Form 990-PF Return Summary

For calendar year 2024, or tax year beginning 07/01/24 , and ending 06/30/25

82-1223618

PCSB COMMUNITY FOUNDATION

Investment Income			
Interest	208,269		
Dividends	32,375		
Gross rents			
Capital gain net income	299,970		
Other income			
Total investment income		540,614	
Expenses			
Officer compensation			
Salaries / employee benefits			
Other expenses	8,083		
Total expenses		8,083	
Net investment income			532,531
Taxes / Credits			
Regular tax	7,402		
Section 511 tax			
Subtitle A tax			
Total tax		7,402	
Payments / Penalties / Application			
Estimated tax payments			
Tax withheld			
Other payments			
Estimated tax penalty	396		
Overpayment applied to next year's tax			
Payments / penalty / application		-396	
Net tax due			7,798
Interest on late payments			
Failure to file penalty			
Failure to pay penalty			
Additions to tax			
Balance due			7,798
Refund			

	Revenue / Expenses per Books	Adjusted Net Income
Total contributions		
Interest	208,269	208,269
Dividends	32,375	32,375
Capital gains / losses	299,970	
Income modifications		
Sale of inventory		
Other income		
Total revenue	540,614	240,644
Total expenses	429,600	73,342
Excess / ANI	111,014	167,302

Next Year's Estimates

1st quarter	2,000
2nd quarter	2,000
3rd quarter	2,000
4th quarter	2,000
Total	8,000

Balance Sheet

	Beginning	Ending	Differences
Assets	5,183,698	5,294,712	
Liabilities			
Net assets	5,183,698	5,294,712	111,014

Miscellaneous Information

Amended return

Return / extended due date 11/17/25

PCSBCOMF

Form **8879-TE**

IRS E-file Signature Authorization for a Tax Exempt Entity

For calendar year 2024, or fiscal year beginning 7/01, 2024, and ending 6/30, 20 25

Do not send to the IRS. Keep for your records.
Go to *www.irs.gov/Form8879TE* for the latest information.

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2024

Name of filer

PCSB COMMUNITY FOUNDATION

EIN or SSN

82-1223618

Name and title of officer or person subject to tax **DOMINICK PETRAMALE**
TREASURER

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a,** or **10a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b,** or **10b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a	**Form 990** check here		**b**	**Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	**1b**
2a	**Form 990-EZ** check here		**b**	**Total revenue,** if any (Form 990-EZ, line 9)	**2b**
3a	**Form 1120-POL** check here		**b**	**Total tax** (Form 1120-POL, line 22)	**3b**
4a	**Form 990-PF** check here	X	**b**	**Tax based on investment income** (Form 990-PF, Part V, line 5)	**4b** 7,402
5a	**Form 8868** check here		**b**	**Balance due** (Form 8868, line 3c)	**5b**
6a	**Form 990-T** check here		**b**	**Total tax** (Form 990-T, Part III, line 4)	**6b**
7a	**Form 4720** check here		**b**	**Total tax** (Form 4720, Part III, line 1)	**7b**
8a	**Form 5227** check here		**b**	**FMV of assets at end of tax year** (Form 5227, Item D)	**8b**
9a	**Form 5330** check here		**b**	**Tax due** (Form 5330, Part II, line 19)	**9b**
10a	**Form 8038-CP** check here		**b**	**Amount of credit payment requested** (Form 8038-CP, Part III, line 22)	**10b**

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that [X] I am an officer of the above entity or [ ] I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

[X] I authorize **WEISS ADVISORY GROUP LLC** to enter my PIN **23618** as my signature

ERO firm name

Enter five numbers, but do not enter all zeros

on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

[ ] As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____ Date **10/20/25**

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. **14051410547**

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2024 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature **RICHARD F. WEISS** Date **10/20/25**

ERO Must Retain This Form — See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

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* for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

For calendar year 2024 or tax year beginning 07/01/24 **, and ending** 06/30/25

Name of foundation

PCSB COMMUNITY FOUNDATION

A Employer identification number

82-1223618

Number and street (or P.O. box number if mail is not delivered to street address) | Room/suite

PO BOX 702

B Telephone number (see instructions)

914-248-4405

City or town, state or province, country, and ZIP or foreign postal code

POUGHQUAG NY 12570

C If exemption application is pending, check here . . . ☐

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here . . . . . ☐
2. Foreign organizations meeting the 85% test, check here and attach computation . ☐

H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here . . . . . ☐

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) $ 5,295,063

J Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) . . . . . (Part I, column (d), must be on cash basis.)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here . . . . . ☐

Part I **Analysis of Revenue and Expenses** (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)
Revenue	1	Contributions, gifts, grants, etc., received (attach schedule)				
	2	Check ☒ if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	208,269	208,269	208,269	
	4	Dividends and interest from securities	32,375	32,375	32,375	
	5a	Gross rents				
	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10	299,970			
	b	Gross sales price for all assets on line 6a 901,728				
	7	Capital gain net income (from Part IV, line 2)		299,970		
	8	Net short-term capital gain			0	
	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)				
	12	**Total.** Add lines 1 through 11	540,614	540,614	240,644	
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc.	0			
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule) See Stmt 1	2,238		2,238	
	b	Accounting fees (attach schedule) Stmt 2	2,500		2,500	
	c	Other professional fees (attach schedule) Stmt 3	33,200		33,200	
	17	Interest				
	18	Taxes (attach schedule) (see instructions) Stmt 4	8,083	8,083		
	19	Depreciation (attach schedule) and depletion Stmt 5				
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses (att. sch.) Stmt 6	35,404		35,404	
	24	**Total operating and administrative expenses.** Add lines 13 through 23	81,425	8,083	73,342	0
	25	Contributions, gifts, grants paid	348,175			348,175
	26	**Total expenses and disbursements.** Add lines 24 and 25	429,600	8,083	73,342	348,175
	27	Subtract line 26 from line 12:				
	a	**Excess of revenue over expenses and disbursements**	111,014			
	b	**Net investment income** (if negative, enter -0-)		532,531		
	c	**Adjusted net income** (if negative, enter -0-)			167,302	

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2024)

DAA

Part II Balance Sheets 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
Assets	1 Cash — non-interest-bearing	39,064	31,075	31,176
	2 Savings and temporary cash investments	4,542,876	5,263,637	5,263,637
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (att. schedule)			
	Less: allowance for doubtful accounts 0			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments — U.S. and state government obligations (attach schedule)			
	b Investments — corporate stock (attach schedule) See Stmt 7	601,758		
	c Investments — corporate bonds (attach schedule)			
	11 Investments — land, buildings, and equipment: basis			
	Less: accumulated depreciation (attach sch.)			
	12 Investments — mortgage loans			
	13 Investments — other (attach schedule)			
	14 Land, buildings, and equipment: basis 2,054			
	Less: accumulated depreciation (attach sch.) Stmt 8 2,054			250
	15 Other assets (describe)			
	16 **Total assets** (to be completed by all filers — see the instructions. Also, see page 1, item I)	5,183,698	5,294,712	5,295,063
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe)			
	23 **Total liabilities** (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	**Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30** ☐			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30 ☒			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds	5,183,698	5,294,712	
	29 **Total net assets or fund balances** (see instructions)	5,183,698	5,294,712	
	30 **Total liabilities and net assets/fund balances** (see instructions)	5,183,698	5,294,712	

Part III Analysis of Changes in Net Assets or Fund Balances

1	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)	1	5,183,698
2	Enter amount from Part I, line 27a	2	111,014
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	5,294,712
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 29	6	5,294,712

Part IV Capital Gains and Losses for Tax on Investment Income

	(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.)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	Proceeds from Sale of Stock	P	04/21/17	12/31/24
b				
c				
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a	901,728		601,758	299,970
b				
c				
d				
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) **or** Losses (from col. (h))
a				299,970
b				
c				
d				
e				

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	299,970
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 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1. Date of ruling or determination letter: **(attach copy of letter if necessary — see instructions)**		1	7,402
b	All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) 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	7,402
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-		5	7,402
6	Credits/Payments:			
a	2024 estimated tax payments and 2023 overpayment credited to 2024	6a		
b	Exempt foreign organizations — tax withheld at source	6b		
c	Tax paid with application for extension of time to file (Form 8868)	6c		
d	Backup withholding erroneously withheld	6d		
7	Total credits and payments. Add lines 6a through 6d		7	
8	Enter any **penalty** for underpayment of estimated tax. Check here ☒ if Form 2220 is attached		8	396
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed**		9	7,798
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid**		10	
11	Enter the amount of line 10 to be: **Credited to 2025 estimated tax** **Refunded**		11	

Part VI-A Statements Regarding Activities

			Yes	No
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?	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.			
c	Did the foundation file **Form 1120-POL** for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: **(1)** On the foundation. $ _____ **(2)** On foundation managers. $ _____			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. $ _____			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		X
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		X
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? If "Yes," attach the statement required by *General Instruction T.*	5		X
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?	6	X	
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 XIV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. None			
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?* If "No," attach explanation	8b	X	
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 2024 or the tax year beginning in 2024? See the instructions for Part XIII. If "Yes," complete Part XIII	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
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		X
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	

Website address pcsbcommunityfoundation.org

14 The books are in care of DOMINICK PETRAMALE Telephone no. 914-248-4405

Located at 2651 STRANG BLVD YORKTOWN HEIGHTS NY ZIP+4 10598

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** — check here ☐

and enter the amount of tax-exempt interest received or accrued during the year 15

			Yes	No
16	At any time during calendar year 2024, 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		X

Part VI-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?	1a(1)		X
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1a(2)		X
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		X
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		X
	(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)?	1a(5)		X
	(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.)	1a(6)		X
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	1b		
c	Organizations relying on a current notice regarding disaster assistance, check here ☐			
d	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 2024? N/A	1d		
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 2024, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2024? If "Yes," list the years 20 , 20 , 20 , 20	2a		X
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 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. 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?	3a		X
b	If "Yes," did it have excess business holdings in 2024 as a result **(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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2024.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
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 2024?	4b		X

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

			Yes	No
5a	During the year, did the foundation pay or incur any amount to:			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	5a(1)		X
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	5a(2)		X
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	5a(3)		X
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	5a(4)		X
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	5a(5)		X
b	If any answer is "Yes" to 5a(1)–(5), did **any** 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 N/A	5b		
c	Organizations relying on a current notice regarding disaster assistance, check here ☐			
d	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? N/A	5d		
	If "Yes," attach the statement required by Regulations section 53.4945-5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	6a		X
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		X
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	7a		X
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A	7b		
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(s) during the year?	8		X

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

1 List all officers, directors, trustees, and 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
See Statement 9				

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

(a) Name and address of each employee paid more than $50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over $50,000 0

Part VII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."

(a) Name and address of each person paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over $50,000 for professional services		

Part VIII-A **Summary of Direct Charitable Activities**

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.	Expenses
1 N/A	
2	
3	
4	

Part VIII-B **Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions. 3	
Total. Add lines 1 through 3	

Part IX 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	878,996
b	Average of monthly cash balances		1b	5,066,292
c	Fair market value of all other assets (see instructions)		1c	0
d	**Total** (add lines 1a, b, and c)		1d	5,945,288
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	5,945,288
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)		4	89,179
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3		5	5,856,109
6	**Minimum investment return.** Enter 5% (0.05) of line 5		6	292,805

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

1	Minimum investment return from Part IX, line 6		1	292,805
2a	Tax on investment income for 2024 from Part V, line 5	2a 7,402		
b	Income tax for 2024. (This does not include the tax from Part V.)	2b		
c	Add lines 2a and 2b		2c	7,402
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	285,403
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4		5	285,403
6	Deduction from distributable amount (see instructions)		6	
7	**Distributable amount** as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1		7	285,403

Part XI 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	348,175
b	Program-related investments — total from Part VIII-B	1b	
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	**Qualifying distributions.** Add lines 1a through 3b. Enter here and on Part XII, line 4	4	348,175

Part XII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2023	(c) 2023	(d) 2024
1	Distributable amount for 2024 from Part X, line 7				285,403
2	Undistributed income, if any, as of the end of 2024:				
a	Enter amount for 2023 only				
b	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2024:				
a	From 2019 20,704				
b	From 2020 7,591				
c	From 2021 73,939				
d	From 2022 52,215				
e	From 2023 45,016				
f	**Total** of lines 3a through e	199,465			
4	Qualifying distributions for 2024 from Part XI, line 4: $ 348,175				
a	Applied to 2023, 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)				
d	Applied to 2024 distributable amount				285,403
e	Remaining amount distributed out of corpus	62,772			
5	Excess distributions carryover applied to 2024 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6	**Enter the net total of each column as indicated below:**				
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	262,237			
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 — see instructions				
e	Undistributed income for 2023. Subtract line 4a from line 2a. Taxable amount — see instructions				
f	Undistributed income for 2024. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2025				0
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 2019 not applied on line 5 or line 7 (see instructions)	20,704			
9	**Excess distributions carryover to 2025.** Subtract lines 7 and 8 from line 6a	241,533			
10	Analysis of line 9:				
a	Excess from 2020 7,591				
b	Excess from 2021 73,939				
c	Excess from 2022 52,215				
d	Excess from 2023 45,016				
e	Excess from 2024 62,772				

Part XIII Private Operating Foundations (see instructions and Part VI-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 2024, enter the date of the ruling .....

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2024	(b) 2023	(c) 2022	(d) 2021	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed					
b 85% (0.85) of line 2a					
c Qualifying distributions from Part XI, 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 IX, 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 XIV 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).)

NONE

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.

NONE

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:

See Statement 10

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

See Statement 11

c Any submission deadlines:

NONE

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

See Statement 12

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
AFRICAN AMERICAN MEN OF WESTCHESTER 445 HAMILTON AVE. WHITE PLAINS NY 10601	NONE	PC	CHARITABLE SUPPORT	1,500
ALZHEIMERS DISEASE & RELATED DISORD 2900 WESTCHESTER AVE PURCHASE NY 10577	NONE	PC	CHARITABLE SUPPORT	5,000
AMERICAN CANCER SOCIETY INC PO BOX 1357 NEW YORK NY 10018	NONE	PC	CHARITABLE SUPPORT	1,000
ARC FOUNDATION OF ROCKLAND INC 210 ROUTE 303 VALLEY COTTAGE NY 10989	NONE	PC	CHARITABLE SUPPORT	1,000
ARTHRITIS FOUNDATION INC 697 3RD AVE NEW YORK NY 10017	NONE	PC	CHARITABLE SUPPORT	500
ARTS ON THE LAKE INC 640 ROUTE 52 KENT NY 10512	NONE	PC	CHARITABLE SUPPORT	1,000
AUSTIN RD ELEMENTARY SCHOOL 390 AUSTIN RD MAHOPAC NY 10541	NONE	PC	CHARITABLE SUPPORT	500
BIG BROTHERS BIG SISTERS OF WEST & 10 MIDLAND AVE PORCHESTER NY 10573	NONE	PC	CHARITABLE SUPPORT	5,000
BLUEPATH SERVICE DOGS INC. 71 EAST MAIN STREET WAPPINGERS NY 12590	NONE	PC	CHARITABLE SUPPORT	3,500
BOYS CLUB OF MOUNT VERNON INC. 350 S. 6TH STREET MOUNT VERNON NY 10550	NONE	PC	CHARITABLE SUPPORT	28,500
Total			**3a**	348,175
b *Approved for future payment* N/A				
Total			**3b**	

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Part XV-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1 Program service revenue:					
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			14	208,269	
4 Dividends and interest from securities			14	32,375	
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					
8 Gain or (loss) from sales of assets other than inventory			18	299,970	
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		540,614	0
13 Total. Add line 12, columns (b), (d), and (e)				**13**	540,614

(See worksheet in line 13 instructions to verify calculations.)

Part XV-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)
N/A	

Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

			Yes	No
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?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of:			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other transactions:			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees	1b(5)		X
	(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X

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.

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

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.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

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.

May the IRS discuss this return with the preparer shown below? See instructions. ☐ Yes ☐ No

Sign Here

Signature of officer or trustee | Date | TREASURER — Title

Paid Preparer Use Only	Preparer's name	Preparer's signature	Date	Check ☐ if self-employed
	RICHARD F. WEISS	RICHARD F. WEISS	10/20/25	

Firm's name WEISS ADVISORY GROUP LLC — PTIN P00364197

Firm's address 704 RT 6, MAHOPAC, NY 10541-4775 — Firm's EIN 42-1573985 — Phone no. 845-621-5900

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
BREWSTER CARES INC 31 PROSPECT STREET BREWSER NY 10509	NONE	PC CHARITABLE	SUPPORT	1,000
BREWSTER FIRE DEPT INC 501 NORTH MAIN STREET BREWSTER NY 10509	NONE	PC CHARITABLE	SUPPORT	1,250
BREWSTER LITTLE LEAGUE INC 12 MAIN STREET BREWSTER NY 10509	NONE	PC CHARITABLE	SUPPORT	500
BREWSTER ROTARY FOUNDATION INC PO BOX 162 BREWSTER NY 10509	NONE	PC CHARITABLE	SUPPORT	500
BUDDY WHITE PROJECT INC 177 W PUTNAM AVE GREENWICH CT 06830	NONE	PC CHARITABLE	SUPPORT	1,000
CANCER SUPPORT SOLUTIONS INC 2900 WESTCHESTER AVE PURCHASE NY 10577	NONE	PC CHARITABLE	SUPPORT	5,000
CAREER SUPPORT SOLUTIONS INC 400 COLUMBUS AVE VALHALLA NY 10595	NONE	PC CHARITABLE	SUPPORT	2,500
CARMEL FIRE DEPT 94 GLENEIDA AVE CARMEL NY 10512	NONE	PC CHARITABLE	SUPPORT	1,150
CARMEL RAMS YOUTH SPORTS INC PO BOX 21 CARMEL NY 10512	NONE	PC CHARITABLE	SUPPORT	500
CENTER FOR SAFETY & CHANGE INC 9 JOHNSON LANE NEW CITY NY 10956	NONE	PC CHARITABLE	SUPPORT	2,000
Total			**3a**	
b *Approved for future payment* N/A				
Total			**3b**	

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
CEPAP PUTNAM INC PO BOX 245 PATTERSON NY 12563	NONE	PC	CHARITABLE SUPPORT	500
CHAMPIONS4CURES INC. 528 NORTH STATE ROAD BRIARCLIFF MANOR NY 10510	NONE	PC	CHARITABLE SUPPORT	2,500
CHAPPAQUA CARES INC 28 KAYSAL COURT ARMONK NY 10504	NONE	PC	CHARITABLE SUPPORT	1,000
CHOICE OF NEW ROCHELLE, INC 200 EAST POST RD WHITE PLAINS NY 10601	NONE	PC	CHARITABLE SUPPORT	5,000
CYSTIC FIBROSIS FOUNDATION 222 BLOOMINGDALE ROAD WHITE PLAINS NY 10605	NONE	PC	CHARITABLE SUPPORT	5,000
EASTCHESTER ROTARY CLUB FOUNDATION 173 FISHER AVE EASTCHESTER NY 10709-2605	NONE	PC	CHARITABLE SUPPORT	1,800
ECHOS OF AFRICA INITIATIVES INC 75 NO. CENTRAL AVE ELMSFORD NY 10523	NONE	PC	CHARITABLE SUPPORT	500
EMERGENCY SHELTER PARTNERSHIP INC PO BOX 477 MT KISCO NY 10549	NONE	PC	CHARITABLE SUPPORT	500
FEEDING WESTCHESTER INC 200 CLEARBROOK ROAD ELMSFORD NY 10709	NONE	PC	CHARITABLE SUPPORT	10,000
FRIENDS OF KAREN INC. 118 TITICUS ROAD NORTH SALEM NY 10560	NONE	PC	CHARITABLE SUPPORT	1,000
Total			**3a**	
b *Approved for future payment* N/A				
Total			**3b**	

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
FRIENDS OF SOMERS PUBLIC LIBRARY IN PO BOX 443 SOMERS NY 10509	NONE	PC CHARITABLE	SUPPORT	500
FULFILLING A DREAM FUND INC. 506 SOUTH NINTH AVENUE MOUNT VERNON NY 10550-431	NONE	PC CHARITABLE	SUPPORT	5,000
G.O.O.D FOR GIRLS INC 7 LEGION DRIVE VALHALLA NY 10595	NONE	PC CHARITABLE	SUPPORT	2,000
GATHER ROUND THE TABLE INC PO BOX 114 PAWLING NY 12564	NONE	PC CHARITABLE	SUPPORT	1,000
GIANNAS HOUSE INC 31 PROSPECT ST BREWSTER NY 10509	NONE	PC CHARITABLE	SUPPORT	1,000
GIRLS INC OF WESTCHESTER COUNTY 901 NORTH BROADWAY WHITE PLAINS NY 10603	NONE	PC CHARITABLE	SUPPORT	1,500
GIRLS ON THE RUN, HUDSON VALLEY INC 815 BLOOMING GROVE NEW WINDSOR NY 12553	NONE	PC CHARITABLE	SUPPORT	1,000
GREATER MENTAL HEALTH OF NY INC 580 WHITE PLAINS RD TARRYTOWN NY 10501	NONE	PC CHARITABLE	SUPPORT	1,000
GUARDIAN REVIVAL INC 110 OLD RT 6 CARMEL NY 10512	NONE	PC CHARITABLE	SUPPORT	1,750
HAPPY LIFE ANIMAL RESCUE 550 RT 22 PAWLING NY 10589	NONE	PC CHARITABLE	SUPPORT	100
Total			**3a**	
b *Approved for future payment* N/A				
Total			**3b**	

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
HOPE FOR YOUTH FOUNDATION INC PO BOX 8 BUCHANAN NY 10511	NONE	PC	CHARITABLE SUPPORT	1,510
HOPES DOOR INC. PO BOX 262 HAWTHORNE NY 10532	NONE	PC	CHARITABLE SUPPORT	1,600
HUDSON VALLEY GATEWAY CHAMBER FOUND 1 SOUTH DIVISION STREET PEEKSKILL NY 10566	NONE	PC	CHARITABLE SUPPORT	1,500
ICON FOUNDATION INC 760 WHITE PLAINS RD SCARSDALE NY 10583	NONE	PC	CHARITABLE SUPPORT	500
INDEPENDENT LIVING INC 5 WASHINGTON TERRACE NEWBURGH NY 12550	NONE	PC	CHARITABLE SUPPORT	500
ITALIAN AMERICAN CLUB OF MAHOPAC PO BOX 931 MAHOPAC NY 10541	NONE	PC	CHARITABLE SUPPORT	500
KIWI CARES INC 825 UNION VALLEY RD CARMEL NY 10512	NONE	PC	CHARITABLE SUPPORT	500
LAKE MAHOPAC ROTARY FOUNDATION PO BOX 157 MAHOPAC NY 10541	NONE	PC	CHARITABLE SUPPORT	1,000
LEGAL SERVICES OF THE HUDSON VALLEY 90 MAPLE AVE WHITE PLAINS NY 10601	NONE	PC	CHARITABLE SUPPORT	7,500
LIFTING UP WESTCHESTER INC 35 ORCHARD STREET WHITE PLAINS NY 10603	NONE	PC	CHARITABLE SUPPORT	2,500
Total 3a				
b *Approved for future payment* N/A				
Total 3b				

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
LIONS CLUB OF MT KISCO PO BOX 187 MT KISCO NY 10549	NONE	PC CHARITABLE	SUPPORT	500
LIONS CLUB OF YORKTOWN CHARITIES IN PO BOX 30 YORKTOWN HEIGHTS NY 10598	NONE	PC CHARITABLE	SUPPORT	1,000
LIVING ARTIST SOCIETY INC 3 WATSON STREET CORTLANDT MANOR NY 10587	NONE	PC CHARITABLE	SUPPORT	500
LOFT THE LESBIAN & GAY COMMUNITY SE 252 BRYANT AVE WHITE PLAINS NY 10605	NONE	PC CHARITABLE	SUPPORT	10,000
MIZZENTOP DAY SCHOOL 64 EAST MAIN STREET PAWLING NY 12564	NONE	PC CHARITABLE	SUPPORT	2,500
MOUNT KISCO CHILD CARE CENTER INC. 95 RADIO CIRCLE DRIVE MOUNT KISCO NY 10549	NONE	PC CHARITABLE	SUPPORT	3,825
MT KISCO INTERFAITH FOOD PANTRY INC PO BOX 834 MT KISCO NY 10549	NONE	PC CHARITABLE	SUPPORT	2,500
MT. TREMPER OUTDOOR MINISTRIES INC 101 DEACON SMITH HILL RD PATTERSON NY 12563	NONE	PC CHARITABLE	SUPPORT	850
MY SISTER'S PLACE INC 3 BARKER AVE WHITE PLAINS NY 10601	NONE	PC CHARITABLE	SUPPORT	2,500
NEW ROCHELLE BASKETBALL ASSOC, INC 261 STUART DRIVE NEW ROCHELLE NY 10804	NONE	PC CHARITABLE	SUPPORT	1,000
Total			**3a**	
b *Approved for future payment* N/A				
Total			**3b**	

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
NEWFLEX YOUTH PROGRAM 250 S 6TH AVE MT VERNON NY 10550	NONE	PC CHARITABLE	SUPPORT	125
NO. WEST. ENERGY ACTION CONSORTIUM 40 GREEN STREET MT KISC NY 10549	NONE	PC CHARITABLE	SUPPORT	1,500
NO. WESTCHESTER HOSP. CTR FUND 400 EAST MAIN STREET MT. KISCO NY 10549	NONE	PC CHARITABLE	SUPPORT	500
NON-PROFIT ASSOCIATION OF WESTCHEST 580 WHITE PLAINS RD TARRYTOWN NY 10591	NONE	PC CHARITABLE	SUPPORT	10,000
NORTH ROCKLAND COMMUNITY FAM DAY CT 1 ROSEMAN ROAD GARNERVILLE NY 10923	NONE	PC CHARITABLE	SUPPORT	1,000
PAWLING COMMUNITY FOUNDATION PO BOX 657 PAWLING NY 12564	NONE	PC CHARITABLE	SUPPORT	3,500
PAWLING CONCERT SERIES INC PO BOX 163 PAWLING NY 12564	NONE	PC CHARITABLE	SUPPORT	1,000
PAWLING FREE LIBRARY 11 BROAD STREET PAWLING NY 12564	NONE	PC CHARITABLE	SUPPORT	1,000
PEEKSKILL ROTARY CLUB FOUNDATION IN PO BOX 344 PEEKSKILL NY 10566	NONE	PC CHARITABLE	SUPPORT	2,000
PEGASUS THERAPEUTIC RIDING INC 310 PEACH LAKE RD BREWSTER NY 10509	NONE	PC CHARITABLE	SUPPORT	300
Total			**3a**	
b *Approved for future payment* **N/A**				
Total			**3b**	

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
PUTNAM CHORALE LTD PO BOX 928 CARMEL NY 10512	NONE	PC	CHARITABLE SUPPORT	450
PUTNAM COUNTY HOSPITAL FUND 672 STONELEIGH AVE CARMEL NY 10512	NONE	PC	CHARITABLE SUPPORT	300
PUTNAM COUNTY LAND TRUST PO BOX 36 BREWSTER NY 10509	NONE	PC	CHARITABLE SUPPORT	750
PUTNAM FAMILY COMMUNITY SERVICES IN 1808 ROUTE 6 CARMEL NY 10512	NONE	PC	CHARITABLE SUPPORT	11,065
PUTNAM HOSPITAL CTR. FOUNDATION PO BOX 22539 NEW YORK NY 10087	NONE	PC	CHARITABLE SUPPORT	5,000
PUTNAM NO. WESTCHESTER WOMENS 935 SO. LAKE BLVD MAHOPAC NY 10541	NONE	PC	CHARITABLE SUPPORT	1,000
PUTNAM SERVICE DOGS, INC PO BOX 573 BREWSTER NY 10509	NONE	PC	CHARITABLE SUPPORT	750
REGIONAL FOOD BANK OF NE NY INC 195 HUDSON STREET CORNWELL-ON-HUDSON NY 125	NONE	PC	CHARITABLE SUPPORT	10,975
ROCKLAND COUNTY YMCA 35 SOUTH BROADWAY NYACK NY 10960	NONE	PC	CHARITABLE SUPPORT	3,375
ROTARY CLUB OF CARMEL NEW YORK CHAR 36 GLENEIDA AVE CARMEL NY 10512	NONE	PC	CHARITABLE SUPPORT	1,000
Total			**3a**	
b *Approved for future payment* N/A				
Total			**3b**	

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
ROTARY CLUB OF PATTERSON INC PO BOX 24 PATTERSON NY 12563	NONE	PC CHARITABLE	SUPPORT	250
SALVATION ARMY & ITS COMPONENTS 16 STERLING AVENUE WHITE PLAINS NY 10606	NONE	PC CHARITABLE	SUPPORT	1,000
SECOND CHANCE FOODS INC PO BOX 93 CARMEL NY 10512	NONE	PC CHARITABLE	SUPPORT	2,500
SHELTERING THE HOMELESS IS OUR RESP 65 LAKE STREET WHITE PLAINS NY 10604	NONE	PC CHARITABLE	SUPPORT	1,000
SOMERS HISTORICAL SOCIETY PO 336 SOMERS NY 10589	NONE	PC CHARITABLE	SUPPORT	250
SOMERS TRACK & FIELD BOOSTER CLUB I PO BOX 665 SOMERS NY 10589	NONE	PC CHARITABLE	SUPPORT	400
SOMERS VOLUNTEER FIRE DEPT INC PO BOX 655 AMAWALK NY 10501	NONE	PC CHARITABLE	SUPPORT	500
SOMERS WOMENS CLUB INC PO BOX 10 SOMERS NY 10589	NONE	PC CHARITABLE	SUPPORT	500
SPECIAL OLYMPICS NEW YORK, INC 7 CORPORATE DRIVE PEEKSKILL NY 10566	NONE	PC CHARITABLE	SUPPORT	1,000
SPECTRUM DESIGNS FOUNDATION INC 366 MAIN STREET PORT WASHINGTON NY 11050	NONE	PC CHARITABLE	SUPPORT	2,500
Total			**3a**	
b *Approved for future payment* N/A				
Total			**3b**	

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
ST CHRISTOPHERS INN, INC. 21 FRANCISCAN WAY GARRISON NY 10524	NONE	PC	CHARITABLE SUPPORT	5,000
SUNRISE DAY CAMPS ASSOCIATION INC. 11 NEIL COURT OCEANSIDE NY 11572	NONE	PC	CHARITABLE SUPPORT	7,000
SUPPORT CONNECTION INC. 40 TRIANGLE CENTER YORKTOWN HEIGHTS NY 10598	NONE	PC	CHARITABLE SUPPORT	2,500
TEATOWN LAKE RESTORATION INC 1600 SPRING VALLEY RD OSSINING NY 10562	NONE	PC	CHARITABLE SUPPORT	500
THE BREWSTER THEATER COMPANY INC PO BOX 918 BREWSTER NY 10509	NONE	PC	CHARITABLE SUPPORT	1,000
THE FULLER CENTER FOR HOUSING INC 421 HUGUENOT STREET NEW ROCHELLE NY 10801	NONE	PC	CHARITABLE SUPPORT	700
THE GREENBURGH PUBLIC LIBRARY INC 300 TARRYTOWN ROAD ELMSFORD NY 10523	NONE	PC	CHARITABLE SUPPORT	1,000
THE MENTAL HEALTH ASSN OF WEST CTY 3 BEDFORD MEWS STREET PLEASANTVILLE NY 10570	NONE	PC	CHARITABLE SUPPORT	1,000
THE MT KISCO INTERFAITH FOOD PANTRY 300 EAST MAIN STREET MT KISCO NY 10549	NONE	PC	CHARITABLE SUPPORT	1,000
THE SOMERS LIONS CLUB PO BOX 95 SOMERS NY 10589	NONE	PC	CHARITABLE SUPPORT	4,000
Total			**3a**	
b *Approved for future payment* N/A				
Total			**3b**	

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
THE WESTCHESTER ARC FDN INC 265 SAW MILL RIVER RD HAWTHORNE NY 10532	NONE	PC CHARITABLE	SUPPORT	500
TOWN OF SOUTHEAST CULTURAL ARTS COA 67 MAIN STREET BREWSTER NY 10509	NONE	PC CHARITABLE	SUPPORT	500
TYLER RUSH MEMORIAL SCHOLARSHIP FUN 12019 COLLINS ROAD LEWES DE 19958	NONE	PC CHARITABLE	SUPPORT	1,000
UJAMMA OF GRACE INC 52 SOUTH 6TH AVE MT. VERNON NY 10550	NONE	PC CHARITABLE	SUPPORT	2,500
UNITED SPEC.SPORTSMAN ALLIANCE INC. PO BOX 838 MAHOPAC NY 10541	NONE	PC CHARITABLE	SUPPORT	5,000
UNITED WAY OF WESTCHESTER & PUTNAM 336 CENTRAL PARK AVE WHITE PLAINS NY 10616	NONE	PC CHARITABLE	SUPPORT	12,200
UNITED WOMEN OF ROCKLAND INC PO BOX 105 STONY POINT NY 10980	NONE	PC CHARITABLE	SUPPORT	500
VISITING NURSE SERVICES OF WESTCHES 1311 MAMARONECK AVE WHITE PLAINS NY 10605	NONE	PC CHARITABLE	SUPPORT	2,500
VOLUNTEER SERVICE BUREAU OF WESTCHE 220 WHITE PLAINS ROAD TARRYTOWN NY 10591	NONE	PC CHARITABLE	SUPPORT	8,000
WARTBURG HOME FOUNDATION INC. ONE WARTBURG PLACE MOUNT VERNON NY 10552	NONE	PC CHARITABLE	SUPPORT	1,000
Total			**3a**	
b *Approved for future payment* N/A				
Total			**3b**	

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
WASHINGTON ROCHAMBEAU NY REV RT INC **1200 BALDWIN RD** **YORKTOWN HEIGHTS NY 10598**	**NONE**	**PC**	**CHARITABLE SUPPORT**	**250**
WE ARE DECTECTIVES INC **391 EAST 149TH STREET** **BRONX NY 10451**	**NONE**	**PC**	**CHARITABLE SUPPORT**	**500**
WESTCHESTER ARTS COUNCIL INC **31 MAMARONECK AVE** **WHITE PLAINS NY 10601**	**NONE**	**PC**	**CHARITABLE SUPPORT**	**1,000**
WESTCHESTER CHILDREN'S ASSOCIATION **470 MAMARONECK AVENUE** **WHITE PLAINS NY 10605**	**NONE**	**PC**	**CHARITABLE SUPPORT**	**6,000**
WESTCHESTER COMMUNITY OPPORTUNITY P **121 MAIN STREET** **BREWSTER NY 10509**	**NONE**	**PC**	**CHARITABLE SUPPORT**	**2,000**
WESTCHESTER MEDICAL CTR FDN INC **100 WOODS ROAD** **VALHALLA NY 10595**	**NONE**	**PC**	**CHARITABLE SUPPORT**	**1,500**
WESTCHESTER STUDENT ADVOCACY COALIT **2 W MAIN STREET** **ELMSFORD NY 10523**	**NONE**	**PC**	**CHARITABLE SUPPORT**	**5,000**
WESTCHESTER YOUTH ALLIANCE INC **210 ORCHARD RIDGE RD** **CHAPPAQUA NY 10514**	**NONE**	**PC**	**CHARITABLE SUPPORT**	**1,000**
WESTHAB, INC **8 BAASHFORD STREET** **YONKERS NY 10701**	**NONE**	**PC**	**CHARITABLE SUPPORT**	**2,500**
WOMEN'S ENTERPRISE DEVELOPMENT CTR **901 N BROADWAY** **WHITE PLAINS NY 10603**	**NONE**	**PC**	**CHARITABLE SUPPORT**	**11,500**
Total			**3a**	
b *Approved for future payment* **N/A**				
Total			**3b**	

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
WOMEN'S SUPPORT SERVICES INC 935 SOUTH LAKE BLVD MAHOPAC NY 10541	NONE	PC	CHARITABLE SUPPORT	1,000
Y-CORP OF MT VERNON INC 227 EAST LINCOLN AVE MT VERNON NY 10521	NONE	PC	CHARITABLE SUPPORT	11,000
YES SHE CAN INC 10 CHURCH STREET WHITE PLAINS NY 10601	NONE	PC	CHARITABLE SUPPORT	500
YMCA OF CENTRAL & NORTHERN WESTCHES 148 HAMILTON AVE N WHITE PLAINS NY 10601	NONE	PC	CHARITABLE SUPPORT	1,500
YMCA OF TARRYTOWN PO BOX 550 TARRYTOWN NY 10591	NONE	PC	CHARITABLE SUPPORT	5,000
YONKERS PARTNERS IN EDUCATION INC. 92 MAIN STREET YONKERS NY 10701-7066	NONE	PC	CHARITABLE SUPPORT	2,500
YORKTOWN GRANGE AGRICULTURAL SOCIET 99 MOSEMAN RD. YORKTOWN HEIGHTS NY 10598	NONE	PC	CHARITABLE SUPPORT	100
YOUTH SHELTER PROGRAM OF WESTCHESTE 22 EAST 8TH STREET MOUNT VERNON NY 10550	NONE	PC	CHARITABLE SUPPORT	20,500
YWCA OF GREENWICH CT. 259 E. PUTNAM AVE GREENWICH CT 06830	NONE	PC	CHARITABLE SUPPORT	600
YWCA OF WHITE PLAINS 515 NORTH STREET WHITE PLAINS NY 10605	NONE	PC	CHARITABLE SUPPORT	3,000
Total			**3a**	
b *Approved for future payment* N/A				
Total			**3b**	

Federal Statements

Statement 1 - Form 990-PF, Part I, Line 16a - Legal Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Indirect Legal Fees	$ 2,238	$	$ 2,238	$
Total	$ 2,238	$ 0	$ 2,238	$ 0

Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Indirect Accounting Fees	$ 2,500	$	$ 2,500	$
Total	$ 2,500	$ 0	$ 2,500	$ 0

Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Other Professional Fees	$ 33,200	$	$ 33,200	$
Total	$ 33,200	$ 0	$ 33,200	$ 0

Statement 4 - Form 990-PF, Part I, Line 18 - Taxes

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
FORM 990F EXCISE TAX	$ 8,083	$ 8,083	$	$
Total	$ 8,083	$ 8,083	$ 0	$ 0

Federal Statements

Statement 5 - Form 990-PF, Part I, Line 19 - Depreciation

Description	Date Acquired	Cost Basis	Prior Year Depreciation	Method	Life	Current Year Depreciation	Net Investment Income	Adjusted Net Income
Computer & Printer	5/01/23	$ 2,054	$ 2,054	200DB	5	$	$	$
Total		$ 2,054	$ 2,054			$ 0	$ 0	$ 0

Statement 6 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
	$	$	$	$
Expenses				
Office Supplies & Other Expen	1,766		1,766	
Advertising & Media	30,359		30,359	
Telephone	1,440		1,440	
Insurance	1,839		1,839	
Total	$ 35,404	$ 0	$ 35,404	$ 0

Statement 7 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
BROOKLINE BANCORP	$ 601,758	$	Cost	$
Total	$ 601,758	$ 0		$ 0

Federal Statements

Statement 8 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment

Description	Beginning Net Book	End Cost / Basis	End Accumulated Depreciation	Net FMV
	$	$ 2,054	$ 2,054	$ 250
Total	$ 0	$ 2,054	$ 2,054	$ 250

Federal Statements

Statement 9 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc.

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
JEFFREY KELLOGG 2651 STRANG BLVD. YORKTOWN HEIGHTS NY 10598	DIRECTOR	0.00	0	0	0
CLIFFORD WEBER 2651 STRANG BLVD YORKTOWN HEIGHTS NY 10598	SECRETARY	0.00	0	0	0
CHRISTOPHER SCLAFANI 2651 STRANG BLVD YORKTOWN HEIGHTS NY 10598	DIRECTOR	0.00	0	0	0
DOMINICK PETRAMALE 2651 STRANG BLVD YORKTOWN HEIGHTS NY 10598	TREASURER	0.00	0	0	0
MICHELLE A. NICHOLAS 2651 STRANG BLVD YORKTOWN HEIGHTS NY 10598	VICE CHAIRPE	0.00	0	0	0
JOSEPH ROBERTO 2651 STRANG BLVD YORKTOWN HEIGHTS NY 10598	CHAIRMAN	0.00	0	0	0
MICHAEL GOLDRICK 2651 STRANG BLVD YORKTOWN HEIGHTS NY 10598	DIRECTOR	0.00	0	0	0

Federal Statements

Form 990-PF, Part XIV, Line 1b - Managers Who Own 10% or More Stock

Name of Manager	Amount
NONE	$
Total	$ 0

Statement 10 - Form 990-PF, Part XIV, Line 2a - Name, Address and Email for Applications

Description

DOMINICK PETRAMALE 914-248-7272
2651 STRANG BLVD YORKTOWN HEIGHTS, NY 10598
Dominick.Petramale@mypcsb.com

Statement 11 - Form 990-PF, Part XIV, Line 2b - Application Format and Required Contents

Description

WRITTEN REQUEST, INCLUDING DETAILS ON REQUESTING PERSONS OR ORGANIZATIONS, AS WELL AS AMOUNT AND USE OF REQUESTED FUNDS. THE FOLLOWING ITEMS MAY BE INCLUDED WITH THE GRANT APPLICATION:
- COMPLETE BUDGET FOR THE PROJECT OR PROGRAM
- CURRENT ANNUAL OPERATING BUDGET
- CURRENT BOARD OF DIRECTORS
- CURRENT AUDITED FINANCIAL REPORT
- IRS 501(C)(3) DETERMINATION LETTER

Form 990-PF, Part XIV, Line 2c - Submission Deadlines

Description

NONE

Federal Statements

Statement 12 - Form 990-PF, Part XIV, Line 2d - Award Restrictions or Limitations

Description
ELIGIBILITY FOR GRANTS: - AWARDS WILL INCLUDE SUPPORT FOR PROGRAM DEVELOPMENT AS WELL AS FOR NEW AND EXPANDED FACILITIES AND EQUIPMENT, - GRANTS OR AWARDS ARE GENERALLY LIMITED TO USE IN THE MARKET AREAS ENCOMPASSED BY THE COMMUNITY, - GRANT RECIPIENTS MUST DEMONSTRATE SECTION 501(C)(3) OR OTHER NON-PROFIT STATUS, A NEED FOR PRIVATE FINANCIAL SUPPORT AND A DIRECT RELEVANCE TO THE FOUNDATION'S AREAS OF GIVING INTEREST, - THE FOUNDATION DOES NOT PROVIDE FINANCIAL SUPPORT FOR POLITICAL ORGANIZATIONS OR CANDIDTATES FOR POLITICAL OFFICE OR ACTIVITIES FOR SECTARIAN PURPOSES, - THE FOUNDATION DOES NOT GENERALLY MAKE CONTRIBUTIONS TO INDIVIDUAL ENDEAVORS OTHER THAN SCHOLARSHIPS, - OFFICERS, DIRECTORS AND EMPLOYEES OF THE FOUNDATION, AND ANY AFFILIATES THEREOF SHALL NOT BE ELIGIBLE TO RECEIVE GRANTS FROM THE FOUNDATION.

PCSBCOMF

Form 990-PF

Form **2220**

Department of the Treasury
Internal Revenue Service

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.
Go to *www.irs.gov/Form2220* for instructions and the latest information.

OMB No. 1545-0123

2024

Name
PCSB COMMUNITY FOUNDATION

Employer identification number
82-1223618

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment

1	Total tax (see instructions)			1	7,402
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a			
b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b			
c	Credit for federal tax paid on fuels (see instructions)	2c			
d	**Total.** Add lines 2a through 2c			2d	
3	Subtract line 2d from line 1. If the result is less than $500, **do not** complete or file this form. The corporation does not owe the penalty			3	7,402
4	Enter the tax shown on the corporation's 2023 income tax return. See instructions. **Caution:** If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5			4	7,624
5	**Required annual payment.** Enter the **smaller** of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3			5	7,402

Part II Reasons for Filing—Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

6 ☐ The corporation is using the adjusted seasonal installment method.
7 ☐ The corporation is using the annualized income installment method.
8 ☐ The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment

		(a)	(b)	(c)	(d)
9 **Installment due dates.** Enter in columns (a) through (d) the 15th day of the 4th (***Form 990-PF filers:*** Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	11/15/24	12/15/24	03/15/25	06/15/25
10 **Required installments.** If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	10	1,851	1,851	1,851	1,849
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	11				
Complete lines 12 through 18 of one column before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column	12				
13 Add lines 11 and 12	13				
14 Add amounts on lines 16 and 17 of the preceding column	14		1,851	3,702	5,553
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	0	0	0	0
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		1,851	3,702	
17 **Underpayment.** If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17	1,851	1,851	1,851	1,849
18 **Overpayment.** If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18				

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17—no penalty is owed.

Part IV Figuring the Penalty

		(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. ***(C corporations with tax years ending June 30 and S corporations:*** Use 3rd month instead of 4th month. ***Form 990-PF and Form 990-T filers:*** Use 5th month instead of 4th month.) See instructions	**19**	See Worksheet			
20 Number of days from due date of installment on line 9 to the date shown on line 19	**20**				
21 Number of days on line 20 after 4/15/2024 and before 7/1/2024	**21**				
22 Underpayment on line 17 x Number of days on line 21 / 366 x 8% (0.08)	**22**	$	$	$	$
23 Number of days on line 20 after 6/30/2024 and before 10/1/2024	**23**				
24 Underpayment on line 17 x Number of days on line 23 / 366 x 8% (0.08)	**24**	$	$	$	$
25 Number of days on line 20 after 9/30/2024 and before 1/1/2025	**25**				
26 Underpayment on line 17 x Number of days on line 25 / 366 x 8% (0.08)	**26**	$	$	$	$
27 Number of days on line 20 after 12/31/2024 and before 4/1/2025	**27**				
28 Underpayment on line 17 x Number of days on line 27 / 365 x 7% (0.07)	**28**	$	$	$	$
29 Number of days on line 20 after 3/31/2025 and before 7/1/2025	**29**				
30 Underpayment on line 17 x Number of days on line 29 / 365 x *%	**30**	$	$	$	$
31 Number of days on line 20 after 6/30/2025 and before 10/1/2025	**31**				
32 Underpayment on line 17 x Number of days on line 31 / 365 x *%	**32**	$	$	$	$
33 Number of days on line 20 after 9/30/2025 and before 1/1/2026	**33**				
34 Underpayment on line 17 x Number of days on line 33 / 365 x *%	**34**	$	$	$	$
35 Number of days on line 20 after 12/31/2025 and before 3/16/2026	**35**				
36 Underpayment on line 17 x Number of days on line 35 / 365 x *%	**36**	$	$	$	$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	**37**	$	$	$	$

38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns **38** $ 396

*Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at ***www.irs.gov.*** You can also call 800-829-4933 to get interest rate information.

PCSBCOMF

Form 2220 Worksheet

Form **2220** | For calendar year 2024, or tax year beginning 07/01/24 , and ending 06/30/25 | **2024**

Name: **PCSB COMMUNITY FOUNDATION**

Employer Identification Number: **82-1223618**

	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Due date of estimated payment	11/15/24	12/15/24	03/15/25	06/15/25
Amount of underpayment	1,851	1,851	1,851	1,849
Prior year overpayment applied				

	1st Payment	2nd Payment	3rd Payment	4th Payment	5th Payment
Date of payment					
Amount of payment					

Qtr	From	To	Underpayment	#Days	Rate	Penalty
1	11/15/24	12/31/24	1,851	46	8.00	19
1	12/31/24	11/17/25	1,851	321	7.00	114
2	12/15/24	12/31/24	1,851	16	8.00	6
2	12/31/24	11/17/25	1,851	321	7.00	114
3	3/15/25	11/17/25	1,851	247	7.00	88
4	6/15/25	11/17/25	1,849	155	7.00	55
	Total Penalty					396

PCSBCOMF

Form **4562**

Department of the Treasury
Internal Revenue Service

Depreciation and Amortization
(Including Information on Listed Property)
Attach to your tax return.
Go to *www.irs.gov/Form4562* for instructions and the latest information.

OMB No. 1545-0172

2024

Attachment Sequence No. **179**

Name(s) shown on return: **PCSB COMMUNITY FOUNDATION**

Identifying number: 82-1223618

Business or activity to which this form relates: **Indirect Depreciation**

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,220,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	3,050,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	1,220,000

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	0
10	Carryover of disallowed deduction from line 13 of your 2023 Form 4562	10	2,054
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	0
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	0
13	Carryover of disallowed deduction to 2025. Add lines 9 and 10, less line 12	13	2,054

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2024	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ☐		

Section B—Assets Placed in Service During 2024 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only–see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
c	7-year property						
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs.		S/L	
h	Residential rental property			27.5 yrs.	MM	S/L	
				27.5 yrs.	MM	S/L	
i	Nonresidential real property			39 yrs.	MM	S/L	
					MM	S/L	

Section C—Assets Placed in Service During 2024 Tax Year Using the Alternative Depreciation System

20a	Class life					S/L	
b	12-year			12 yrs.		S/L	
c	30-year			30 yrs.	MM	S/L	
d	40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

There are no amounts for Page 2

PCSBCOMF PCSB COMMUNITY FOUNDATION
82-1223618
FYE: 6/30/2025

Federal Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Prior MACRS:												
1	Computer & Printer	5/01/23	2,054		X	X	0	5	HY	200DB	2,054	0
			2,054				0				2,054	0
	Grand Totals		2,054				0				2,054	0
	Less: Dispositions and Transfers		0				0				0	0
	Less: Start-up/Org Expense		0				0				0	0
	Net Grand Totals		2,054				0				2,054	0

PCSBCOMF PCSB COMMUNITY FOUNDATION
82-1223618
FYE: 6/30/2025

AMT Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Prior MACRS:												
1	Computer & Printer	5/01/23	2,054		X	X	0	5	HY	200DB	2,054	0
			2,054				0				2,054	0
	Grand Totals		2,054				0				2,054	0
	Less: Dispositions and Transfers		0				0				0	0
	Net Grand Totals		2,054				0				2,054	0

PCSBCOMF PCSB COMMUNITY FOUNDATION
82-1223618
FYE: 6/30/2025

Bonus Depreciation Report

Form 990, Page 1

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
1	Computer & Printer	5/01/23	2,054		2,054	0	0	0
	Grand Total		2,054		0	0	0	0

PCSBCOMF PCSB COMMUNITY FOUNDATION
82-1223618
FYE: 6/30/2025

Depreciation Adjustment Report
All Business Activities

Form	Unit	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences
MACRS Adjustments:						
Page 1	1	1	Computer & Printer	0	0	0
				0	0	0

PCSBCOMF PCSB COMMUNITY FOUNDATION
82-1223618
FYE: 6/30/2025

Future Depreciation Report FYE: 6/30/26

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
Prior MACRS:					
1	Computer & Printer	5/01/23	2,054	0	0
			2,054	0	0
	Grand Totals		2,054	0	0

PCSB COMMUNITY FOUNDATION 82-1223618 Form 990-PF Estimates

Form **990-W**

(Worksheet)

Department of the Treasury
Internal Revenue Service

Estimated Tax on Unrelated Business Taxable Income for Tax-Exempt Organizations

(and on Investment Income for Private Foundations)

▶ **Go to *www.irs.gov/Form990W* for instructions and the latest information.**

▶ **Keep for your records. Do not send to the Internal Revenue Service.**

OMB No. 1545-0047

2024

1	Unrelated business taxable income expected in the tax year		1	
2	**Tax on the amount on line 1.** See instructions for tax computation		2	
3	Alternative minimum tax for trusts. See instructions		3	
4	Total. Add lines 2 and 3		4	
5	Estimated tax credits. See instructions		5	
6	Subtract line 5 from line 4		6	
7	Other taxes. See instructions		7	
8	Total. Add lines 6 and 7		8	
9	Credit for federal tax paid on fuels. See instructions		9	
10a	Subtract line 9 from line 8. **Note:** If less than $500, the organization is not required to make estimated tax payments. Private foundations, see instructions	10a 8,000		
b	Enter the tax shown on the 2023 return. See instructions. **Caution:** If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b		
c	**2024 Estimated Tax.** Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c		10c	8,000

		(a)	(b)	(c)	(d)
11	**Installment due dates.** See instructions	11 11/17/25	12/15/25	03/16/26	06/15/26
12	**Required installments.** Enter 25% of line 10c in columns **(a)** through **(d).** But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization."	12 2,000	2,000	2,000	2,000
13	**2023 Overpayment.** See instructions	13			
14	**Payment due** (Subtract line 13 from line 12)	14 2,000	2,000	2,000	2,000

For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2022)

PCSBCOMF

Form **990-PF**

Underdistribution and Excess Distributions for Part XII

2024

For calendar year 2024, or tax year beginning 07/01/24 , ending 06/30/25

Name

PCSB COMMUNITY FOUNDATION

Employer Identification Number

82-1223618

Undistributed Income Carryovers

Form 990-PF, Part XII

Tax Year	Prior Undistributed Income			Current Year Decreases	Next Year Carryover	
	Nontaxable or Previously Taxed	Taxable in 2024	Total per Year		Nontaxable or Previously Taxed	Taxable in 2025
Years prior						
20 20						
20 21						
20 22						
2023						
2024			285,403	285,403		
Total Carryover to Next Year						0

* Carryover amount includes 4942(a) amounts

Excess Distribution Carryovers

Form 990-PF, Part XII

Preceding Tax Year Excess Distributions	Current Year Decreases	Next Year Carryover
2019 20,704	20,704	
2020 7,591		7,591
2021 73,939		73,939
2022 52,215		52,215
2023 45,016		45,016
Current Year Excess Distribution Generated (2024)		62,772
Total Carryover to Next Year		241,533

PCSBCOMF

Electronic Funds Withdrawal

Form **990-PF**

For calendar year 2024 or tax year beginning 07/01/24 , ending 06/30/25

2024

Name	Employer Identification Number
PCSB COMMUNITY FOUNDATION	82-1223618

Form Payment Record

This record is included with the IRS electronic file for taxpayers who elect to pay their tax balances by electronic funds withdrawal

Routing Transit Number	221970980
Bank Account Number	8005160070
Type of Account	checking
Taxpayer Phone Number	914-248-4405
Requested Payment Date	11/15/25
Amount of Tax Payment	7,798

DO NOT SUBMIT THIS DOCUMENT TO THE IRS

PCSBCOMF

Form **990PF**

Two Year Comparison Report

For calendar year 2024, or tax year beginning 07/01/24 , ending 06/30/25

2023 & 2024

Name

PCSB COMMUNITY FOUNDATION

Taxpayer Identification Number

82-1223618

			2023		2024		Differences	
			Revenue and expenses per books	Net investment income	Revenue and expenses per books	Net investment income	Revenue and expenses per books	Net investment income
Revenue	1. Contributions, gifts, grants, and similar amounts received	1.						
	2. Interest on savings and temporary cash investments	2.	193,500	193,500	208,269	208,269	14,769	14,769
	3. Dividends and interest from securities	3.	53,831	53,831	32,375	32,375	-21,456	-21,456
	4. Gross rents	4.						
	5. Net gain or (loss) from sale of assets	5.	325,458		299,970		-25,488	
	6. Capital gain net income	6.		325,458		299,970		-25,488
	7. Gross profit or (loss)	7.						
	8. Other income	8.						
	9. **Total.** Add lines 1 through 8	9.	572,789	572,789	540,614	540,614	-32,175	-32,175
Expenses & Deductions	10. Compensation of officers, directors, trustees, etc.	10.						
	11. Other employee salaries and wages	11.						
	12. Pension plans, employee benefits	12.						
	13. Professional fees	13.	32,700	1,250	37,938		5,238	-1,250
	14. Interest	14.						
	15. Taxes	15.	23,031	23,031	8,083	8,083	-14,948	-14,948
	16. Depreciation and depletion	16.						
	17. Occupancy	17.						
	18. Other expenses	18.	14,485		35,404		20,919	
	19. Contributions, gifts, grants paid	19.	322,945		348,175		25,230	
	20. **Total expenses and disbursements.** Add lines 10 through 19	20.	393,161	24,281	429,600	8,083	36,439	-16,198
	21. **Net income (if negative investment activity, enter -0-)**	21.	179,628	548,508	111,014	532,531	-68,614	-15,977
Taxes	22. Excise Tax	22.		7,624		7,402		-222
	23. Section 511 Tax	23.						
	24. Subtitle A income tax	24.						
	25. **Total Taxes**	25.		7,624		7,402		-222
Due / Refund	26. Estimates and overpayments credited	26.						
	27. Foreign tax withheld	27.						
	28. Other Payments	28.						
	29. **Total payments and credits**	29.						
	30. **Balance due / (Overpayment)**	30.		7,624		7,402		-222
	31. Overpayment credited to next year	31.						
	32. Penalty	32.		459		396		-63
	33. **Net due / (Refund)**	33.		8,083		7,798		-285
Other	34. Total assets	34.	5,183,698		5,294,712		111,014	
	35. Total liabilities	35.	0		0		0	
	36. **Net assets**	36.	5,183,698		5,294,712		111,014	

PCSBCOMF

Form **990PF**

Tax Return History

Use the 2Yr Report for more recent historical information

2024

Name

PCSB COMMUNITY FOUNDATION

Taxpayer Identification Number

82-1223618

			2020		2021		2022	
			Revenue and expenses per books	Net investment income	Revenue and expenses per books	Net investment income	Revenue and expenses per books	Net investment income
Revenue	1. Contributions, gifts, grants, and similar amounts received	1.						
	2. Interest on savings and temporary cash investments	2.					29,890	29,890
	3. Dividends and interest from securities	3.					109,291	109,291
	4. Gross rents	4.						
	5. Net gain or (loss) from sale of assets	5.					1,744,084	
	6. Capital gain net income	6.						1,744,084
	7. Gross profit or (loss)	7.						
	8. Other income	8.						
	9. **Total.** Add lines 1 through 8	9.	0	0	0	0	1,883,265	1,883,265
Expenses & Deductions	10. Compensation of officers, directors, trustees, etc.	10.						
	11. Other employee salaries and wages	11.						
	12. Pension plans, employee benefits	12.						
	13. Professional fees	13.					10,929	2,793
	14. Interest	14.						
	15. Taxes	15.					4,862	4,862
	16. Depreciation and depletion	16.					2,054	
	17. Occupancy	17.						
	18. Other expenses	18.					2,055	
	19. Contributions, gifts, grants paid	19.			0		354,200	
	20. **Total expenses and disbursements.** Add lines 10 through 19	20.					374,100	7,655
	21. **Net income (if negative investment activity, enter -0-)**	21.	0	0	0	0	1,509,165	1,875,610
Taxes	22. Excise Tax	22.						26,071
	23. Section 511 Tax	23.						
	24. Subtitle A income tax	24.						
	25. **Total Taxes**	25.						26,071
Due / Refund	26. Estimates and overpayments credited	26.						3,040
	27. Foreign tax withheld	27.						
	28. Other Payments	28.						
	29. **Total payments and credits**	29.						3,040
	30. **Balance due / (Overpayment)**	30.		0		0		23,031
	31. Overpayment credited to next year	31.						
	32. Penalty	32.						
	33. **Net due / (Refund)**	33.		0		0		23,031
Other	34. Total assets	34.	0		0		5,004,070	
	35. Total liabilities	35.	0		0		0	
	36. **Net assets**	36.	0		0		5,004,070	

Federal Statements

Form 990-PF, Part XIV, Line 1a - Managers Who Contributed Over 2% or $5,000

Name of Manager	Amount
NONE	$
Total	$ 0

Taxable Interest on Investments

Description	Amount	Unrelated Business	Exclusion Code	Postal Code	US Obs ($ or %)
Interest	$ 208,269		14		
Total	$ 208,269				

Taxable Dividends from Securities

Description	Amount	Unrelated Business	Exclusion Code	Postal Code	US Obs ($ or %)
Dividends	$ 32,375		14		
Total	$ 32,375				