 990-PF		LEGAL	FEES	S	PATEMENT 2
=		(A) EXPENSES	FEES (B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D)
FORM 990-PF		(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE

FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES	STATEMENT 3
DESCRIPTION	AMOUNT
2019 DONATION CHECKS CLEARED IN JANUARY 2020	17,900.
TOTAL TO FORM 990-PF, PART III, LINE 3	17,900.
FORM 990-PF OTHER DECREASES IN NET ASSETS OR FUND BALANCES	STATEMENT 4
DESCRIPTION	AMOUNT
2019 DIVIDEND RECEIVED IN JANUARY 2020	3,739.
TOTAL TO FORM 990-PF, PART III, LINE 5	3,739.

FORM 990-PF CORPORATE BONDS		STATEMENT 5	
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
MSIF ULTRA-SHORT INCOME A (MUAIX)	2,800,000.	2,799,994.	
TOTAL TO FORM 990-PF, PART II, LINE 10C	2,800,000.	2,799,994.	

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT 6
NAME OF CONTRIBUTOR	ADDRESS	
MARY RATHER	241 FAIRVIEW AVENUE STAMFORD, CT 06902	
JONATHAN M RATHER	241 FAIRVIEW AVENUE STAMFORD, CT 06902	

		CONTRACTOR OF
FORM 990-PF	PART XV - LINE 1A	STATEMENT 7
	LIST OF FOUNDATION MANAGERS	

NAME OF MANAGER

MARY RATHER JONATHAN RATHER