## Form 990-PF Return Summary

For calendar year 2021, or tax year beginning

, and ending

06-1353117

#### CHRISTINE E. MOSER FOUNDATION

| Expenses<br>Officer    | compensation                            |                    |             |                            |                       |
|------------------------|---|--------------------|-------------|----------------------------|-----------------------|
| -                      | compensation                            |                    |             |                            |                       |
|                        | / employee benefits                     |                    |             |                            |                       |
| Other ex               |   |                    | 9,668       |                            |                       |
|                        | al expenses                             |                    | 7 0 0 0     | 9,668                      |                       |
|                        | Net investment income                   |                    | _           | 27000                      | 85,295                |
| Taxes / Cre            |   |                    |             |                            |                       |
| Regular                |   |                    | 1,186       |                            |                       |
| Section                |   | <u> </u>           |             |                            |                       |
| Subtitle               |   |                    |             |                            |                       |
|                        | al tax                                  |                    |             | 1,186                      |                       |
|                        |   |                    | _           | 1,100                      |                       |
|                        | Penalties / Application ed tax payments |                    | 300         |                            |                       |
| Tax with               |   |                    | 300         |                            |                       |
|                        |   |                    |             |                            |                       |
| Other pa               |   |                    | 8           |                            |                       |
|                        | ed tax penalty                          | tov                |             |                            |                       |
|                        | ment applied to next year's             | ·                  |             | 292                        |                       |
|                        | ments / penalty / application           | on                 | -           | 232                        | 894                   |
|                        | Net tax due                             |                    | 22          |                            | 034                   |
|                        | ate payments                            |                    | 22          |                            |                       |
| Failure to file        |   |                    | 26          |                            |                       |
| Failure to pa          |   |                    |             |                            | 48                    |
| Addition               | ns to tax                               |                    |             |                            | 40                    |
| Bala                   | ance due                                |                    |             |                            | 942                   |
| Refu                   | und                                     |                    |             |                            |                       |
| Rever                  | nue / Expenses per Books                | Adjusted Net Incom | ne          |                            |                       |
| Total contributions    |   | •                  |             |                            |                       |
| Interest               | 9                                       | !                  | 9           | Next Year'                 | s Estimates           |
| Dividends              | 15,231                                  | 15,231             | <u> </u>    | 1st quarter                |                       |
| Capital gains / losses | 81,628                                  | 31,454             |             | 2nd quarter                |                       |
| Income modifications   |   |                    | <del></del> | 3rd quarter                |                       |
| Sale of inventory      |   |                    | _           | 4th quarter                | 1,300                 |
| Other income           | 1,558                                   | 1,558              | 3           | Total                      | 1,300                 |
| Total revenue          | 98,426                                  | 48,252             |             | <del></del>                |                       |
| Total expenses         | 50,101                                  |                    |             |                            |                       |
| Excess / ANI           | 48,325                                  |                    | _           | Miscellaneous Inf          | ormation              |
|                        |   |                    | <b>=</b>    | Amended return             |                       |
|                        | Ralance                                 | e Sheet            |             | Return / extended due date | $11/15/2\overline{2}$ |
| Ron                    |   | ding               | Differences | Notality oxionada dae date | ,,                    |
|                        |   | 611,142            | Dinerences  |                            |                       |
|                        |   | <u> </u>           |             |                            |                       |
| Liabilities            | 562 817                                 | 611,142            | /Q 2        | 25                         |                       |
| Net assets             | 562,817                                 | <u> </u>           | 48,3        | <u> </u>                   |                       |

Form **8879-TF** 

#### IRS *e-file* Signature Authorization for a Tax Exempt Entity

| OMB | No. | 1545-0047 |
|-----|-----|-----------|

For calendar year 2021, or fiscal year beginning ..... ....., 2021, and ending ....., 20 .....

2021

Department of the Treasury Internal Revenue Service

▶ Do not send to the IRS. Keep for your records.

▶ Go to www.irs.gov/Form8879TE for the latest information.

EIN or SSN Name of filer CHRISTINE E. MOSER FOUNDATION 06-1353117 Name and title of officer or person subject to tax ROBERT A. SCALISE JR. TRUSTEE 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  $\blacktriangleright$ 3a Form 1120-POL check here b Total tax (Form 1120-POL, line 22) 3b ightharpoons XTax based on investment income (Form 990-PF, Part VI, line 5) 4b 4a Form 990-PF check here 5a Form 8868 check here ...... 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 ......  $\blacktriangleright$ 8a Form 5227 check here ...... b FMV of assets at end of tax year (Form 5227, Item D) ...... 8b 9a Form 5330 check here ...... ightharpoonup10a Form 8038-CP check here .... Amount of credit payment requested (Form 8038-CP, Part III, line 22) ... 10b Declaration and Signature Authorization of Officer or Person Subject to Tax Under penalties of perjury, I declare that |X| I am a person subject to tax with respect to (name I am an officer of the above entity or of entity) , (EIN) and that I have examined a copy of the 2021 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 DIPIRO & SOKOLOWSKI, LL to enter my PIN GUILMARTIN, I authorize \_ as my signature Enter five numbers, but do not enter all zeros on the tax year 2021 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 2021 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. 11/15/22 Signature of officer or person subject to tax **Certification and Authentication** ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 06591407278 Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 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 Must Retain This Form — See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

11/15/22

ERO's signature

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

| FOI            | calend   | aar year 2021 or tax year beginning , a   | and ending              |            |                |                            |                                  |
|----------------|----------|---|-------------------------|------------|----------------|----------------------------|----------------------------------|
| N              | ame of f | foundation  |                         |            | A Empl         | oyer identification num    | nber                             |
| _              |          |   |                         |            |                |                            |                                  |
|                |          | STINE E. MOSER FOUNDATION   |                         |            |                | -1353117                   |                                  |
|                |          | and street (or P.O. box number if mail is not delivered to street add   | *                       | oom/suite  |                | hone number (see instru    | uctions)                         |
|                |          | SCALISE, 35 PEARL ST. SUITE wn, state or province, country, and ZIP or foreign postal code                    | 301                     |            | 860            | 0-229-0369                 |                                  |
|                | •        | BRITAIN CT 06051  |                         |            | C If exe       | emption application is per | nding, check here                |
|                |          |   |                         |            | 1              |                            |                                  |
| G              | Check a  |   | rn of a former public c | harity     | <b>υ 1.</b> Fα | oreign organizations, chec | ck here                          |
|                |          | Final return Amended  |                         |            | 1              | preign organizations meet  | _                                |
|                |          | Address change Name cha   |                         |            | 85             | % test, check here and     | attach computation               |
| Н              | Check 1  | type of organization: $X$ Section 501(c)(3) exempt private  | e foundation            |            |                | ate foundation status wa   |                                  |
|                | Section  | n 4947(a)(1) nonexempt charitable trust Other taxab   | le private foundation   |            | section        | on 507(b)(1)(A), check he  | ere ►                            |
| I F            | air mar  | rket value of all assets at J Accounting method:  | Cash X Acc              | rual       | F If the       | foundation is in a 60-mo   | nth termination                  |
| e              | nd of y  | rear (from Part II, col. (c), Other (specify)   |                         |            | undei          | r section 507(b)(1)(B), ch | eck here  L                      |
| li             | ne 16)   | ▶ \$ 766,550 (Part I, column (d), must  | be on cash basis.)      |            |                |                            |                                  |
| P              | art I    | Analysis of Revenue and Expenses (The total of  | (a) Revenue and         | (b) Net in | veetment       | (c) Adjusted net           | (d) Disbursements for charitable |
|                |          | amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).) | expenses per<br>books   | incor      |                | income                     | purposes                         |
| _              | Τ.       | .,,,  |                         |            |                |                            | (cash basis only)                |
|                | 1        | Contributions, gifts, grants, etc., received (attach schedule)  |                         |            |                |                            |                                  |
|                | 2        | Check ▶ X if the foundation is not required to attach Sch. B  | _                       |            |                |                            |                                  |
|                | 3        | Interest on savings and temporary cash investments  | 9                       |            | 9              |                            |                                  |
|                | 4        | Dividends and interest from securities  | 15,231                  |            | 15,231         |                            |                                  |
|                | 5a       | Gross rents   |                         |            |                |                            |                                  |
| <u>a</u>       | b        | Net rental income or (loss)   |                         |            |                |                            |                                  |
| Revenue        | 6a       | Net gain or (loss) from sale of assets not on line 10 STMT 1  | 81,628                  |            |                |                            |                                  |
| Š              | b        | Gross sales price for all assets on line 6a 574,946   |                         |            |                |                            |                                  |
| ĕ              | 7        | Capital gain net income (from Part IV, line 2)  |                         |            | 79,723         |                            |                                  |
|                | 8        | Net short-term capital gain   |                         |            |                | 0                          |                                  |
|                | 9        | Income modifications  |                         |            |                |                            |                                  |
|                | 10a      | Gross sales less returns and allowances   |                         |            |                |                            |                                  |
|                | b        | Less: Cost of goods sold  |                         |            |                |                            |                                  |
|                | С        | Gross profit or (loss) (attach schedule)  |                         |            |                |                            |                                  |
|                | 11       | Other income (attach schedule) STMT 2   | 1,558                   |            |                |                            |                                  |
|                | 12       | Total. Add lines 1 through 11   | 98,426                  |            | 94,963         | 0                          |                                  |
| S              | 13       | Compensation of officers, directors, trustees, etc  | 0                       |            |                |                            |                                  |
| xpenses        | 14       | Other employee salaries and wages   |                         |            |                |                            |                                  |
| ě              | 15       | Pension plans, employee benefits  |                         |            |                |                            |                                  |
| ×              | 16a      | Legal fees (attach schedule)  |                         |            |                |                            |                                  |
| Ш              | b        | Accounting fees (attach schedule) STMT 3  | 3,485                   |            | 1,743          |                            | 1,742                            |
| .≚             | С        | Other professional fees (attach schedule) STMT 4  | 352                     |            |                |                            | 352                              |
| Administrative | 17       | Interest  |                         |            |                |                            |                                  |
| ij             | 18       | Taxes (attach schedule) (see instructions) STMT 5   | 701                     |            | 132            |                            |                                  |
| Ξ              | 19       | Depreciation (attach schedule) and depletion  |                         |            |                |                            |                                  |
| Þ              | 20       | Occupancy   |                         |            |                |                            |                                  |
|                | 21       | Travel, conferences, and meetings   |                         |            |                |                            |                                  |
| and            | 22       | Printing and publications   |                         |            |                |                            |                                  |
|                | 23       | Other expenses (att. sch.) STMT 6   | 10,913                  |            | 7,793          |                            | 3,120                            |
| ti             | 24       | Total operating and administrative expenses.  |                         |            |                |                            |                                  |
| řa             |          | Add lines 13 through 23   | 15,451                  |            | 9,668          | 0                          | 5,214                            |
| Operating      | 25       | Contributions, gifts, grants paid   | 34,650                  |            |                |                            | 34,650                           |
| _              | 26       | Total expenses and disbursements. Add lines 24 and 25   | 50,101                  |            | 9,668          | 0                          |                                  |
|                | 27       | Subtract line 26 from line 12:  |                         |            |                |                            |                                  |
|                | а        | Excess of revenue over expenses and disbursements   | 48,325                  |            |                |                            |                                  |
|                | b        | Net investment income (if negative, enter -0-)  |                         |            | 85,295         |                            |                                  |
|                | С        | Adjusted net income (if negative, enter -0-)  |                         |            |                | 0                          |                                  |

|                           |            | The second secon |                   |                | r age Z               |
|---------------------------|------------|--|-------------------|----------------|-----------------------|
|                           | Part I     | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)  | Beginning of year | End o          |                       |
| _                         |            |  | (a) Book Value    | (b) Book Value | (c) Fair Market Value |
|                           | 1          | Cash – non-interest-bearing  | 1,398             | 8,213          |                       |
|                           | 2          | Savings and temporary cash investments   | 20,972            | 56,987         | 56,987                |
|                           | 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  |                   |                |                       |
| ţ                         | 8          | Inventories for sale or use  |                   |                |                       |
| Assets                    | 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   | 540,447           | 545,942        | 701,350               |
|                           | С          | 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 ▶  |                   |                |                       |
|                           |            | Less: accumulated depreciation (attach sch.) ▶   |                   |                |                       |
|                           | 15         | Other assets (describe ▶ )   |                   |                |                       |
|                           | 16         | Total assets (to be completed by all filers – see the  | 560 015           | 611 140        | 866 550               |
| -                         |            | instructions. Also, see page 1, item I)  | 562,817           | 611,142        | 766,550               |
|                           | 17         | Accounts payable and accrued expenses  |                   |                |                       |
| s                         | 18         | Grants payable   |                   |                |                       |
| Liabilities               | 19         | Deferred revenue   |                   |                |                       |
| pii                       | 20         | Loans from officers, directors, trustees, and other disqualified persons   |                   |                |                       |
| Ë                         | 21         | Mortgages and other notes payable (attach schedule)  |                   |                |                       |
|                           | 22         | Other liabilities (describe ► )  | 0                 | 0              |                       |
| $\dashv$                  | 23         | Total liabilities (add lines 17 through 22)  Foundations that follow FASB ASC 958, check here  ► X   | U                 | U              |                       |
| s                         |            | Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30.  |                   |                |                       |
| ces                       |            | -  | 562,817           | 611,142        |                       |
| lan                       | 24         | Net assets without donor restrictions  | 362,617           | 011,142        |                       |
| Net Assets or Fund Balanc | 25         | Net assets with donor restrictions  Foundations that do not follow FASB ASC 958, check here  |                   |                |                       |
| Б                         |            | and complete lines 26 through 30.  |                   |                |                       |
| F                         | 200        | Comital stock twist mineral or surrent funds   |                   |                |                       |
| ō                         | 26         | Capital stock, trust principal, or current funds   |                   |                |                       |
| ts                        | 27         | Paid-in or capital surplus, or land, bldg., and equipment fund   |                   |                |                       |
| SSe                       | 28         | Retained earnings, accumulated income, endowment, or other funds   | 562,817           | 611,142        |                       |
| Ä                         | 29         | Total net assets or fund balances (see instructions)  Total liabilities and net assets/fund balances (see  | 362,617           | 011,142        |                       |
| Š                         | 30         | `  | 562,817           | 611,142        |                       |
| _                         | Part I     | II Analysis of Changes in Net Assets or Fund Balances  | JUZ, 01/          | 011,142        |                       |
|                           |            | net assets or fund balances at beginning of year – Part II, column (a), line 29 (mus   | et agree with     |                |                       |
| 1                         |            |  | -                 | 1              | 562,817               |
| •                         | Ento-      | of-year figure reported on prior year's return)  |                   | 2              | 48,325                |
| 2                         | Ctho       | r amount from Part I, line 27a   |                   | 3              | -10,323               |
| J                         | <b>Δ44</b> | r increases not included in line 2 (itemize) ▶   |                   |                | 611,142               |
|                           |            |  |                   |                | V-1/1-12              |
| 9                         | Total      | eases not included in line 2 (itemize)  net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b  |                   | 6              | 611,142               |
|                           | ioldi      | The access of rand balances at one of year fine $\pm$ finites into $0$ – $1$ art ii, column (b)  | /j, iii io 20     |                | V1-12                 |

| Pa       | rt IV          | Capital Gains a                                | nd Losses for Tax o   | n Investment Income                    |  |   |         |                             |   |
|----------|----------------|--|---|--|--|---|---------|-----------------------------|---|
|          |                | (a) List and describe th<br>2-story brick ware | e kind(s) of property sold (for house; or common stock, 200 | example, real estate,<br>shs. MLC Co.) |  | (b) How acquire<br>P – Purchase<br>D – Donation | (0)     | Date acquired o., day, yr.) | (d) Date sold (mo., day, yr.)             |
| 1a       | SEE            | WORKSHEET                                      |   |  |  |   |         |                             |   |
| b        |                |  |   |  |  |   |         |                             |   |
| c        |                |  |   |  |  |   |         |                             |   |
| <u>d</u> |                |  |   |  |  |   |         |                             |   |
| е_       |                |  |   |  |  |   |         |                             |   |
|          | <b>(e)</b> Gro | oss sales price                                | (f) Depreciation allo<br>(or allowable)                     | (0)                                    |  | other basis<br>ase of sale                      |         |                             | n or (loss)<br>f) minus (g))              |
| а        |                |  |   |  |  |   |         |                             |   |
| b        |                |  |   |  |  |   |         |                             |   |
| С        |                |  |   |  |  |   |         |                             |   |
| d        |                |  |   |  |  |   |         |                             |   |
| е        |                |  |   |  |  |   |         |                             |   |
|          | Complete (     | only for assets showin                         | g gain in column (h) and o                                  | vned by the foundation on 1            | 2/31/6                                       | 9.  |         | (I) Gains (Co               | . (h) gain minus                          |
|          | (i) FM∨        | as of 12/31/69                                 | <b>(j)</b> Adjusted bas<br>as of 12/31/69                   |  | (k) Excess of col. (i) over col. (j), if any |   |         | · //                        | less than -0-) <b>or</b><br>rom col. (h)) |
|          |                |  |   |  |  |   |         |                             |   |
| b        |                |  |   |  |  |   |         |                             |   |
| С        |                |  |   |  |  |   |         |                             |   |
| d        |                |  |   |  |  |   |         |                             |   |
| е        |                |  |   |  |  |   |         |                             |   |
| 2 (      | `onital aci    | n net income or (net d                         | If gain   | also enter in Part I, line 7           | ٦  |   |         |                             |   |
| 2 (      | zapılai yal    | in het income or (het t                        | If (loss  | ), enter -0- in Part I, line 7         | ┛  |   | 2       |                             | 79,723                                    |
| 3 1      | let short-t    | erm capital gain or (lo                        | ss) as defined in sections 1                                | 222(5) and (6):                        |  |   |         |                             |   |
| li       | f gain, als    | o enter in Part I, line 8                      | 3, column (c). See instruction                              | ns. If (loss), enter -0- in            | $\neg$                                       |   |         |                             |   |
| F        | Part I, line   |  |   |  | <u> </u>                                     |   | 3       |                             | 31,454                                    |
|          | rt V           |  |   | come (Section 4940(a                   |  | • •   |         | instructio                  | ns)                                       |
| 1a       |                |  | · ·   | d)(2), check here ▶ 🔲 ar               |  |   |         |                             |   |
|          |                |  |   | (attach copy of letter if n            |  |   | ctions) | 1                           | 1,186                                     |
| b        |                |  |   | e 27b. Exempt foreign orga             |  |   |         |                             |   |
|          | enter 4%       | (0.04) of Part I, line                         | 12, col. (b)  |  |  |   |         |                             | •   |
| 2        |                |  | stic section 4947(a)(1) trusts                              | and taxable foundations or             | nly; oth                                     | ners, enter -0-)                                |         |                             | 1 100                                     |
| 3        |                | s 1 and 2                                      |   |  |  |   |         | 3                           | 1,186                                     |
| 4        |                |  |   | and taxable foundations of             |  | ners, enter -0-)                                |         |                             | 1,186                                     |
| 5        |                |  | come. Subtract line 4 from                                  | ine 3. If zero or less, enter -        | υ  |   |         | 5                           | Τ,100                                     |
| 6        |                | 'ayments:                                      | and 2020 aversavment are                                    | ditad to 2001                          | ا ده   | . 1   | 30      |                             |   |
| a        |                |  |   | dited to 2021                          |  |   | 300     | $\dashv$                    |   |
| b        |                |  |   |  |  | +   |         | $\dashv$                    |   |
| c<br>d   |                | withholding erroneous                          |   | n 8868)                                | ا ما   |   |         |                             |   |
| u<br>7   |                | •  |   |  |  |   |         | 7                           | 300                                       |
| 8        | Enter an       | v <b>penalty</b> for underna                   | vment of estimated tax. Ch                                  | eck here X if Form 2220 i              | s attac                                      | <br>:hed  |         |                             | 8   |
| 9        |                |  |   | nter amount owed                       |  |   |         | 9                           | 894                                       |
| 10       |                |  |   | d 8, enter the amount over             | :  |   |         | 10                          |   |
| 11       |                |  | be: Credited to 2022 estir                                  | ·                                      | 120.00                                       |   | nded ►  | 11                          |   |
|          | L1/15          |  | 22  | FTP                                    |  | 26 TOT  |         |                             | Form <b>990-PF</b> (2021)                 |

|    | 1990-PF (2021) CHRISTINE E. MOSEK FOUNDATION 00-1333117  |     | Pi   | age 4 |
|----|--|-----|------|-------|
| Pa | art VI-A Statements Regarding Activities   |     |      |       |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it                   |     | Yes  | No    |
|    | 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.  |     |      |       |
| С  | 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. ▶ \$   |     |      |       |
| е  | 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?                                    | 2   |      | X     |
|    | If "Yes," attach a detailed description of the activities.   |     |      |       |
| 3  | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles                     |     |      |       |
|    | of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes                        | 3   |      | Х     |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year?  | 4a  |      | Х     |
| b  | If "Yes," has it filed a tax return on Form 990-T for this year?   | 4b  |      |       |
| 5  | Was there a liquidation, termination, dissolution, or substantial contraction during the year?                                     | 5   |      | X     |
|    | If "Yes," attach the statement required by General Instruction T.  |     |      |       |
| 6  | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:                                  |     |      |       |
|    | ● 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   | Х    |       |
| 7  | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV | 7   | X    |       |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. ▶  CT                           |     |      |       |
| h  | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General                       |     |      |       |
| b  |  | 8b  | х    |       |
| 9  | (or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation                              | OD  | 21   |       |
| 3  | 4942(j)(5) for calendar year 2021 or the tax year beginning in 2021? See instructions for Part XIII. If "Yes,"                     |     |      |       |
|    |  | 9   |      | x     |
| 10 | complete Part XIII  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  |      | х     |
| 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  |      | х     |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?                | 13  | Х    |       |
|    | Website address ► N/A  |     |      |       |
| 14 | The books are in care of ▶ ROBERT A. SCALISE, JR. Telephone no. ▶ 860-2 35 PEARL ST, SUITE 301                                     | 29- | 0369 | 9     |
|    | Located at ▶ NEW BRITAIN CT ZIP+4 ▶ 06053  | L   |      |       |
| 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  |     |      |       |
| 16 | At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority                    |     | Yes  | No    |
|    | over a bank, securities, or other financial account in a foreign country?  | 16  |      | Х     |
|    | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of                       |     |      |       |

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the foreign country

| _Pa | art 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) |     | Х  |
|     | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?                              |     | 1a(3) |     | Х  |
|     | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?                                    |     | 1a(4) |     | Х  |
|     | (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    |     |    |
| С   | 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 2021?  | 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)):  |     |       |     |    |
| а   | At the end of tax year 2021, did the foundation have any undistributed income (Part XIII, lines                         |     |       |     |    |
|     | 6d and 6e) for tax year(s) beginning before 2021?   |     | 2a    |     | X  |
|     | If "Yes," list the years ▶ 20 , 20 , 20 , 20  |     |       |     |    |
| 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      |     |       |     |    |
|     | all years listed, answer "No" and attach statement – see instructions.)   | N/A | 2b    |     |    |
| С   | 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. |     |       |     |    |
|     | <b>▶</b> 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 2021 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 Form 4720, Schedule C, to determine if the                    |     |       |     |    |
|     | foundation had excess business holdings in 2021.)   | N/A | 3b    |     |    |
| 4a  | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?         |     | 4a    |     | Х  |
| 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 2021?      |     | 4b    |     | х  |

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| Pa    | art VI-B Statements Regarding Activities for Which Form   | 4720 May Be F                         | Required (cont                    | tinued)                                |       |                       | g        |
|-------|---|---------------------------------------|-----------------------------------|--|-------|-----------------------|----------|
| 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))?                           |                                       |                                   |  |       |                       |          |
|       | (2) Influence the outcome of any specific public election (see section 4955); 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                                  |                                       |                                   |  |       |                       |          |
|       | (4)(A)? See instructions  |                                       |                                   |  |       |                       | 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?   |                                       |                                   |  |       |                       |          |
| b     | If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un                                 | der the exceptions of                 | described                         |  |       |                       |          |
|       | in Regulations section 53.4945 or in a current notice regarding disaster assista                                    | nce? See instruction                  | ns                                | N/A                                    | 5b    |                       |          |
| С     | Organizations relying on a current notice regarding disaster assistance, check                                      | nere                                  |                                   | ▶ 🔲                                    |       |                       |          |
| d     | If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr                                    |                                       |                                   |  |       |                       |          |
|       | 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 p                                |                                       |                                   |  |       |                       |          |
|       | benefit contract?   |                                       |                                   |  | 6a    |                       | <u> </u> |
| b     | Did the foundation, during the year, pay premiums, directly or indirectly, on a p                                   | ersonal benefit cont                  | ract?                             |  | 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 s                                   |                                       |                                   |  | 7a    |                       | X        |
| b     | If "Yes," did the foundation receive any proceeds or have any net income attrib                                     |                                       |                                   | N/.A                                   | 7b    |                       |          |
| 8     | Is the foundation subject to the section 4960 tax on payment(s) of more than \$                                     |                                       |                                   |  |       |                       | v        |
|       | excess parachute payment(s) during the year?  |                                       |                                   |  | 8     |                       | X        |
| Pä    | Information About Officers, Directors, Trustees, Fo   | oundation Mana                        | agers, nigniy                     | Paid Employ                            | ees,  |                       |          |
| 1 1   | ist all officers, directors, trustees, and foundation managers and their con  | nensation. See in                     | structions                        |  |       |                       |          |
|       |   |                                       |                                   | (d) Contributions to                   |       |                       |          |
|       | (a) Name and address  | (b) Title, and average hours per week | (c) Compensation<br>(If not paid, | employee benefit<br>plans and deferred |       | pense ad<br>r allowai |          |
|       |   | devoted to position                   | enter -0-)                        | compensation                           | 00    |                       |          |
|       | BERT A. SCALISE JR. NEW BRITAIN   | TRUSTEE                               |                                   |  |       |                       |          |
|       | PEARL STREET, SUITE 301 CT 06051  | 1.00                                  | 0                                 | 0                                      |       |                       | 0        |
| MA    | RY ENGELS NEW BRITAIN   | TRUSTEE                               |                                   |  |       |                       |          |
|       | PEARL STREET, SUITE 301 CT 06051  | 1.00                                  | 0                                 | 0                                      |       |                       | 0        |
|       | CHELE VAN EPPS NEW BRITAIN  |                                       |                                   |  |       |                       |          |
| 35    | PEARL STREET, SUITE 301 CT 06051  | 1.00                                  | 0                                 | 0                                      |       |                       | 0        |
|       |   |                                       |                                   |  |       |                       |          |
| _     | Commencestion of the bimboot maid amplement (other than these included  |                                       | <u> </u><br>                      |  |       |                       |          |
| 2     | Compensation of five highest-paid employees (other than those included "NONE."                                      | on line i – see ins                   | tructions). If non                | e, enter                               |       |                       |          |
|       | <del>-</del>  | (L) Title                             |                                   | (d) Contributions to                   |       |                       |          |
|       | (a) Name and address of each employee paid more than \$50,000   | (b) Title, and average hours per week | (c) Compensation                  | employee benefit                       |       | pense ad              |          |
|       |   | devoted to position                   |                                   | plans and deferred<br>compensation     | otne  | r allowai             | ices     |
| NC.   | NE  |                                       |                                   |  |       |                       |          |
|       |   |                                       |                                   |  |       |                       |          |
|       |   |                                       |                                   |  |       |                       |          |
|       |   |                                       |                                   |  |       |                       |          |
|       |   |                                       |                                   |  |       |                       |          |
|       |   |                                       |                                   |  |       |                       |          |
|       |   |                                       |                                   |  |       |                       |          |
|       |   |                                       |                                   |  |       |                       |          |
|       |   |                                       |                                   |  |       |                       |          |
|       |   |                                       |                                   |  |       |                       |          |
| Total | number of other employees paid over \$50,000  |                                       |                                   | •                                      | 1     |                       | 0        |

| Part VII Information About Officers, Directors, Trustees, Foundation Management   | 353117<br>gers, Highly Paid Em        | ployees,         |
|---|---------------------------------------|------------------|
| and Contractors (continued)   |                                       |                  |
| 3 Five highest-paid independent contractors for professional services. See instructio   | · · · · · · · · · · · · · · · · · · · |                  |
| (a) Name and address of each person paid more than \$50,000  NONE   | (b) Type of service                   | (c) Compensation |
|   |                                       |                  |
|   |                                       |                  |
|   |                                       |                  |
|   |                                       |                  |
|   |                                       |                  |
|   |                                       |                  |
|   |                                       |                  |
| Otal number of others receiving over \$50,000 for professional services  Part VIII-A Summary of Direct Charitable Activities    | <u></u>                               | <b>&gt;</b>      |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information s | such as the number of                 |                  |
| organizations and other beneficiaries served, conferences convened, research papers produced, etc.                              |                                       | Expenses         |
| 1 SEE STATEMENT 8   |                                       |                  |
|   |                                       |                  |
| 2   |                                       |                  |
|   |                                       |                  |
|   |                                       |                  |
|   |                                       |                  |
| 3   |                                       |                  |
| 3   |                                       |                  |
| 4   |                                       |                  |
| 4   |                                       |                  |
| Part VIII-B Summary of Program-Related Investments (see instructions)   |                                       |                  |

2

Total. Add lines 1 through 3

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All other program-related investments. See instructions.

| Pa | Art IX Minimum Investment Return (All domestic foundations must complete this part. Foreign       | n foun | idations, |
|----|---|--------|-----------|
|    | see instructions.)  |        |           |
| 1  | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., |        |           |
|    | purposes:   |        |           |
| а  | Average monthly fair market value of securities   | 1a     | 693,169   |
| b  | Average of monthly cash balances  | 1b     | 38,980    |
| С  | Fair market value of all other assets (see instructions)  | 1c     | 0         |
| d  | Total (add lines 1a, b, and c)  | 1d     | 732,149   |
| е  | 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      | 732,149   |
| 4  | Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see |        |           |
|    | instructions)   | 4      | 10,982    |
| 5  | Net value of noncharitable-use assets. Subtract line 4 from line 3                                | 5      | 721,167   |
| 6  | Minimum investment return. Enter 5% (0.05) of line 5  | 6      | 36,058    |
| Pa | art X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating    | founda | ations    |
|    | and certain foreign organizations, check here ▶ and do not complete this part.)                   |        |           |
| 1  | Minimum investment return from Part IX, line 6  | 1      | 36,058    |
| 2a | Tax on investment income for 2021 from Part V, line 5 2a 1,186                                    |        |           |
| b  | Income tax for 2021. (This does not include the tax from Part V.)                                 |        |           |
| С  | Add lines 2a and 2b   | 2c     | 1,186     |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1                             | 3      | 34,872    |
| 4  | Recoveries of amounts treated as qualifying distributions   | 4      |           |
| 5  | Add lines 3 and 4   | 5      | 34,872    |
| 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      | 34,872    |
| Pa | art XI Qualifying Distributions (see instructions)  |        |           |
| 1  | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:        |        |           |
| а  | Expenses, contributions, gifts, etc total from Part I, column (d), line 26                        | 1a     | 39,864    |
| 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:                              |        |           |
| а  | 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      | 39,864    |

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| Pa | art XII Undistributed Income (see instructions)      |                      |                            |                    |                    |
|----|--|----------------------|----------------------------|--------------------|--------------------|
|    |  | <b>(a)</b><br>Corpus | (b)<br>Years prior to 2020 | <b>(c)</b><br>2020 | <b>(d)</b><br>2021 |
| 1  | Distributable amount for 2021 from Part X, line 7    |                      |                            |                    | 34,872             |
| 2  | Undistributed income, if any, as of the end of 2021: |                      |                            |                    |                    |
| а  | Enter amount for 2020 only                           |                      |                            | 7,835              |                    |
|    | Total for prior years: 20 , 20 , 20                  |                      |                            |                    |                    |
| 3  | Excess distributions carryover, if any, to 2021:     |                      |                            |                    |                    |
| а  | From 2016  |                      |                            |                    |                    |
| b  | From 2017  |                      |                            |                    |                    |
| С  |  |                      |                            |                    |                    |
| d  | From 2019  |                      |                            |                    |                    |
| е  | From 2020  |                      |                            |                    |                    |
| f  |  |                      |                            |                    |                    |
| 4  | Qualifying distributions for 2021 from Part XI,      |                      |                            |                    |                    |
|    | line 4: ▶ \$39,864                                   |                      |                            |                    |                    |
| а  | Applied to 2020, but not more than line 2a           |                      |                            | 7,835              |                    |
| b  | Applied to undistributed income of prior years       |                      |                            |                    |                    |
|    | (Election required – see instructions)               |                      |                            |                    |                    |
| С  | Treated as distributions out of corpus (Election     |                      |                            |                    |                    |
|    | required – see instructions)                         |                      |                            |                    |                    |
| d  | Applied to 2021 distributable amount                 |                      |                            |                    | 32,029             |
| е  | Remaining amount distributed out of corpus           |                      |                            |                    |                    |
| 5  | Excess distributions carryover applied to 2021       |                      |                            |                    |                    |
|    | (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:                                     |                      |                            |                    |                    |
| а  | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5    |                      |                            |                    |                    |
| b  | Prior years' undistributed income. Subtract          |                      |                            |                    |                    |
|    | line 4b from line 2b                                 |                      |                            |                    |                    |
| С  | 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                            |                      |                            |                    |                    |
| е  | Undistributed income for 2020. Subtract line         |                      |                            |                    |                    |
|    | 4a from line 2a. Taxable amount – see                |                      |                            |                    |                    |
|    | instructions   |                      |                            |                    |                    |
| f  | Undistributed income for 2021. Subtract lines        |                      |                            |                    |                    |
|    | 4d and 5 from line 1. This amount must be            |                      |                            |                    |                    |
|    | distributed in 2022                                  |                      |                            |                    | 2,843              |
| 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 2016 not         |                      |                            |                    |                    |
| _  | applied on line 5 or line 7 (see instructions)       |                      |                            |                    |                    |
| 9  | Excess distributions carryover to 2022.              |                      |                            |                    |                    |
|    | Subtract lines 7 and 8 from line 6a                  |                      |                            |                    |                    |
| 10 | Analysis of line 9:                                  |                      |                            |                    |                    |
| а  | Excess from 2017                                     |                      |                            |                    |                    |
| b  | Excess from 2018                                     |                      |                            |                    |                    |
| С. | Excess from 2019                                     |                      |                            |                    |                    |
| d  | Excess from 2020                                     |                      |                            |                    |                    |
| е  | Excess from 2021                                     |                      |                            |                    |                    |

| Pa | Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9)             |  |                           |                            |                       |              |  |  |  |
|----|--|--|---------------------------|----------------------------|-----------------------|--------------|--|--|--|
| 1a | a If the foundation has received a ruling or determination letter that it is a private operating |  |                           |                            |                       |              |  |  |  |
|    | foundation, and the ruling is effective for 2021, enter the date of the ruling                   |  |                           |                            |                       |              |  |  |  |
| b  |  | foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5) |                           |                            |                       |              |  |  |  |
| 2a | Enter the lesser of the adjusted net   | Tax year   |                           | Prior 3 years              |                       | (e) Total    |  |  |  |
|    | income from Part I or the minimum  | (a) 2021   | <b>(b)</b> 2020           | (c) 2019                   | (d) 2018              | (c) Total    |  |  |  |
|    | investment return from Part IX for   |  |                           |                            |                       |              |  |  |  |
|    | each year listed   |  |                           |                            |                       |              |  |  |  |
| b  | 85% (0.85) of line 2a  |  |                           |                            |                       |              |  |  |  |
| С  | 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  |  |                           |                            |                       |              |  |  |  |
| е  | 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:  |  |                           |                            |                       |              |  |  |  |
| а  | "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  |  |                           |                            |                       |              |  |  |  |
| С  | "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  |  |                           |                            |                       |              |  |  |  |
| Pa | rt XIV Supplementary Inforn  | nation (Complete   | this part only if         | the foundation ha          | d \$5,000 or more     | in assets at |  |  |  |
|    | any time during the y  | ear – see instruc  | tions.)                   |                            |                       |              |  |  |  |
| 1  | Information Regarding Foundation Ma  | anagers:   |                           |                            |                       |              |  |  |  |
| а  | List any managers of the foundation who  | have contributed mor   | e than 2% of the total    | contributions received     | by the foundation     |              |  |  |  |
|    | before the close of any tax year (but only   | y if they have contribut   | ed more than \$5,000).    | (See section 507(d)(2)     | ).)                   |              |  |  |  |
|    | SEE STATEMENT 9  |  |                           |                            |                       |              |  |  |  |
| b  | List any managers of the foundation  |  |                           | . ,                        | equally large portion | of the       |  |  |  |
|    | ownership of a partnership or other entity   | <ul><li>of which the foundat</li></ul>   | ion has a 10% or grea     | iter interest.             |                       |              |  |  |  |
|    | N/A  | O'M   O-1  | - danskin oda Brasin      |                            |                       |              |  |  |  |
| 2  | Information Regarding Contribution, C  |  |                           |                            | lana not accent       |              |  |  |  |
|    | _  |  |                           | ble organizations and o    |                       |              |  |  |  |
|    | unsolicited requests for funds. If the four complete items 2a, b, c, and d. See inst             |  | ants, etc., to individual | s or organizations und     | er other conditions,  |              |  |  |  |
|    | The name, address, and telephone number  |  | f the person to whom      | applications should be     | addrassad:            |              |  |  |  |
| а  | SEE STATEMENT 10   | DEL OF EIHAII AUGIESS O  | in the hersour to milour  | applications should be     | audiesseu.            |              |  |  |  |
|    | SEE STITEMENT TO   |  |                           |                            |                       |              |  |  |  |
|    | The form in which applications should be   | e submitted and inform   | nation and materials the  | ev should include:         |                       |              |  |  |  |
| -  | SEE STATEMENT 11   |  | and majoridio tri         | .,                         |                       |              |  |  |  |
| С  | Any submission deadlines:  |  |                           |                            |                       |              |  |  |  |
|    | ONGOING  |  |                           |                            |                       |              |  |  |  |
| d  | Any restrictions or limitations on awards,   | such as by geographi   | ical areas, charitable fi | elds, kinds of institution | ns, or other          |              |  |  |  |
|    | factors:   |  |                           |                            |                       |              |  |  |  |
|    | ROCKY HILL, CT AREA  | AND OTHER  | SELECTED OF               | RGANIZATIONS               | •                     |              |  |  |  |

Supplementary Information (continued) Part XIV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year GOODSPEED OPERA HOUSE FOUND 501C3 PO BOX A NONE EAST HADDAM CT 06423 KIDS NIGHTS 6,000 LITERACY VOLUNTEERS 20 HIGH STREET 501C3 NONE NEW BRITAIN CT 06051 COMMUNITY 5,000 NEW BRITAIN MUSEUM OF AMERICAN 56 LEXINGTON STREET NONE 501(C)3 NEW BRITAIN CT 06052 **PROGRAMS** 7,500 ROCKY HILL HISTORICAL SOCIETY INC PO BOX 185 NONE 501C3 ROCKY HILL CT 06067 PROGRAMS & EXHIBITS 6,650 VISTA LIFE INNOVATIONS 501C3 1356 OLD CLINTON ROAD NONE WESTBROOK CT 06498 **OPERATIONS** 1,000 PRUDENCE CRANDALL CENTER, INC. 594 BURRITT STREET NONE 501C3 NEW BRITAIN CT 06050 **PROGRAMS** 1,000 NEW BRITAIN HIGH SCHOOL 110 MILL STREET 501(C)3 NONE NEW BRITAIN CT 06051 UNIFORMS 2,500 FRIENDS OF CORA J. BELDEN LIBRARY 33 CHURCH STREET 501(C)3 NONE ROCKY HILL CT 06067 SIGNAGE PROJECT 1,500 AMATO'S TOY AND HOBBY 395 MAIN STREET NONE MIDDLETOWN CT 06457 TOY DRIVE 1,000 WESTBROOK LIBRARY 61 GOODSPEED DRIVE NONE 501(C)3 WESTBROOK CT 06498 DIGITAL COLLECTION 2,500 34,650 ▶ 3a Total **b** Approved for future payment N/A ▶ 3b

**Total** 

Form 990-PF (2021) CHRISTINE E. MOSER FOUNDATION Analysis of Income-Producing Activities Enter gross amounts unless otherwise indicated. Unrelated business income Excluded by section 512, 513, or 514 Related or exempt (a) Exclusion function income Business code Amount Amount code (See instructions.) 1 Program service revenue: g Fees and contracts from government agencies 2 Membership dues and assessments ...... 3 Interest on savings and temporary cash investments 14 Dividends and interest from securities ..... 14 15,231 Net rental income or (loss) from real estate: Debt-financed property Not debt-financed property b 6 Net rental income or (loss) from personal property ..... 14 Other investment income Gain or (loss) from sales of assets other than inventory 14 81,628 9 Net income or (loss) from special events ..... 10 Gross profit or (loss) from sales of inventory ..... 11 Other revenue: a **b MISCELLANEOUS** 1,558 0 96,868 1,558 12 Subtotal. Add columns (b), (d), and (e) 98,426 13 Total. Add line 12, columns (b), (d), and (e) (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        |               | Information Rega                                 |                 |                           |                     |                      | tionships Wi                | th Noncharitable             | Exe              |              | ge 13    |
|-------------|---------------|--|-----------------|---------------------------|---------------------|----------------------|-----------------------------|------------------------------|------------------|--------------|----------|
|             |               | Organizations                                    |                 |                           |                     | and NG               |                             |                              |                  | pt           |          |
| <b>1</b> Di |               | anization directly or ind                        | irectly engag   | ge in any of the fo       | llowing with any    | other organizati     | on described                |                              |                  | Yes          | No       |
| in          | section 50    | 01(c) (other than section                        | on 501(c)(3)    | organizations) or i       | in section 527, re  | elating to political | al                          |                              |                  |              |          |
|             | ganization    |  |                 |                           |                     |                      |                             |                              |                  |              |          |
| <b>a</b> Tr | ansfers fro   | om the reporting found                           |                 |                           | -                   |                      |                             |                              |                  |              |          |
| •           | <b>)</b> Cash |  |                 |                           |                     |                      |                             |                              | a(1)             |              | <u>X</u> |
|             |               | ssets  |                 |                           |                     |                      |                             |                              | a(2)             |              | X        |
|             | ther trans    |  |                 |                           |                     |                      |                             |                              |                  |              | 37       |
| (1          | ) Sales of    | assets to a noncharit                            | able exempt     | t organization            |                     |                      |                             |                              | b(1)             |              | X        |
| (2          | ) Purchas     | es of assets from a n                            | oncharitable    | exempt organizati         | on                  |                      |                             |                              | b(2)             |              | X        |
| (3)         | ) Reindi (    | of facilities, equipment,                        | or other as:    | 5615                      |                     |                      |                             |                              | b(3)<br>b(4)     |              | X        |
|             |               | rsement arrangements<br>r loan guarantees        |                 |                           |                     |                      |                             |                              | b(5)             |              | X        |
|             |               | ance of services or m                            |                 | or fundraising solic      |                     |                      |                             |                              | b(6)             |              | X        |
|             |               | acilities, equipment, m                          |                 | =                         |                     |                      |                             |                              | 1c               |              | Х        |
|             | •             | r to any of the above                            | •               | •                         |                     |                      |                             |                              |                  |              |          |
| va          | lue of the    | goods, other assets, o                           | or services g   | given by the reporti      | ing foundation. If  | the foundation       | received less than          | fair market                  |                  |              |          |
| va          | lue in any    | transaction or sharing                           | arrangeme       | nt, show in columr        | n (d) the value of  | the goods, oth       | er assets, or servi         | ces received.                |                  |              |          |
| (a) L       | ine no.       | (b) Amount involved                              | (c) Nam         | ne of noncharitable exem  | npt organization    | (d) De               | scription of transfers, tra | ansactions, and sharing arra | ngemen           | its          |          |
| N/A         |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               | ation directly or indirect section 501(c) (other | ,               |                           |                     | k-exempt organi      | zations                     | [                            | Ye               | s X          | No       |
| <b>b</b> If | "Yes," con    | nplete the following so                          | hedule.         |                           |                     | ı                    |                             |                              |                  |              |          |
|             |               | a) Name of organization                          |                 | (b) Type of               | organization        |                      | (c) Descrip                 | tion of relationship         |                  |              |          |
| N/          | <u>A</u>      |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             |               |  |                 |                           |                     |                      |                             |                              |                  |              |          |
|             | Under per     | nalties of perjury, I declare th                 | at I have exami | ned this return, includin | g accompanying sche | Ledules and statemer | nts, and to the best of i   | my knowledge and belief, it  | is true,         |              |          |
|             |               | nd complete. Declaration of p                    |                 |                           |                     |                      |                             | May the IRS discus           |                  | turn         |          |
| Sign        |               |  |                 |                           |                     |                      |                             | with the preparer sh         | no <u>wn</u> bel | low? _       | _        |
| Here        |               |  |                 |                           |                     |                      |                             | See instructions.            | X)               | res          | No       |
|             |               |  |                 |                           | 1                   |                      | TRUS                        | TEE                          |                  |              |          |
|             | Signa         | ature of officer or trustee                      |                 |                           | Date                |                      | Title                       |                              |                  |              |          |
|             | Print/Typ     | pe preparer's name                               |                 |                           | Preparer's signatu  | re                   |                             | Date                         |                  | Check        |          |
| D-!-!       |               |  |                 |                           |                     |                      |                             |                              | - 1              | self-emp     | _        |
| Paid        | CHRIS         | STOPHER B. CO                                    | NLEY            |                           |                     |                      |                             | 11/15/                       | /22              |              |          |
| Prepare     | I Firm's n    |  | IARTIN,         |                           | & SOKOLO            | WSKI, LI             | LC                          | PTIN P00                     |                  |              |          |
| Use On      | Firm's a      | address ► 505 N                                  | MAIN S          | ľ                         |                     |                      |                             | Firm's EIN ▶ 06-0            | 971              | <u> 1998</u> | 3        |

MIDDLETOWN, CT 06457-2809

860-347-5689

Phone no.

| 2034              |  |   |                         |  |  |   |
|-------------------|--|---|-------------------------|--|--|---|
| Form <b>990-P</b> | F  | Capital Gains and Losso   | es for Tax on I         |  | come   | 2021  |
| L<br>Name         | For calend                               | dar year 2021, or tax year beginning  |                         | , and ending                           | Employer Ide   | ntification Number                                      |
| CHRISTIN          | E E. MOSI                                | ER FOUNDATION   |                         |  | 06-1353  | 117   |
|                   | (a) List and describ<br>2-story brick wa | e the kind(s) of property sold, e.g., real estate, rehouse; 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.)                           |
| (1) ALCOA         | CORPORAT                                 | ION   |                         | P                                      | 06/23/21   | 07/22/21  |
| <del>_</del>      | APITAL CO                                |   |                         | P                                      | 06/23/21   | 07/07/21  |
|                   |  | ORPORATION  |                         | P                                      | 07/16/21   | 09/28/21  |
| (4) BLACKRO       |  |   |                         | P                                      | 12/09/20   | 07/16/21  |
|                   |  | BLE MUNI BOND   |                         | P                                      | 03/25/20   | 03/19/21  |
| 550150            | OCK CORE                                 | BOND TRUST  |                         | P                                      | 11/18/20   | 03/19/21  |
| 7) BROADCO        |  | TOT DING THE  |                         | P                                      | 03/05/21   | 05/24/21  |
|                   | <u>USTRIES I</u><br>ISNEY COI            |   |                         | P<br>P                                 | 11/24/20 12/09/20                                      | 07/16/21 06/23/21                                       |
|                   | CAPITAL                                  |   |                         | P                                      | 07/29/20   | 01/08/21  |
|                   | NERGY COL                                |   |                         | P                                      | 07/29/20   | 09/28/21  |
|                   | NEVADA (                                 |   |                         | P                                      | 07/16/21   | 09/28/21  |
|                   | RT-MCMORA                                |   |                         | P                                      | 08/21/20   | 07/16/21  |
|                   | L ELECTRI                                |   |                         | P                                      | 11/18/20   | 07/16/21  |
| (15) ISHARES      |  |   |                         | P                                      | 04/06/21   | 09/28/21  |
| 15) IDIIIICE      | 5 11(0                                   |   |                         |  | 01/00/21   | 03/20/21  |
| (e) Gross sal     | les price                                | (f) Depreciation allowed (or allowable)   | (g) Cost or o           | ther basis<br>e of sale                | (h) Gain<br>(e) plus (f)                               |   |
| [1)               | 7,780                                    |   |                         | 7,386                                  |  | 394   |
| (2)               | 9,325                                    |   |                         | 7,290                                  |  | 2,035   |
| 3)                | 6,319                                    |   |                         | 7,225                                  |  | -906  |
| 4)                | 7,861                                    |   |                         | 6,329                                  |  | 1,532   |
|                   | 32,141                                   |   |                         | 30,628                                 |  | 1,513   |
|                   | 5,299                                    |   |                         | 68,110                                 |  | -2,811  |
| 7)                | 7,392                                    |   |                         | 7,183                                  |  | 209   |
| 8)                | 8,339                                    |   |                         | 6,795                                  |  | 1,544   |
| 9)                | 7,886                                    |   |                         | 7,009                                  |  | 877   |
| 10)               | 5,963                                    |   |                         | 6,424                                  |  | -461  |
| 11)               | 6,850                                    |   |                         | 7,279                                  |  | -429  |
| 12)               | 6,270                                    |   |                         | 7,231                                  |  | -961  |
| (13) <b>1</b>     | 6,238                                    |   |                         | 6,659                                  |  | 9,579   |
|                   | _7 <b>,</b> 976                          |   |                         | 13,153                                 |  | 4,823   |
| (15) <b>1</b>     | .4,564                                   |   |                         | 14,844                                 |  | -280  |
| Complete only     | for accets chawin                        | g gain in column (h) and owned by the   | he foundation on 12/21/ | 60                                     |  |   |
| (i) F.M.V. as of  |  | (j) Adjusted basis<br>as of 12/31/69  | (k) Excess over col.    | of col. (i)                            | (I) Gains (Co<br>col. (k), but not les<br>Losses (from | I. (h) gain minus<br>s than -0-) <b>Or</b><br>col. (h)) |
| 1)                |  |   |                         |  |  | 394   |
| 2)                |  |   |                         |  |  | 2,035   |
| 3)                |  |   |                         |  |  | -906  |
| (4)               |  |   |                         |  |  | 1,532   |
| 5)                |  |   |                         |  |  | 1,513   |
| 6)                |  |   |                         |  |  | -2,811  |
| 7)                |  |   |                         |  |  | 209   |
| 8)                |  |   |                         |  |  | 1,544   |
| 9)                |  |   |                         |  |  | 877   |
| 10)               |  |   |                         |  |  | -461  |
| 11)               |  |   |                         |  |  | -429  |
| 12)               |  |   |                         |  |  | -961  |
| 13)               |  |   |                         |  |  | 9,579   |
| 14)               |  |   |                         |  |  | 4,823   |
| (15)              |  |   |                         |  |  | -280  |

| Γ                       |   | Capital Gains and Losses  | s for Tay on l              | woetmont In                                  | como  |  |  |  |
|-------------------------|---|---|-----------------------------|--|---|--|--|--|
| Form <b>990-PF</b>      |   | •   | S IOI TAX OII II            |  |   | 2021   |  |  |
| Name                    | For calend                              | ar year 2021, or tax year beginning   |                             | , and ending                                 | Employer Idea   | ntification Number                                     |  |  |
|                         |   | D FOIRDIETON  |                             |  |   |  |  |  |
|                         |   | R FOUNDATION  |                             | (1-)   | 06-1353   |  |  |  |
| (a)                     | List and describe<br>2-story brick ware | e the kind(s) of property sold, e.g., real estate,<br>ehouse; or common stock, 200 shs. MLC Co. |                             | (b) How acquired<br>P-Purchase<br>D-Donation | ( <b>c</b> ) Date acquired (mo., day, yr.)              | (d) Date sold (mo., day, yr.)                          |  |  |
| · /                     |   | I STH KOR EFT   |                             | P  | 04/06/21  | 07/16/21   |  |  |
| \_/                     |   | SCI EMG MKT EFT   |                             | P  | 11/17/20  | 04/06/21   |  |  |
| (3) <b>KYNDRYL</b> H    |   | P   | 07/21/21                    | 11/09/21                                     |   |  |  |  |
| \                       | ECHNOL                                  |   |                             | P  | 12/09/20  | 06/09/21   |  |  |
| (5) MICRON TE           |   |   |                             | P  | 01/08/21  | 06/09/21   |  |  |
| \                       |   | NANCE CORP  |                             | P  | 11/17/20  | 07/16/21   |  |  |
|                         | CORPORA                                 |   |                             | P  | 11/17/20  | 09/21/21   |  |  |
| (8) NEXTERA E           |   | INC   |                             | P  | 07/07/21  | 10/13/21   |  |  |
| 9) NUCOR COR            |   |   |                             | P  | 12/09/20  | 07/22/21   |  |  |
| (10) REGENERON          |   | MACEUTICALS   |                             | P  | 03/20/20  | 03/19/21   |  |  |
| (11) SHERWIN-W          |   |   |                             | P  | 07/29/20  | 03/19/21   |  |  |
| (12) TAKE-TWO           | INTERA                                  |   |                             | P  | 05/12/20  | 03/19/21   |  |  |
|                         | TRUMEN                                  | TS INC  |                             | P  | 12/09/20  | 05/24/21   |  |  |
| (14) US BANCOR          |   | IDDUTAR THA   |                             | P  | 03/19/21  | 07/07/21   |  |  |
| (15) UNITED PA          | RCEL S                                  | SERVICE INC   |                             | P  | 11/18/20  | 01/08/21   |  |  |
| (e) Gross sales pric    | e                                       | (f) Depreciation allowed (or allowable)   | (g) Cost or ot plus expense | her basis                                    | (h) Gain  | or (loss)  |  |  |
| (1) 14,!                | 506                                     | (er allewasie)  | <u> </u>                    | 14,820                                       | (6) pide (i)  | -224   |  |  |
|                         |   |   |                             | 33,440                                       |   | 3,790  |  |  |
|                         | 8                                       |   |                             | 12   |   | -4   |  |  |
| (3)                     |   |   |                             | 6,909  |   | 1,102  |  |  |
|                         | 011<br>232                              |   |                             | 7,146  |   | 86   |  |  |
|                         | 041                                     |   |                             | 6,803  |   | 1,238  |  |  |
| 10 1                    |   |   |                             | 14,787                                       | -2,066  |  |  |  |
|                         | 504                                     |   |                             | 7,972  | 532   |  |  |  |
| (9) <b>11,</b> !        |   |   |                             | 6,959  |   | 4,604  |  |  |
|                         | 753                                     |   |                             | 4,735  |   | 18   |  |  |
|                         | 379                                     |   |                             | 5,828  |   | 551  |  |  |
|                         | 328                                     |   |                             | 5,751  |   | 1,577  |  |  |
|                         | 943                                     |   |                             | 6,918  |   | 1,025  |  |  |
|                         | 338                                     |   |                             | 7,271  |   | 67   |  |  |
|                         | 179                                     |   |                             | 6,650  |   | -471   |  |  |
|                         |   |   |                             |  |   |  |  |  |
| Complete only for as    | sets showing                            | g gain in column (h) and owned by the   | foundation on 12/31/6       |  |   |  |  |  |
| (i) F.M.V. as of 12/31/ | /69                                     | (j) Adjusted basis as of 12/31/69   | (k) Excess over col. (      |  | (I) Gains (Col<br>col. (k), but not les<br>Losses (from | . (h) gain minus<br>s than -0-) <b>Or</b><br>col. (h)) |  |  |
| (1)                     |   |   |                             |  |   | -224   |  |  |
| 2)                      |   |   |                             |  |   | 3,790  |  |  |
| (3)                     |   |   |                             |  |   | -4   |  |  |
| (4)                     |   |   |                             |  |   | 1,102  |  |  |
| 5)                      |   |   |                             |  |   | 86   |  |  |
| (6)                     |   |   |                             |  |   | 1,238  |  |  |
| 7)                      |   |   |                             |  |   | -2,066   |  |  |
| (8)                     |   |   |                             |  |   | 532  |  |  |
| 9)                      |   |   |                             |  |   | 4,604  |  |  |
| (10)                    |   |   |                             |  |   | 18   |  |  |
| 11)                     |   |   |                             |  |   | 551  |  |  |
| (12)                    |   |   |                             |  |   | 1,577  |  |  |
| (13)                    |   |   |                             |  |   | 1,025  |  |  |
| (14)                    |   |   |                             |  |   | 67   |  |  |
| ( • • )                 |   |   |                             |  |   | -471   |  |  |

(15)

| Form <b>990-PF</b>     |  | Capital Gains and Losses   | s for Tax on In              |  | come   | 2021                                      |
|------------------------|--|--|------------------------------|--|--|---|
| ame                    | For calend                             | lar year 2021, or tax year beginning   |                              | , and ending                                 | Employer Idea  | ntification Number                        |
| ame                    |  |  |                              |  | Employer idei  | Timeation Trumber                         |
| CHRISTINE I            | E. MOSE                                | ER FOUNDATION  |                              |  | 06-1353  | 117                                       |
| (a)                    | List and describe<br>2-story brick war | e the kind(s) of property sold, e.g., real estate, ehouse; or common stock, 200 shs. MLC Co. |                              | (b) How acquired<br>P-Purchase<br>D-Donation | (c) Date acquired (mo., day, yr.)                      | (d) Date sold (mo., day, yr.)             |
| ZOOM VIDI              | EO COMI                                | MUNICATIONS INC  |                              | P  | 03/20/20   | 03/19/21                                  |
| ADOBE INC              |  |  |                              | P  | 04/29/19   | 01/08/21                                  |
| ADVANCED               |  | DEVICES INC  |                              | <u> </u>                                     | 06/03/20   | 06/09/23                                  |
| BOEING CO              |  | TNG  |                              | P P  | 06/03/20   | 07/22/21                                  |
| META PLAT              | NC                                     | INC  |                              | P<br>P                                       | 04/25/19 07/16/19                                      | 10/13/21<br>03/05/21                      |
| HUMANA II IRON MOUN    |  | INC  |                              | P  | 07/03/19   | 01/08/21                                  |
|                        |  | ISCI EMG MKT   |                              | P  | 07/03/19   | 04/06/21                                  |
|                        | AXABLE                                 |  |                              | P  | 07/03/19   | 03/19/21                                  |
| 0) QUALCOMM            |  |  |                              | P  | 12/05/19   | 07/22/21                                  |
|                        | ENTALS                                 |  |                              | P  | 06/03/20   | 07/16/21                                  |
|                        | HARMACI                                | EUTICAL  |                              | P  | 09/18/17   | 03/05/21                                  |
| 3) VISA INC            |  |  |                              | P  | 09/18/17   | 03/19/21                                  |
| 4)                     |  |  |                              |  |  |   |
| 5)                     |  |  |                              |  |  |   |
| (e) Gross sales prid   | се                                     | (f) Depreciation allowed (or allowable)  | (g) Cost or oth plus expense |  | (h) Gain<br>(e) plus (f)                               |   |
| 5,                     | 517                                    |  |                              | 2,546  |  | 2,971                                     |
|                        | 663                                    |  |                              | 5,743  |  | 3,920                                     |
|                        | 118                                    |  |                              | 5,992  |  | 3,126                                     |
|                        | 624                                    |  |                              | 6,504  |  | 2,120                                     |
|                        | 176                                    |  |                              | 3,690  |  | 2,486                                     |
|                        | 305                                    |  |                              | 5,973  |  | 2,332<br>-537                             |
|                        | 426                                    |  | +                            | <u>5,963</u><br>52,108                       |  | <u>-537</u><br>14,587                     |
| ) 76,<br>) 33,         |  |  |                              | 29,537                                       |  | 4,408                                     |
| 0) 10,                 |  |  | -                            | 6,162  |  | 4,496                                     |
| 1) 12,                 |  |  |                              | 5,965  |  | 6,272                                     |
|                        | 736                                    |  |                              | 4,911  |  | 1,825                                     |
| 3) 6,                  | 499                                    |  |                              | 3,265  |  | 3,234                                     |
| 4)                     |  |  |                              |  |  |   |
| 5)                     |  |  |                              |  |  |   |
| (i) F.M.V. as of 12/31 |  | g gain in column (h) and owned by the<br>(j) Adjusted basis<br>as of 12/31/69                | (k) Excess of over col. (j)  | of col. (i)                                  | (I) Gains (Co<br>col. (k), but not les<br>Losses (from | . (h) gain minus<br>s than -0-) <b>Or</b> |
| )                      |  |  | 213. 33ii (j)                | · · · ·                                      |  | 2,971                                     |
| )                      |  |  |                              |  |  | 3,920                                     |
| )                      |  |  |                              |  |  | 3,126                                     |
| )                      |  |  |                              |  |  | 2,120                                     |
| )                      |  |  | +                            |  |  | 2,486                                     |
| )                      |  |  | +                            |  |  | 2,332<br>-537                             |
| )                      |  |  |                              |  |  | <u>-537</u><br>14,587                     |
| )                      |  |  |                              |  |  | 4,408                                     |
| )<br>0)                |  |  | 1                            |  |  | 4,496                                     |
| 1)                     |  |  |                              |  |  | 6,272                                     |
| 2)                     |  |  |                              |  |  | 1,825                                     |
| 3)                     |  |  |                              |  |  | 3,234                                     |
| 4)                     |  |  |                              |  |  |   |
| -\                     |  |  |                              |  | 1  |   |

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## **Federal Statements**

## Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

|                | How<br>Received      |              |         |                |     |       |     |         |    |              |    |                    |
|----------------|----------------------|--------------|---------|----------------|-----|-------|-----|---------|----|--------------|----|--------------------|
| Whom<br>Sold   | Date <u>Acquired</u> | Date<br>Sold |         | Sale<br>Price  |     | Cost  | _   | Expense |    | Depreciation |    | Net<br>Gain / Loss |
| SALESFORCE.COM | 9/12/18              | 3/05/21      | ¢       | PURCHASE 7,318 | ¢   | 5,413 | Ġ   |         | Ċ  |              | Ċ  | 1,905              |
| TOTAL          | <i>J</i> /12/10      | 3/03/21      | \$<br>= | 7,318          | · — | 5,413 | · - | 0       | \$ | 0            | \$ | 1,905              |

## Statement 2 - Form 990-PF, Part I, Line 11 - Other Income

| Description   | Revenue per<br>Books |       |    | vestment<br>come | Adjusted Net<br>Income |   |  |
|---------------|----------------------|-------|----|------------------|------------------------|---|--|
| MISCELLANEOUS | \$                   | 1,558 | \$ |                  | \$                     |   |  |
| TOTAL         | \$                   | 1,558 | \$ | 0                | \$                     | 0 |  |

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

| Description | Total |   | Net<br>Investme | nt | Adjust<br>Net |   | Charitable<br>Purpose |   |  |
|-------------|-------|---|-----------------|----|---------------|---|-----------------------|---|--|
| LEGAL FEES  | \$    | _ | \$              |    | \$            |   | \$                    |   |  |
| TOTAL       | \$    | 0 | \$              | 0  | \$            | 0 | \$                    | 0 |  |

## Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees

| Description                      | Total |       | _ In | Net<br>vestment | - 1 | usted<br>Net | Charitable<br>Purpose |       |  |
|----------------------------------|-------|-------|------|-----------------|-----|--------------|-----------------------|-------|--|
| ACCOUNTING AND TAX RETURNS PREPA | \$    | 3,485 | \$   | 1,743           | \$  |              | \$                    | 1,742 |  |
| TOTAL                            | \$    | 3,485 | \$   | 1,743           | \$  | 0            | \$                    | 1,742 |  |

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## **Federal Statements**

## Statement 4 - Form 990-PF, Part I, Line 16c - Other Professional Fees

| Description    | <br>Total | _  | Net<br>estment | - 3 | justed<br>Net | Charitable<br>Purpose |     |  |
|----------------|-----------|----|----------------|-----|---------------|-----------------------|-----|--|
| WEBSITE DESIGN | \$<br>352 | \$ |                | \$  |               | \$                    | 352 |  |
| TOTAL          | \$<br>352 | \$ | 0              | \$  | 0             | \$                    | 352 |  |

### Statement 5 - Form 990-PF, Part I, Line 18 - Taxes

| Description            | <u> </u> | Total      | _ Inv | Net<br>estment | A  | djusted<br>Net | _      | Charitable<br>Purpose |
|------------------------|----------|------------|-------|----------------|----|----------------|--------|-----------------------|
| EXCISE TAX FOREIGN TAX | \$       | 569<br>132 | \$    | 132            | \$ |                | \$     |                       |
| TOTAL                  | \$       | 701        | \$    | 132            | \$ | 0              | \$<br> | 0                     |

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

| Description                        | <u></u> | Total  |    | Net<br>/estment |    | usted<br>Vet | Charitable<br>Purpose |       |  |
|------------------------------------|---------|--------|----|-----------------|----|--------------|-----------------------|-------|--|
|                                    | \$      |        | \$ |                 | \$ |              | \$                    |       |  |
| EXPENSES                           | ·       |        | •  |                 | ·  |              |                       |       |  |
| INSURANCE                          |         | 1,009  |    | 1,009           |    |              |                       |       |  |
| INVESTMENT FEES                    |         | 6,784  |    | 6,784           |    |              |                       |       |  |
| DUES & SUBSCRIPTIONS MISCELLANEOUS |         | 3,120  |    |                 |    |              |                       | 3,120 |  |
| TOTAL                              | \$      | 10,913 | \$ | 7,793           | \$ | 0            | \$                    | 3,120 |  |

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## **Federal Statements**

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

| Description                        |    | eginning<br>of Year |    | End of<br>Year | Basis of<br>Valuation | Fair Market<br>Value |
|------------------------------------|----|---------------------|----|----------------|-----------------------|----------------------|
| ABBOTT LABS COM                    | \$ | 5,058               | \$ | 5,058          | COST                  | \$ 9,007             |
| ALPHABET INC CLA                   | -1 | 4,958               | т  | 4,958          | COST                  | 17,382               |
| AMAZON.COM INC                     |    | 2,458               |    | 6,158          | COST                  | 13,337               |
| APPLE INC                          |    | 3,946               |    | 3,946          | COST                  | 12,785               |
| COSTCO WHOLESALE CORP              |    | 3,427               |    | 3,427          | COST                  | 10,786               |
| FACEBOOK INC COM                   |    | 5,827               |    | 6,349          | COST                  | 7,736                |
| HUMANA INC                         |    | 5,972               |    | ,              | COST                  | ,                    |
| JOHNSON & JOHNSON                  |    | 9,117               |    | 9,118          | COST                  | 11,804               |
| JP MORGAN CHASE & CO               |    | 6,243               |    | 6,244          | COST                  | 9,501                |
| MICROSOFT CORP                     |    | 4,117               |    | 4,117          | COST                  | 15,134               |
| NUCOR CORP                         |    | 6,959               |    | 7,181          | COST                  | 8,219                |
| NVIDIA CORP                        |    | 2,741               |    | 2,741          | COST                  | 18,823               |
| PAYPAL HLDGS INC                   |    | 2,542               |    | 2,542          | COST                  | 6,223                |
| REGENERON PHARMACEUTICALS INC      |    | 4,735               |    | ,              | COST                  | •                    |
| THERMO FISHER SCIENTIFIC           |    | 1,003               |    | 1,003          | COST                  | 16,681               |
| WALMART STORES                     |    | 4,534               |    | 4,534          | COST                  | 6,800                |
| VERTEX PHARMACEUTICALS INC         |    | 4,911               |    | ,              | COST                  | ·                    |
| VISA INC CL A                      |    | 3,269               |    |                | COST                  |                      |
| NUVEEN TAXABLE INCOME              |    | 29,545              |    | 37,080         | COST                  | 36,048               |
| BOEING                             |    | 6,504               |    | ,              | COST                  | ·                    |
| NEXTERA ENERGY                     |    | ,                   |    | 6,844          | COST                  | 8,496                |
| SALESFORCE.COM                     |    | 5,413               |    |                | COST                  |                      |
| SOUTHWEST AIRLINES                 |    | 6,788               |    | 6,788          | COST                  | 6,212                |
| WALT DISNEY CO                     |    | 7,009               |    | 7,337          | COST                  | 6,505                |
| ADOBE INC                          |    | 5,743               |    | 6,880          | COST                  | 6,805                |
| CHEVRON CORPORATION                |    | 13,546              |    | 13,546         | COST                  | 16,781               |
| DOW INC                            |    | 6,122               |    | 6,122          | COST                  | 8,338                |
| IRON MOUNTAIN INC                  |    | 6,011               |    |                | COST                  |                      |
| QUALCOMM INC                       |    | 6,162               |    |                | COST                  |                      |
| UNITED RENTALS INC                 |    | 5,965               |    |                | COST                  |                      |
| UNITEDHEALTH GROUP INC             |    | 5,850               |    | 5,850          | COST                  | 11,047               |
| VALERO ENERGY CORP                 |    | 6,810               |    | 6,810          | COST                  | 9,539                |
| ISHARES TRUST MSCI EMG MKT EFT     |    | 95,548              |    |                | COST                  |                      |
| SPDR INDEX SHARES FUNDS EURO STOXX |    |                     |    | 44,548         | COST                  | 45,633               |
| ADVANCED MICRO                     |    | 5,992               |    |                | COST                  |                      |
| ARES CAPITAL CORP                  |    | 13,396              |    | 6,106          | COST                  | 7,925                |
| BLACKROCK CORE BOND TRUST          |    | 68,110              |    | 73,222         | COST                  | 74,212               |

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**Federal Statements** 

## Statement 7 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments (continued)

| Description                   |    | eginning<br>of Year |    | End of<br>Year | Basis of Valuation | Fair Market<br>Value |
|-------------------------------|----|---------------------|----|----------------|--------------------|----------------------|
| BLACKROCK INC.                | \$ | 6,329               | \$ | _              | COST               | \$                   |
| BLACKROCK TAXABLE MUNI BOND   | •  | 30,631              | '  | 37,014         | COST               | 36,704               |
| CATERPILLAR INC               |    | 6,809               |    | 6,809          | COST               | 8,063                |
| CF INDUSTRIES HOLDINGS INC    |    | 6,795               |    | ,              | COST               | ,                    |
| CHIPOTLE MEXICAN GRILL        |    | 5,720               |    | 5,720          | COST               | 10,490               |
| CRESTWOOD EQUITY PARTNERS     |    | 6,958               |    | 6,958          | COST               | 11,505               |
| ENCORE CAPITAL GROUP          |    | 6,424               |    |                | COST               |                      |
| ETSY INC                      |    | 6,783               |    | 6,783          | COST               | 8,977                |
| FEDEX                         |    | 6,469               |    | 6,469          | COST               | 9,828                |
| FREEPORT-MCMORAN INC          |    | 6,659               |    | 7,262          | COST               | 8,429                |
| GENERAL ELECTRIC              |    | 13,153              |    |                | COST               |                      |
| MARATHON PETROLEUM CORP       |    | 5,841               |    | 5,841          | COST               | 10,366               |
| MARVELL TECH GROUP            |    | 6,909               |    |                | COST               |                      |
| NEW MOUNTAIN FINANCE CORP     |    | 6,852               |    |                | COST               |                      |
| PIONEER NATURAL RESOURCES     |    | 6,907               |    | 6,907          | COST               | 10,913               |
| SHERWIN-WILLIAMS CO           |    | 5,828               |    |                | COST               |                      |
| STARWOOD PROPERTY TRUST INC   |    | 7,184               |    | 7,184          | COST               | 9,064                |
| TAKE-TWO INTERACTIVE SOFTWARE |    | 5,751               |    |                | COST               |                      |
| TEXAS INSTRUMENTS INC         |    | 6,918               |    |                | COST               |                      |
| UNITED PARCEL SERVICE INC     |    | 6,650               |    |                | COST               |                      |
| ZOOM VIDEO COMMUNICATIONS INC |    | 2,546               |    |                | COST               |                      |
| AMERICAN EXPRESS              |    |                     |    | 7,320          | COST               | 6,871                |
| ANNALY CAPITAL MANAGEMENT     |    |                     |    | 7,382          | COST               | 6,545                |
| ATLANTICA SUSTAINABLE INFR    |    |                     |    | 7,345          | COST               | 6,759                |
| BESTBUY CO                    |    |                     |    | 7,279          | COST               | 6,807                |
| BLACKSONE INC                 |    |                     |    | 6,890          | COST               | 13,586               |
| EXPEDIA GROUP INC             |    |                     |    | 7,045          | COST               | 8,855                |
| GAMING & LEISURE              |    |                     |    | 7,252          | COST               | 7,542                |
| HONEYWELL INTERNATIONAL       |    |                     |    | 7,310          | COST               | 7,089                |
| INTERNATIONAL BUS MACH        |    |                     |    | 7,007          | COST               | 6,950                |
| KYNDRYL HLDGS INC             |    |                     |    | 294            | COST               | 181                  |
| LINDE PLC                     |    |                     |    | 7,230          | COST               | 8,314                |
| NOV INC                       |    |                     |    | 7,246          | COST               | 6,599                |
| OCCIDENTAL PETROLEUM CORP     |    |                     |    | 7,157          | COST               | 6,610                |
| ORACLE CORP                   |    |                     |    | 7,347          | COST               | 7,064                |
| PFIZER INC                    |    |                     |    | 7,366          | COST               | 10,157               |
| SCHNEIDER NATIONAL INC        |    |                     |    | 7,516          | COST               | 8,019                |

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## **Federal Statements**

## Statement 7 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments (continued)

| Description                                      | Beginning<br>of Year | <br>End of<br>Year                        | Basis of<br>Valuation        | <br>Fair Market<br>Value                  |
|--|----------------------|---|------------------------------|---|
| TESLA INC WP CAREY INC ISHARES TRUST ISHARES INC | \$                   | \$<br>6,977<br>14,833<br>14,839<br>14,851 | COST<br>COST<br>COST<br>COST | \$<br>8,454<br>15,836<br>16,602<br>16,412 |
| TOTAL  | \$ 540,447           | \$<br>545,942                             | 3321                         | \$<br>701,350                             |

Federal Statements

FYE: 12/31/2021

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#### Statement 8 - Form 990-PF, Part VIII-A, Line 1 - Summary of Direct Charitable Activities

#### Description

APPLY AND DEVOTE THE PROPERTY AND INCOME EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, SCIENTIFIC, LITERARY OR EDUCATIONAL PURPOSES, EITHER DIRECTLY OR BY CONTRIBUTIONS TO ORGANIZATIONS DULY AUTHORIZED TO CARRY SUCH ACTIVITIES;

SEE LIST OF GRANTS AWARDED IN SEC. XV 3.

#### Statement 9 - Form 990-PF, Part XIV, Line 1a - Managers Who Contributed Over 2% or \$5,000

#### Name of Manager

FOUNDATION IS FUNDED BY AN INVESTMENT PORTFOLIO CONTRIBUTED BY CHRISTINE MOSER (DECEASED)

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

#### Description

C/O ERICSON, SCALISE & MANGAN, PC 860-229-0369 35 PEARL STREET NEW BRITAIN CT 06051 RSCALISE@ESMLAW.COM

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

#### Description

THE ORGANIZATION ACCEPTS THE COMMON GRANT APPLICATION FORM DEVELOPED BY THE CONNECTICUT COUNCIL FOR PHILANTHROPY. THE APPLICATION CAN BE FOUND ON THE ORGANIZATION'S WEBSITE: CHRISTINEMOSERFOUNDATION.ORG

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

Description

ONGOING

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

#### Description

ROCKY HILL, CT AREA AND OTHER SELECTED ORGANIZATIONS.

Name

FORM 990-PF

Employer identification number

## **Underpayment of Estimated Tax by Corporations**

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

► Attach to the corporation's tax return.

▶Go to www.irs.gov/Form2220 for instructions and the latest information.

2021

CHRISTINE E. MOSER FOUNDATION 06-1353117 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

|              | n the estimated tax penalty line of the corporation's incom   | ie tax i   | eturn, but <b>do not</b> attac                               | :n Form 2220.                 |                      |                     |
|--------------|---|--|--|-------------------------------|----------------------|---------------------|
| Pa           | irt i Required Annual Payment   |  |  |                               |                      |                     |
| 1<br>2a<br>b | Total tax (see instructions)  Personal holding company tax (Schedule PH (Form 1120 Look-back interest included on line 1 under section 460( contracts or section 167(g) for depreciation under the inc Credit for federal tax paid on fuels (see instructions)  Total. Add lines 2a through 2c  Subtract line 2d from line 1. If the result is less than \$500 does not owe the penalty  Enter the tax shown on the corporation's 2020 income tax returning the second section. | D), line (b)(2) for come for c | 26) included on line 1 or completed long-term orecast method | 2b 2c s form. The corporation | 2d                   | 1,186               |
|              | the tax year was for less than 12 months, skip this line and enter  | er the ar  | mount from line 3 on line                                    | 5                             | 4                    | 708                 |
| 5            | Required annual payment. Enter the smaller of line 3  |  |  |                               |                      |                     |
|              | the amount from line 3  |  |  |                               | 5                    | 708                 |
| Pa           | rt II Reasons for Filing—Check the boxe   |  |  | •                             | ked, the corporation | on <b>must</b> file |
|              | Form 2220 even if it does not owe a   | penal  | ty. See instructions   | S                             |                      |                     |
| 6            | The corporation is using the adjusted seasonal insta  | llment   | method.  |                               |                      |                     |
| 7            | The corporation is using the annualized income insta  | allment  | method.  |                               |                      |                     |
| 8            | The corporation is a "large corporation" figuring its fir   | rst requ   | uired installment based                                      | on the prior year's tax       | ζ.                   |                     |
| Pa           | rt III Figuring the Underpayment  |  | 1  |                               |                      |                     |
| 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   |  | (a)  | (b)                           | (c)                  | (d)                 |
|              | months of the corporation's tax year.   | 9  | 05/15/21   | 06/15/21                      | 09/15/21             | 12/15/21            |
| 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   | 177  | 177                           | 177                  | 177                 |
| 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   |  | 300                           |                      |                     |
|              | 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   |  | 300                           |                      |                     |
| 14           | Add amounts on lines 16 and 17 of the preceding column  | 14   |  | 177                           | 54                   | 231                 |
| 15           | Subtract line 14 from line 13. If zero or less, enter -0-   | 15   | 0  | 123                           | 0                    | 0                   |
| 16           | If the amount on line 15 is zero, subtract line 13 from line 14.  |  |  |                               |                      |                     |
|              | Otherwise, enter -0-  | 16   |  | 0                             | 54                   |                     |
| 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   | 177  | 54                            | 177                  | 177                 |
| 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.

For Paperwork Reduction Act Notice, see separate instructions.

15. Then go to line 12 of the next column .....

Form **2220** (2021)

| F   | Part IV          | Figuring tl            | he Penalty                    |               |        |             |              |   |          |       |                       |   |
|-----|------------------|------------------------|-------------------------------|---------------|--------|-------------|--------------|---|----------|-------|-----------------------|---|
|     |                  |                        |                               |               |        | (a          | )            | (b)   | (0       | c)    | (d)                   |   |
| 19  | Enter the date   | of payment or the 1    | 5th day of the 4th mo         | onth after    |        |             |              |   |          |       |                       |   |
|     | the close of the | ne tax year, whicheve  | er is earlier. (C corpo       | rations with  |        |             |              |   |          |       |                       |   |
|     | tax years end    | ding June 30 and S     | corporations: Use 3           | Brd month     |        |             |              |   |          |       |                       |   |
|     | instead of 4th   | month. Form 990-P      | PF and Form 990-T fi          | lers: Use 5th |        |             |              |   |          |       |                       |   |
|     | month instead    | of 4th month.) See     | instructions                  |               | 19     | SEE         | WORKSHI      | EET   |          |       |                       |   |
| 20  |                  |                        | installment on line 9 to      |               | 20     |             |              |   |          |       |                       |   |
|     |                  |                        |                               |               |        |             |              |   |          |       |                       |   |
| 21  | Number of da     | ys on line 20 after 4  | /15/2021 and before 7         | 7/1/2021      | 21     |             |              |   |          |       |                       |   |
| 22  | Underpaymen      |                        | oer of days on line 21<br>365 | x 3% (0.03)   | 22     | \$          |              | \$  | \$       |       | <b> </b><br> \$       |   |
|     |                  |                        |                               | , ,           |        |             |              |   |          |       |                       |   |
| 23  | Number of da     | ys on line 20 after 6  | /30/2021 and before           | 10/1/2021     | 23     |             |              |   |          |       |                       |   |
| 24  | Underpaymen      |                        | per of days on line 23        | 00/ (0.00)    | 24     | \$          |              | \$  | \$       |       | <br> \$               |   |
| 24  | Underpaymen      | t on line 17 x         | 365                           | x 3% (0.03)   | 24     | Ψ           |              | Φ   | Φ        |       | Ф                     |   |
| 25  | Number of da     | ys on line 20 after 9/ | /30/2021 and before           | 1/1/2022      | 25     |             |              |   |          |       |                       |   |
|     |                  | Numb                   | per of days on line 25        |               |        |             |              |   |          |       |                       |   |
| 26  | Underpaymen      | t on line 17 x         | 365                           | x 3% (0.03)   | 26     | \$          |              | \$  | \$       |       | \$                    |   |
| 27  | Number of da     | ys on line 20 after 1  | 2/31/2021 and before          | 4/1/2022      | 27     |             |              |   |          |       |                       |   |
|     |                  | Numb                   | per of days on line 27        |               |        |             |              |   |          |       |                       |   |
| 28  | Underpaymen      | t on line 17 x         | 365                           | × 3% (0.03)   | 28     | \$          |              | \$  | \$       |       | \$                    |   |
| 29  | Number of da     | vs on line 20 after 3  | /31/2022 and before 7         | 7/1/2022      | 29     |             |              |   |          |       |                       |   |
|     |                  |                        | per of days on line 29        |               |        |             |              |   |          |       |                       |   |
| 30  | Underpaymen      |                        | 365                           | x *%          | 30     | \$          |              | \$  | \$       |       | \$                    |   |
| 21  | Number of do     | ua an lina 20 attau C  | /20/2022 and before           | 10/4/2022     | 31     |             |              |   |          |       |                       |   |
| 31  | Number of da     |                        | /30/2022 and before '         | 10/1/2022     | 31     |             |              |   |          |       |                       |   |
| 32  | Underpaymen      |                        | oer of days on line 31<br>365 | x *%          | 32     | \$          |              | \$  | \$       |       | \$                    |   |
|     |                  |                        |                               |               |        |             |              |   |          |       |                       |   |
| 33  | Number of da     | ys on line 20 after 9/ | /30/2022 and before           | 1/1/2023      | 33     |             |              |   |          |       |                       |   |
| 34  | Underpaymen      |                        | per of days on line 33<br>365 | x *%          | 34     | \$          |              | \$  | \$       |       | <br> \$               |   |
| 0-1 | Onderpaymen      | t of time 17 x         | 303                           | X /0          |        | ļ —         |              | Ψ   | Ψ        |       | I W                   |   |
| 35  | Number of da     | ys on line 20 after 1: | 2/31/2022 and before          | 3/16/2023     | 35     |             |              |   |          |       |                       |   |
|     |                  | Numb                   | per of days on line 35        |               |        |             |              |   |          |       |                       |   |
| 36  | Underpaymen      | t on line 17 x         | 365                           | x *%          | 36     | \$          |              | \$  | \$       |       | \$                    |   |
| 37  | Add lines 22     | 24, 26, 28, 30, 32, 3, | 4, and 36                     |               | 37     | \$          |              | \$  | \$       |       | <br> \$               |   |
|     |                  | ,,,, 00, 02, 0         |                               |               |        | 17          |              | <u>  †                                   </u> | 1*       |       | <u> </u> <del>-</del> |   |
| 38  | Penalty. A       | dd columns (a)         | through (d) of li             | ne 37. Enter  | the to | tal here an | d on Form 11 | 20, line 34; or the cor                       | nparable |       |                       |   |
|     | •                | ` ,                    | returns                       |               |        |             |              |   | <u></u>  | 38 \$ |                       | 8 |

\*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 <a href="https://www.irs.gov">www.irs.gov</a>. You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2021)

| Form <b>2220</b>     |             |                       | 2021               |                      |                      |             |                             |
|----------------------|-------------|-----------------------|--------------------|----------------------|----------------------|-------------|-----------------------------|
|                      | For calenda | r year 2021, or       | tax year beginning | , ;                  | and ending           |             |                             |
| ame                  |             |                       |                    |                      |                      | Employer Id | lentification Number        |
| CHRISTINE E          | . MOSER     | FOUNDAT               | <b>FION</b>        |                      |                      | 06-135      | 3117                        |
| Due date of estimate | ed payment  | 1st Qu<br><b>05/1</b> | <u>5/21</u>        | 2nd Quarter 06/15/21 | 3rd Quarter 09/15/23 | _           | 4th Quarter <b>12/15/21</b> |
| Amount of underpay   | ment        |                       | <u> 177</u> _      | 54                   |                      | <u> </u>    | 17                          |
| Prior year overpayme | ent applied |                       |                    |                      |                      |             |                             |
|                      | 1st Pa      | ayment                | 2nd Payment        | 3rd Payment          | 4th Payr             | nent        | 5th Payment                 |
| Date of payment      |             |                       |                    | 06/10/21             |                      |             |                             |
| Amount of payment    |             |                       |                    | 30                   | <u> </u>             |             |                             |

| QTR | FROM     | TO        | UNDERPAYMENT | #DAYS | RATE | PENALTY |
|-----|----------|-----------|--------------|-------|------|---------|
|     |          | C /10 /01 | 177          |       | 2.00 |         |
| 1   | 5/15/21  | 6/10/21   | 177          | 26    | 3.00 | U       |
| 2   | 6/15/21  | 3/31/22   | 54           | 289   | 3.00 | 1       |
| 2   | 3/31/22  | 5/16/22   | 54           | 46    | 4.00 | 0       |
| 3   | 9/15/21  | 3/31/22   | 177          | 197   | 3.00 | 3       |
| 3   | 3/31/22  | 5/16/22   | 177          | 46    | 4.00 | 1       |
| 4   | 12/15/21 | 3/31/22   | 177          | 106   | 3.00 | 2       |
| 4   | 3/31/22  | 5/16/22   | 177          | 46    | 4.00 | 1       |
|     |          |           |              |       |      |         |
|     | TOTAL    | PENALTY   |              |       |      | 8       |

=========

### CHRISTINE E. MOSER FOUNDATION 06-1353117 FORM 990-PF ESTIMATES

| Form    | Estimated Tax on Unrelated Business Taxable Income for Tax-Exempt Organizations (and on Investment Income for Private Foundations)  |                |   |                        |           |              |     |          |
|---------|---|----------------|---|------------------------|-----------|--------------|-----|----------|
| Depart  |   |                | and on Investment Ind<br>www.irs.gov/Form990W for your records. Do no | or instructions and tl | he latest | information. |     | 2022     |
| interna | Revenue Service   | Nech           | Tor your records. Do no   | t send to the interna  | ricevenu  | e Service.   |     |          |
| 1       | Unrelated business taxable income ex  | pected in      | n the tax year  |                        |           |              | 1   |          |
| 2       | Tax on the amount on line 1. See instruc  | tions for t    | ax computation  |                        |           |              | 2   |          |
| 3       | Alternative minimum tax for trusts. Se  | e instruc      | etions  |                        |           |              | 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       |   |                |   |                        |           |              |     |          |
| 8       | Total. Add lines 6 and 7  |                |   |                        |           |              | 8   |          |
| 9       | Credit for federal tax paid on fuels. Se  | ee instrud     | ctions  |                        |           |              | 9   |          |
|         | Subtract line 9 from line 8. <b>Note:</b> If lest required to make estimated tax payminstructions   | ents. Pri      | vate foundations, see   |                        | 10a       | 1,300        |     |          |
| b       | Enter the tax shown on the 2021 retulenter the tax year was for less than 12 mon  | rn. See i      | nstructions. Caution: If zer  | ro or                  |           |              |     |          |
|         | from line 10a on line 10c   |                |   |                        | 10b       |              |     |          |
|         | 2022 Estimated Tax. Enter the small   |                | •   | '                      | •         |              |     |          |
|         | line 10b, enter the amount from line 1  | 0a on lin<br>T | e 10c   |                        |           |              | 10c | 1,300    |
|         |   |                | (a)   | (b)                    |           | (c)          |     | (d)      |
|         | Installment due dates. See instructions   | 11             | 05/16/22  | 06/15/22               | 2         | 09/15/22     |     | 12/15/22 |
|         | 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             |   |                        |           |              |     | 1,300    |
|         | 2021 Overpayment. See instructions  | 13             |   |                        |           |              |     |          |
|         | Payment due (Subtract line 13 from line 12)   | 14             |   |                        |           |              |     | 1,300    |

For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2022)

| Form <b>990-PF</b> | Un<br>       | derdistribution and Exc          | cess Distributions for Part X | <b>III</b>                | 2021                      |
|--------------------|--------------|----------------------------------|-------------------------------|---------------------------|---------------------------|
|                    | For calendar | year 2021, or tax year beginning | , ending                      |                           |                           |
| Name               |              |                                  |                               |                           |                           |
| CHRISTINE          | E. MOSER     | FOUNDATION                       |                               | Employer Id <b>06-135</b> | lentification Number 3117 |

# Undistributed Income Carryovers Form 990-PF, Part XII

|                | Prior Undistributed Income        |                    |                |                           | Next Year                         | Carryover          |
|----------------|-----------------------------------|--------------------|----------------|---------------------------|-----------------------------------|--------------------|
| Tax Year       | Nontaxable or<br>Previously Taxed | Taxable<br>in 2021 | Total per Year | Current Year<br>Decreases | Nontaxable or<br>Previously Taxed | Taxable<br>in 2022 |
| Years prior    |                                   |                    |                |                           |                                   |                    |
| 20 17          |                                   |                    |                |                           |                                   |                    |
| 20 18          |                                   |                    |                |                           |                                   |                    |
| 20 19          |                                   |                    |                |                           |                                   |                    |
| 2020           |                                   | 7,835              | 7,835          | 7,835                     |                                   |                    |
| 2021           |                                   |                    | 32,029         |                           | 2,843                             |                    |
| Total Carryove | er to Next Year                   |                    |                | 2,843<br>2,843            |                                   |                    |

<sup>\*</sup> Carryover amount includes 4942(a) amounts

# Excess Distribution Carryovers Form 990-PF, Part XII

|   | Current Year | Next Year |
|---|--------------|-----------|
| Preceding Tax Year Excess Distributions Decreases |              | Carryover |
| 2016  |              |           |
| 2017  |              |           |
| 2018  |              |           |
| 2019  |              |           |
| 2020  |              |           |
| Current Year Excess Distribution Generate         | 0            |           |
| Total Carryover to Next Year                      | 0            |           |

| Form Inte  | rest and Penalty                 | vvorksheets          |                  |                       | 2021                 |
|--|----------------------------------|----------------------|------------------|-----------------------|----------------------|
| For calendar year 2021, or tax y                               | ear beginning                    | , and endin          | g                |                       |                      |
| me   |                                  |                      |                  | l axpayer ic          | lentification Number |
| CHRISTINE E. MOSER FOUNDATIO                                   | <u>N</u><br>ate Payments and Fai | ilure to File Worksl | neet             | 06-135                | 3117                 |
| interest on La   | ate i ayments and i a            |                      | No. of           |                       |                      |
| Description TAX ON RETURN 5/15                                 | Amount<br>886                    | Balance<br>886       | Days             | Rate                  | Late Interest        |
| INTEREST 5/16-6/30   |                                  | 886                  | 46               | 4.00                  |                      |
| INTEREST 7/1-9/30  |                                  | 890                  | 92               | 5.00                  | 1                    |
| INTEREST 10/1-11/15  |                                  | 901                  | 46               | 6.00                  |                      |
|  |                                  |                      |                  |                       |                      |
|  |                                  |                      |                  |                       |                      |
|  |                                  |                      |                  |                       |                      |
|  |                                  |                      |                  |                       |                      |
|  |                                  |                      |                  |                       |                      |
|  |                                  |                      |                  |                       |                      |
|  |                                  |                      |                  |                       |                      |
|  |                                  |                      |                  |                       |                      |
|  |                                  |                      |                  |                       |                      |
|  |                                  |                      |                  |                       |                      |
|  |                                  |                      |                  |                       |                      |
|  |                                  |                      |                  |                       |                      |
|  |                                  |                      |                  |                       |                      |
|  |                                  |                      |                  |                       |                      |
| Total interest on late payments  Total failure to file penalty |                                  |                      |                  | ····· –               | 2                    |
|  |                                  |                      |                  | =                     |                      |
|  |                                  |                      |                  |                       |                      |
| Fa   | ailure to Pay Penalty            | Worksheet            |                  |                       |                      |
| Description  | Amount                           | Balance              | No. of<br>Months |                       | FTP Penalty          |
| TAX FOR PENALTY 5/15-11/15                                     |                                  | 886                  | 6                | · –                   | 2                    |
|  |                                  |                      |                  | . <u> </u>            |                      |
|  |                                  |                      |                  | _                     |                      |
|  |                                  |                      |                  | _                     |                      |
|  |                                  |                      |                  | -<br>-                |                      |
|  |                                  |                      |                  | . <u> </u>            |                      |
|  |                                  |                      |                  | -<br>-                |                      |
|  |                                  |                      |                  | -                     |                      |
|  |                                  |                      |                  | · –                   |                      |
|  |                                  |                      |                  |                       |                      |
|  |                                  |                      | _                | . <u> </u>            |                      |
| Total failure to pay penalty                                   |                                  |                      |                  | · · · · · · · · · · = | 2                    |

| Form <b>990-PF</b> | Electronic Funds                             | Withdrawal |             | 2021                |
|--------------------|--|------------|-------------|---------------------|
|                    | For calendar year 2021 or tax year beginning | , ending   |             |                     |
| Name               |  |            | Employer Id | entification Number |
| CHRISTINE H        | E. MOSER FOUNDATION                          |            | 06-135      | 3117                |

## 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 | 211170101    |
|------------------------|--------------|
| Bank Account Number    | 100010068766 |
| Type of Account        | CHECKING     |
| Taxpayer Phone Number  | 860-229-0369 |
| Requested Payment Date | 11/15/22     |
| Amount of Tax Payment  | 942          |

DO NOT SUBMIT THIS DOCUMENT TO THE IRS

| Form <b>990-PF</b> | Electronic Funds With                        | hdrawal - Estimates | 2022                     |
|--------------------|--|---------------------|--------------------------|
| For o              | For calendar year 2022 or tax year beginning | , ending            |                          |
| Name               |  | Employ              | er Identification Number |
| CHRISTINE I        | E. MOSER FOUNDATION                          | 06-1                | .353117                  |

## Form Payment Record

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

| Quarter                         | _4           |
|---------------------------------|--------------|
| Routing Transit Number          | 211170101    |
| Bank Account Number             | 100010068766 |
| Type of Account                 | CHECKING     |
| Taxpayer Phone Number           | 860-229-0369 |
| Requested Payment Date          | 12/15/22     |
| Amount of Estimated Tax Payment | 1,300        |

DO NOT SUBMIT THIS DOCUMENT TO THE IRS

Form **990PF** 

36. Net assets

#### **Two Year Comparison Report**

2020 & 2021

For calendar year 2021, or tax year beginning

611,142

48,325

Taxpaver Identification Number

Name 06-1353117 CHRISTINE E. MOSER FOUNDATION **Differences** Revenue and expenses Revenue and expenses Revenue and expenses Net investment Net investment Net investment income per books income per books per books 1. Contributions, gifts, grants, and similar amounts received 1. 44 44 9 -35 2. Interest on savings and temporary cash investments -35 3. Dividends and interest from securities 16,404 16,404 15,231 15,231 -1,173-1,1734. Gross rents 40,674 5. Net gain or (loss) from sale of assets 81,628 40,954 6. Capital gain net income 40,674 79,723 39,049 7. Gross profit or (loss) 8. Other income 1,239 1,239 1,558 319 -1,23958,361 58,361 98,426 94,963 40,065 36,602 9. Total. Add lines 1 through 8 **Φ 10.** Compensation of officers, directors, trustees, etc. 10. 11. 11. Other employee salaries and wages 12. Pension plans, employee benefits 12. 13. Professional fees 1,185 278 3,837 1,743 2,652 1,465 14. 14. Interest 15. Taxes 483 183 701 132 218 -51 **16.** Depreciation and depletion 17. Occupancy 18. Other expenses 8,742 6,971 10,913 7,793 2,171 822 22,000 12,650 34,650 **19.** Contributions, gifts, grants paid 2,236 **20.** Total expenses and disbursements. Add lines 10 through 19 32,410 7,432 50,101 9,668 17,691 25,951 50,929 48,325 85,295 22,374 34,366 21. Net income (if negative investment activity, enter -0-) 21. **22.** Excise Tax 708 1,186 478 23. Section 511 Tax 24. Subtitle A income tax 708 1,186 478 25. Total Taxes 26. Estimates and overpayments credited 26. 452 300 -152 27. Foreign tax withheld 28. Other Payments 29. 29. Total payments and credits 452 -152 300 30. Balance due / (Overpayment) 256 886 630 31. Overpayment credited to next year 32. Penalty 13 56 43 33. 33. Net due / (Refund) 269 942 673 34. Total assets 562,817 611,142 48,325 35. Total liabilities

562,817

22034 CHRISTINE E. MOSER FOUNDATION
06-1353117 Federal Statements

FYE: 12/31/2021

| Form 990-PF, Part XIV       | Line 1a - Managers         | Who Contributed    | Over 2% or \$5,000 |
|-----------------------------|----------------------------|--------------------|--------------------|
| I OIIII 330 I I ; I dit XIV | <u>, Ellic ia managois</u> | TTIIO OOIILIIDALGA | <u> </u>           |

| Name of Ma  | nager                                  |                       | Amc                 | ount           |                     |
|---|--|-----------------------|---------------------|----------------|---------------------|
| FOUNDATION IS FUNDED BY AN CONTRIBUTED BY CHRISTINE 1 | INVESTMENT PORTFOI<br>MOSER (DECEASED) | LIO                   | \$                  |                |                     |
| TOTAL   |  |                       | \$                  | 0              |                     |
| :   | Taxable Interest on                    | Investment            | <u>ts</u>           |                |                     |
| Description   | Amount                                 | Unrelated<br>Business | Exclusion Code      | Postal<br>Code | US<br>Obs (\$ or %) |
| INTEREST TOTAL  | \$9<br>\$9                             |                       | 14                  |                |                     |
| I   | axable Dividends fro                   | om Securit            | <u>ies</u>          |                |                     |
| Description   | Amount                                 | Unrelated<br>Business | Exclusion Code      | Postal<br>Code | US<br>Obs (\$ or %) |
| DIVIDENDS<br>TOTAL                                    | \$ 15,231<br>\$ 15,231                 |                       | 14                  |                |                     |
|   | Other Investment                       | t Income              |                     |                |                     |
| Description   | Amount                                 | _                     | nrelated<br>usiness | Exclus<br>Cod  |                     |
| PORTFOLIO INCOME<br>TOTAL                             | \$<br>\$                               | 0                     |                     |                | 14                  |