

Form **990-PF**Department of the Treasury  
Internal Revenue Service**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](http://www.irs.gov/Form990PF) for instructions and the latest information.

**2020****Open to Public  
Inspection****For calendar year 2020, or tax year beginning 01-01-2020 , and ending 12-31-2020**

Name of foundation THE GUSTI BRANDT FOUNDATION		A Employer identification number 13-6185337	
Number and street (or P.O. box number if mail is not delivered to street address) CO CITRIN 50 ROCKEFELLER PLZ		B Telephone number (see instructions) (212) 697-1000	
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10020		C If exemption application is pending, check here ► <input type="checkbox"/>	
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D</b> 1. Foreign organizations, check here ..... ► <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... ► <input type="checkbox"/>	
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ..... ► <input type="checkbox"/> <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ..... ► <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ►\$ <u>1,673,333</u>	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	(Part I, column (d) must be on cash basis.)	

<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check ► <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	1	1		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	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)	155,309	0		
	12 Total. Add lines 1 through 11	155,310	1		
<b>Operating and Administrative Expenses</b>	13 Compensation of officers, directors, trustees, etc.	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	3,650	730		2,920
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	69,435	0		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	896	175		721
	24 Total operating and administrative expenses.				
	Add lines 13 through 23	73,981	905		3,641
	25 Contributions, gifts, grants paid	70,570			70,570
	26 Total expenses and disbursements. Add lines 24 and 25	144,551	905		74,211
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	10,759			
	b Net investment income (if negative, enter -0-)		0		
	c Adjusted net income (if negative, enter -0-)				

	<b>Part II Balance Sheets</b>	Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	<b>1</b> Cash—non-interest-bearing		20,037	29,669	29,669
	<b>2</b> Savings and temporary cash investments		5,177	5,002	5,002
	<b>3</b> Accounts receivable ►				
	Less: allowance for doubtful accounts ►				
	<b>4</b> Pledges receivable ►				
	Less: allowance for doubtful accounts ►				
	<b>5</b> Grants receivable				
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	<b>7</b> Other notes and loans receivable (attach schedule) ►				
	Less: allowance for doubtful accounts ►				
	<b>8</b> Inventories for sale or use				
	<b>9</b> Prepaid expenses and deferred charges				
	<b>10a</b> Investments—U.S. and state government obligations (attach schedule)				
	<b>b</b> Investments—corporate stock (attach schedule)				
	<b>c</b> Investments—corporate bonds (attach schedule)				
	<b>11</b> Investments—land, buildings, and equipment: basis ►				
	Less: accumulated depreciation (attach schedule) ►				
	<b>12</b> Investments—mortgage loans				
	<b>13</b> Investments—other (attach schedule)		2,644,278	2,627,587	1,635,277
	<b>14</b> Land, buildings, and equipment: basis ►				
	Less: accumulated depreciation (attach schedule) ►				
	<b>15</b> Other assets (describe ► _____)		3,385	3,385	3,385
	<b>16</b> <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)		2,672,877	2,665,643	1,673,333
	<b>17</b> Accounts payable and accrued expenses				
	<b>18</b> Grants payable				
	<b>19</b> Deferred revenue				
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons				
	<b>21</b> Mortgages and other notes payable (attach schedule)				
	<b>22</b> Other liabilities (describe ► _____)		0	0	
	<b>23</b> <b>Total liabilities</b> (add lines 17 through 22)				
	<b>Foundations that follow FASB ASC 958, check here ► <input type="checkbox"/></b> <b>and complete lines 24, 25, 29 and 30.</b>				
	<b>24</b> Net assets without donor restrictions				
	<b>25</b> Net assets with donor restrictions				
	<b>Foundations that do not follow FASB ASC 958, check here ► <input checked="" type="checkbox"/></b> <b>and complete lines 26 through 30.</b>				
	<b>26</b> Capital stock, trust principal, or current funds		0	0	
	<b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund		0	0	
	<b>28</b> Retained earnings, accumulated income, endowment, or other funds		2,672,877	2,665,643	
	<b>29</b> <b>Total net assets or fund balances</b> (see instructions)		2,672,877	2,665,643	
	<b>30</b> <b>Total liabilities and net assets/fund balances</b> (see instructions)		2,672,877	2,665,643	

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

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	<b>1</b>	2,672,877
<b>2</b> Enter amount from Part I, line 27a	<b>2</b>	10,759
<b>3</b> Other increases not included in line 2 (itemize) ►	<b>3</b>	0
<b>4</b> Add lines 1, 2, and 3	<b>4</b>	2,683,636
<b>5</b> Decreases not included in line 2 (itemize) ►	<b>5</b>	17,993
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	<b>6</b>	2,665,643

**Part IV Capital Gains and Losses for Tax on Investment Income**

2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8		3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income****SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE****1 Reserved**

(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved

2 Reserved . . . . .	2	
3 Reserved. . . . .	3	
4 Reserved . . . . .	4	
5 Reserved . . . . .	5	
6 Reserved . . . . .	6	
7 Reserved . . . . .	7	
8 Reserved , . . . . .	8	

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1.	1	0
	Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
b	Reserved. . . . .	1	0
c	All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2. . . . .	3	0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	5	0
6	Credits/Payments:		
a	2020 estimated tax payments and 2019 overpayment credited to 2020	6a	12,075
b	Exempt foreign organizations—tax withheld at source	6b	0
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d. . . . .	7	12,075
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	8	0
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . ►	9	
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . ►	10	12,075
11	Enter the amount of line 10 to be: <b>Credited to 2021 estimated tax</b> ► 12,075	11	Refunded ► 0

**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 any political campaign?	<input type="checkbox"/>	Yes	No
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition).	<input type="checkbox"/>	Yes	No
	<i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>			
1c	Did the foundation file <b>Form 1120-POL</b> for this year?	<input type="checkbox"/>	Yes	No
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			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	<input type="checkbox"/>	Yes	No
	<i>If "Yes," attach a detailed description of the activities.</i>			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	<input type="checkbox"/>	Yes	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<input type="checkbox"/>	Yes	No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	<input type="checkbox"/>	Yes	No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<input type="checkbox"/>	Yes	No
	<i>If "Yes," attach the statement required by General Instruction T.</i>			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	• By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?			
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	<input type="checkbox"/>	Yes	No
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	► NY			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>	<input type="checkbox"/>	Yes	No
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2020 or the taxable year beginning in 2020? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	<input type="checkbox"/>	Yes	No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	<input type="checkbox"/>	Yes	No

**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11	No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►N/A	13	Yes
14	The books are in care of ►CITRIN COOPerman	Telephone no. ►(212) 697-1000	
Located at ►50 ROCKEFELLER PLAZA NEW YORK NY			ZIP+4 ►10020
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here. . . . .	► 15	<input type="checkbox"/>
16	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►	16	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required****File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

		Yes	No
1a	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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.). . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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. . . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ►	1b	<input type="checkbox"/>
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2020? . . . . .	1c	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? . . . . . If "Yes," list the years ► 20____, 20____, 20____, 20____	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions.) . . . . .	2b	<input type="checkbox"/>
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2020.) . . . . .	3b	<input type="checkbox"/>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?	4b	No

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

5a	During the year did the foundation pay or incur any amount to:			Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions. Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>	<input type="checkbox"/>	<input type="checkbox"/>		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

**Part VIII** **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

1. List all officers, directors, trustees, foundation managers and their compensation. See instruction

1 List all officers, directors, trustees, foundation managers and their compensation. See Instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ROBERT BRANDT 1 WEST ELM STREET GREENWICH, CT 06830	DIRECTOR & PRESIDENT 0.25	0	0	0
GARY BRANDT 1 WEST ELM STREET GREENWICH, CT 06830	DIRECTOR & VICE PRESIDENT 0.25	0	0	0
JOHN BRANDT 1 WEST ELM STREET GREENWICH, CT 06830	DIRECTOR & TREASURER 0.25	0	0	0

**2. Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

<b>Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)</b>		
<b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".</b>		
<b>(a) Name and address of each person paid more than \$50,000</b> NONE	<b>(b) Type of service</b>	<b>(c) Compensation</b>
<b>Total number of others receiving over \$50,000 for professional services.</b> . . . . . ►	0	
<b>Part IX-A Summary of Direct Charitable Activities</b>		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		<b>Expenses</b>
<b>1</b>		
<b>2</b>		
<b>3</b>		
<b>4</b>		
<b>Part IX-B Summary of Program-Related Investments (see instructions)</b>		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		<b>Amount</b>
<b>1</b>		
<b>2</b>		
All other program-related investments. See instructions.		
<b>3</b>		
<b>Total. Add lines 1 through 3</b> . . . . . ►	0	

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities. . . . .	1a	0
b	Average of monthly cash balances. . . . .	1b	54,998
c	Fair market value of all other assets (see instructions). . . . .	1c	1,635,277
d	<b>Total</b> (add lines 1a, b, and c). . . . .	1d	1,690,275
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	1,690,275
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	25,354
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,664,921
6	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	6	83,246

**Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign**Part XI** organizations check here ►  and do not complete this part.)

1	Minimum investment return from Part X, line 6. . . . .	1	83,246
2a	Tax on investment income for 2020 from Part VI, line 5. . . . .	2a	
b	Income tax for 2020. (This does not include the tax from Part VI.). . . . .	2b	32,405
c	Add lines 2a and 2b. . . . .	2c	32,405
3	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	3	50,841
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5	Add lines 3 and 4. . . . .	5	50,841
6	Deduction from distributable amount (see instructions). . . . .	6	0
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	7	50,841

**Part XII Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	1a	74,211
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	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	74,211
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions. . . . .	5	0
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	6	74,211
<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.			

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
<b>1</b> Distributable amount for 2020 from Part XI, line 7				50,841
<b>2</b> Undistributed income, if any, as of the end of 2020:				
<b>a</b> Enter amount for 2019 only. . . . .			73,993	
<b>b</b> Total for prior years: 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2020:				
<b>a</b> From 2015. . . . .				
<b>b</b> From 2016. . . . .				
<b>c</b> From 2017. . . . .				
<b>d</b> From 2018. . . . .				
<b>e</b> From 2019. . . . .				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	0			
<b>4</b> Qualifying distributions for 2020 from Part XII, line 4: ► \$ 74,211			73,993	
<b>a</b> Applied to 2019, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2020 distributable amount. . . . .				218
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2020. (If an amount appears in column (d), the same amount must be shown in column (a).)		0		0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .		0		
<b>c</b> 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. . . . .			0	
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions . . . . .			0	
<b>e</b> Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . .				0
<b>f</b> Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . .				50,623
<b>7</b> 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) . . . . .	0			
<b>8</b> Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions) . . . . .	0			
<b>9</b> <b>Excess distributions carryover to 2021.</b> Subtract lines 7 and 8 from line 6a . . . . .	0			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2016. . . . .				
<b>b</b> Excess from 2017. . . . .				
<b>c</b> Excess from 2018. . . . .				
<b>d</b> Excess from 2019. . . . .				
<b>e</b> Excess from 2020. . . . .				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

1a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling. ►			
b	Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)			
2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.			
b	85% of line 2a.			
c	Qualifying distributions from Part XII, line 4 for each year listed.			
d	Amounts included in line 2c not used directly for active conduct of exempt activities.			
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.			
3	Complete 3a, b, or c for the alternative test relied upon:			
a	"Assets" alternative test—enter:			
(1)	Value of all assets.			
(2)	Value of assets qualifying under section 4942(j)(3)(B)(i).			
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.			
c	"Support" alternative test—enter:			
(1)	Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).			
(2)	Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).			
(3)	Largest amount of support from an exempt organization.			
(4)	Gross investment income.			

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)****1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)  
See Additional Data Table

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ►  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

**Part XV**

**Supplementary Information (continued)**

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
1	Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
a						
b						
c						
d						
e						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities			14	1	
5	Net rental income or (loss) from real estate:					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income			14	155,309	
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					
b						
c						
d						
e						
12	Subtotal. Add columns (b), (d), and (e).		0		155,310	0
13	Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)			13		155,310

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

## Part XVII

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

	Yes	No
1a(1)		No
1a(2)		No
1b(1)		No
1b(2)		No
1b(3)		No
1b(4)		No
1b(5)		No
1b(6)		No
1c		No

**a** Transfers from the reporting foundation to a noncharitable exempt organization of:

(1) Cash. . .

- (1) Sales of assets to a noncharitable exempt organization. . . . .
- (2) Purchases of assets from a noncharitable exempt organization. . . . .
- (3) Rental of facilities, equipment, or other assets. . . . .
- (4) Reimbursement arrangements. . . . .
- (5) Loans or loan guarantees. . . . .
- (6) Performance of services or membership or fundraising solicitations. . . . .

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

**d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) (other than section 501(c)(3)) or in section 527? . . . . .  Yes  No

**b** If "Yes," complete the following schedule.

<b>(a) Name of organization</b>	<b>(b) Type of organization</b>	<b>(c) Description of relationship</b>

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

\*\*\*\*\*

2021-06-30

\*\*\*\*\*

May the IRS discuss this  
return  
with the preparer shown  
below  
(see instr.)  Yes  No

**Signature of officer or trustee**

Date

Tit|.

**Sign  
Here**

**Paid  
Preparer  
Use Only**

					(see instr.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ► <input type="checkbox"/>	PTIN
	KENNETH BURSTINER		2021-11-01		P00435497
	Firm's name ► CITRIN COOPERMAN & CO LLP				Firm's EIN ► 22-2428965
Firm's address ► 50 ROCKEFELLER PLAZA NEW YORK, NY 10020				Phone no. (212) 697-1000	

**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).**

ROBERT BRANDT

GARY BRANDT

JOHN BRANDT

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
92ND ST Y SPECIAL EVENTS 1395 LEXINGTON AVENUE NEW YORK, NY 10128		PC	GENERAL SUPPORT	250
ACCF - AFRICAN COMMUNITY & CONSERVATION FOUNDATION 109 ROYAL PALM WAY PALM BEACH, FL 33480		PC	GENERAL SUPPORT	500
ADAM J LEWIS ACADEMY 500 STATE STREET BRIDGEPORT, CT 06604		PC	GENERAL SUPPORT	500
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
ALDRICH MUSEUM 258 MAIN STREET RIDGEFIELD, CT 06877		PC	GENERAL SUPPORT	1,700
AMERICAN BALLET THEATRE 890 BROADWAY 3RD FL NEW YORK, NY 10003		PC	GENERAL SUPPORT	240
AMERICAN FDN FOR SUICIDE PREVENTION 120 WALL STREET NEW YORK, NY 10005		PC	GENERAL SUPPORT	500
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
BARRE CENTER FOR BUDDHIST STUDIES 149 LOCKWOOD RD BARRE, MA 01005		PC	GENERAL SUPPORT	500
BIRTHRIGHT ISRAEL FOUNDATION 521 5TH AVENUE NEW YORK, NY 10175		PC	GENERAL SUPPORT	1,000
BOMA PROJECTPO BOX 1865 MANCHESTER CENTER, VT 05255		PC	GENERAL SUPPORT	1,000
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
BREAST CANCER RESEARCH FOUNDATION 60 E 56TH STREET 8TH FLOOR NEW YORK, NY 10022		PC	GENERAL SUPPORT	500
CARLOS OTIS CLINIC 78 FOUNDERS HILL ROAD STRATTON, VT 05360		PC	GENERAL SUPPORT	500
CATO INSTITUTE 1000 MASSACHUSETTS AVE NW WASHINGTON, DC 20001		PC	GENERAL SUPPORT	500
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
CENTER FOR INDEPENDENT DOCUMENTARY 1300 SOLDIERS FEILD ROAD SUITE 5 BOSTON, MA 02135		PC	GENERAL SUPPORT	25
CHILDREN'S HEARING INSTITUTE 363 SEVENTH AVENUE 10TH FLOOR NEW YORK, NY 10001		PC	GENERAL SUPPORT	100
CHILDREN'S RADIO FOUNDATION 169 STONEHILL ROAD BEDFORD, NY 10506		PC	GENERAL SUPPORT	1,000
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
CITYMEALS ON WHEELS 355 LEXINGTON AVENUE NEW YORK, NY 10017		PC	GENERAL SUPPORT	410
COLUMBIA LAW SCHOOL 435 W 116TH STREET NEW YORK, NY 10027		PC	GENERAL SUPPORT	1,000
COMMUNITY MINDFULNESS PROJECT PO BOX 1713 NEW CANAAN, CT 06840		PC	GENERAL SUPPORT	1,000
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
CONGREGATION EMANU-EL OF WESTCHESTER 2125 WESTCHESTER AVENUE EAST RYE, NY 10580		PC	GENERAL SUPPORT	-3,950
ENVIRONMENTAL DEFENSE FUND 257 PARK AVENUE SOUTH NEW YORK, NY 10010		PC	GENERAL SUPPORT	1,000
EQUINE ADVOCATESPO BOX 354 CHATHAM, NY 12037		PC	GENERAL SUPPORT	1,000
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
FEEDING AMERICA 161 NORTH CLARK STREET SUITE 700 CHICAGO, IL 60601		PC	GENERAL SUPPORT	1,000
FISHER HOUSE FOUNDATION 12300 TWINBROOK PARKWAY ROCKVILLE, MD 20852		PC	GENERAL SUPPORT	1,000
FOOTSTEPS114 JOHN ST UNIT 930 NEW YORK, NY 10272		PC	GENERAL SUPPORT	500
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
FRACTURED ATLAS 248 W 35TH STREET NEW YORK, NY 10001		PC	GENERAL SUPPORT	5,500
FRIENDS OF ISRAEL DEFENSE FORCES 8177 GLADES ROAD BOCA RATON, FL 33434		PC	GENERAL SUPPORT	10,000
GARY SINISE FOUNDATION PO BOX 368 WOODLAND HILLS, CA 91365		PC	GENERAL SUPPORT	2,000
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
GERDAS EQUINE RESCUEPO BOX 1352 WEST TOWNSHEND, VT 05359		PC	GENERAL SUPPORT	1,000
GRACE FARMS FOUNDATION 365 LUKES WOOD ROAD NEW CANAAN, CT 06840		PC	GENERAL SUPPORT	1,374
HUMANE SOCIETY OF THE UNITED STATES 1255 23RD STREET NW SUITE 450 WASHINGTON, DC 20037		PC	GENERAL SUPPORT	1,000
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
I HAVE A DREAM FOUNDATION 322 EIGHTH AVENUE SUITE 202 NEW YORK, NY 10001		PC	GENERAL SUPPORT	500
ICE HOCKEY IN HARLEM 127 WEST 127TH STREET SUITE 415 NEW YORK, NY 10027		PC	GENERAL SUPPORT	100
INSIGHT MEDITATION SOCIETY 1230 PLEASANT STREET BARRE, MA 01005		PC	GENERAL SUPPORT	500
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
KAATSBAAN CULTURAL PARK 120 BROADWAY TIVOLI, NY 12583		PC	GENERAL SUPPORT	1,000
LACHAT TOWN FARM 106 GODFREY ROAD WESTON, CT 06883		PC	GENERAL SUPPORT	350
LEUKEMIA & LYMPHOMA SOCIETY 3 INTERNATIONAL DRIVE SUITE 200 RYE BROOK, NY 10573		PC	GENERAL SUPPORT	1,000
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
METROPOLITAN MUSEUM OF ART 1000 FIFTH AVE NEW YORK, NY 10028		PC	GENERAL SUPPORT	210
MOCA WESTPORT PO BOX 5161 WESTPORT, CT 06881		PC	GENERAL SUPPORT	125
MOMA 11 W 53RD STREET NEW YORK, NY 10019		PC	GENERAL SUPPORT	400
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
MUSEUM OF ARTS AND DESIGN 2 COLUMBUS CIRCLE NEW YORK, NY 10019		PC	GENERAL SUPPORT	75
MY SISTER'S PLACE 1 WATER STREET WHITE PLAINS, NY 10601		PC	GENERAL SUPPORT	500
NAVY-MARINE CORPS RELIEF SOCIETY 875 N RANDOLPH STREET SUITE 225 ARLINGTON, VA 22203		PC	GENERAL SUPPORT	1,000
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
NORWALK RIVER VALLEY TRAIL PO BOX 174 GEORGETOWN, CT 06829		PC	GENERAL SUPPORT	200
NYC AUTISM CHARTER SCHOOLS 433 E 100TH STREET NEW YORK, NY 10029		PC	GENERAL SUPPORT	500
PATTON VETERANS PROJECT 349 5TH AVENUE NEW YORK, NY 10016		PC	GENERAL SUPPORT	1,000
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
PHILIPPINE JESUIT FOUNDATION 39 E 83RD ST NEW YORK, NY 10028		PC	GENERAL SUPPORT	250
PINK AIDPO BOX 5157 WESTPORT, CT 06881		PC	GENERAL SUPPORT	175
PLANNED PARENTHOOD OF SOUTHERN NEW ENGLAND 345 WHITNEY AVENUE NEW HAVEN, CT 06511		PC	GENERAL SUPPORT	1,500
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
SCHOOL IN THE SQUARE 120 WADSWORTH AVENUE NEW YORK, NY 10033		PC	GENERAL SUPPORT	690
SEMPER FI & AMERICA'S FUND PO BOX 555193 CAMP PENDLETON, CA 92055		PC	GENERAL SUPPORT	850
SHRINERS HOSPITALS FOR CHILDREN 2900 N ROCKY POINT DRIVE TAMPA, FL 33607		PC	GENERAL SUPPORT	4,000
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
SOLOMON R GUGGENHEIM FOUNDATION 1071 5TH AVENUE NEW YORK, NY 10128		PC	GENERAL SUPPORT	140
ST JUDES RESEARCH HOSPITAL 220 E 42ND STREET NEW YORK, NY 10017		PC	GENERAL SUPPORT	4,000
THE MUSEUM OF MODERN ART 22-25 JACKSON AVENUE LONG ISLAND CITY, NY 11101		PC	GENERAL SUPPORT	140
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
THE RIVER FUND NEW YORK 89-11 LEFFERTS BLVD RICHMOND HILL, NY 11418		PC	GENERAL SUPPORT	250
THE SUMMER CAMP THREE SISTERS PARK CHILOCOTHE, IL 61523		PC	GENERAL SUPPORT	250
THE UNITARIAN CHURCH OF WESTPORT 101 LYONS PLAINS ROAD WESTPORT, CT 06880		PC	GENERAL SUPPORT	500
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
UJA FEDERATION OF NEW YORK 130 E 59TH STREET NEW YORK, NY 10022		PC	GENERAL SUPPORT	1,000
UJA130 E 59TH STREET NEW YORK, NY 10022		PC	GENERAL SUPPORT	9,000
WESTCHESTER REFORM TEMPLE 255 MARMARONECK AVENUE SCARSDALE, NY 10583		PC	GENERAL SUPPORT	4,190
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
WESTON EMS52 NORTHFIELD ROAD WESTON, CT 06883		PC	GENERAL SUPPORT	500
WESTON FIRE DEPARTMENT 234 LYONS PLAIN ROAD WESTON, CT 06883		PC	GENERAL SUPPORT	1,000
WHITNEY MUSEUM OF AMERICAN ART PO BOX 523 NEW YORK, NY 10014		PC	GENERAL SUPPORT	426
<b>Total . . . . .</b>			► 3a	70,570

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
WJCS845 NORTH BROADWAY WHITE PLAINS, NY 10603		PC	GENERAL SUPPORT	1,100
WORLD CENTRAL KITCHEN 1875 CONNECTICUT AVE NW 10TH FLOOR WASHINGTON, DC 20009		PC	GENERAL SUPPORT	500
<b>Total . . . . .</b>			► 3a	70,570

## TY 2020 Accounting Fees Schedule

**Name:** THE GUSTI BRANDT FOUNDATION**EIN:** 13-6185337

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CITRIN COOPerman	3,650	730		2,920

## TY 2020 Investments - Other Schedule

**Name:** THE GUSTI BRANDT FOUNDATION

**EIN:** 13-6185337

### Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
LIMITED PARTNERSHIP INTEREST IN NORTHWOOD PLAZA L.P.	AT COST	2,627,587	1,635,277

## TY 2020 Other Assets Schedule

**Name:** THE GUSTI BRANDT FOUNDATION**EIN:** 13-6185337

## Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
OTHER INVESTMENTS	3,385	3,385	3,385

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<h1>TY 2020 Other Decreases Schedule</h1>		
<b>Name:</b> THE GUSTI BRANDT FOUNDATION		
<b>EIN:</b> 13-6185337		
Description	Amount	
PRIOR PERIOD AND OTHER ADJUSTMENTS	17,993	

## TY 2020 Other Expenses Schedule

**Name:** THE GUSTI BRANDT FOUNDATION**EIN:** 13-6185337**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ANNUAL FEES - UBS	175	175		0
BANK CHARGES	55	0		55
MISCELLANEOUS EXPENSES	250	0		250
NY LAW JOURNAL AD	160	0		160
NYS FILING FEE	250	0		250
POSTAGE	6	0		6

## TY 2020 Other Income Schedule

**Name:** THE GUSTI BRANDT FOUNDATION**EIN:** 13-6185337

## Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
RENTAL INCOME FROM NORTHWOOD PLAZA LTD PARTNERSHIP EIN#56-1820164	152,636	152,636	152,636
INTEREST INCOME FROM NORTHWOOD PLAZA LTD PARTNERSHIP EIN#56-1820164	2,673	2,673	2,673
LESS AMOUNT ATTRIBUTABLE TO UBIT	0	-155,309	0

## TY 2020 Taxes Schedule

**Name:** THE GUSTI BRANDT FOUNDATION**EIN:** 13-6185337

## Taxes Schedule

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	435	0		0
NYS UNRELATED BUSINESS INCOME TAX	20,700	0		0
FEDERAL UNRELATED BUSINESS INCOME TAX	48,300	0		0