Form **990-PF**

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	cale	ndar year 2024 or tax year beginning	, 2	024, and			, 20
Nan	ne of fou	undation			A Employe	er identification number	er
TH	E MA	YER FOUNDATION			02-0569	9535	
Nun	ber and	d street (or P.O. box number if mail is not delivered to street address)	Ro	oom/suite	B Telephon	ne number (see instructi	ons)
		ST 74TH ST	3	5A	(212)77	72-0004	
City	or town	n, state or province, country, and ZIP or foreign postal code	·		C If exempt	tion application is pendi	ng check here
Ne	w Yo	rk, NY 10021			o ii oxompi	aon application to pondi	ig, oncor nore —
			of a former public	charity	D 1. Foreig	n organizations, check	here
		Final return Amended re	eturn .	•	2 Farain	un arganizationa maatin	the OEO/ test
		Address change Name chang	ge			n organizations meeting here and attach compu	
Η (Check	type of organization: X Section 501(c)(3) exempt private	foundation		- - - 16 m min made -		
_			ble private foundation	on		foundation status was t 07(b)(1)(A), check here	
_		arket value of all assets at J Accounting method:		Accrual			
		year (from Part II, col. (c), Other (specify)			1	ndation is in a 60-month ction 507(b)(1)(B), chec	
	ine 16)		be on cash basis.)			(-)(-)(-),	
	art I	Analysis of Revenue and Expenses (The total of					(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Ne	t investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions).)	books	i	ncome	income	purposes (cash basis only)
_	1	Contributions, gifts, grants, etc., received (attach schedule)	82,07	7			(in the state of t
	2	Check X if the foundation is not required to attach Sch. B.	02,07	•			
	3	Interest on savings and temporary cash investments		7	7		
	4	Dividends and interest from securities		,			
	5a	Gross rents					
	b	Net rental income or (loss)					
	6a	Net gain or (loss) from sale of assets not on line 10	65,83	2			
Revenue	_		-	3			
	b 7	Gross sales price for all assets on line 6a 82,114 Capital gain not income (from Part IV)			CE 022		
		Capital gain net income (from Part IV, line 2)			65,833		
	8 9	Net short-term capital gain					
		Income modifications					
	10a	Gross sales less returns and allowances .					
	b	Less: Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	145 01	-	<u> </u>		
_	12	Total. Add lines 1 through 11	147,91	/ 	65,840		
	13	Compensation of officers, directors, trustees, etc					
es	14	Other employee salaries and wages					
enses	15	Pension plans, employee benefits					
	16a	Legal fees (attach schedule)	70				
Ш	b	Accounting fees (attach schedule) STM108	70	U			
Operating and Administrative Exp	C 17	Other professional fees (attach schedule)					
tra	17 18	Taxes (attach schedule) (see instructions) STM110		2			
nis	18 19	, , , , , , , , , , , , , , , , , , , ,	23	3			
Ξ	20	Depreciation (attach schedule) and depletion					
Ad	20 21	Occupancy					
nd	22						
g		Printing and publications		7			
ţį	23 24	Other expenses (attach schedule) STM103	56	/			
ra	24	Total operating and administrative expenses.	1		^		
ğ	2E	Add lines 13 through 23	1,50		0		77 350
9	25	Contributions, gifts, grants paid	77,35				77,350
_	26	Total expenses and disbursements. Add lines 24 and 25	78,85	U	0		77,350
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements .	69,06	/	CF 015		
	b	Net investment income (if negative, enter -0-)			65,840		
	С	Adjusted net income (if negative, enter -0-)				0	

Form 990-PF (2024) THE MAYER FOUNDATION 02-0569535 Page 2 Part II Balance Sheets Attached schedules and amounts in the description column Beginning of year End of year should be for end-of-year amounts only. (See instructions.) (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing 1 92,511 95,745 95,745 3 Accounts receivable Less: allowance for doubtful accounts 4 Pledges receivable Less: allowance for doubtful accounts Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (attach schedule) Less: allowance for doubtful accounts 8 Assets Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations (attach schedule) . . c Investments - corporate bonds (attach schedule) Investments - land, buildings, and equipment: basis 11 Less: accumulated depreciation (attach schedule) 12 13 Investments - other (attach schedule) 14 Land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule) **15** Other assets (describe 16 Total assets (to be completed by all filers - see the 95,745 92,511 95,745 17 18 Liabilities 19 20 Loans from officers, directors, trustees, and other disqualified persons . . 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe Total liabilities (add lines 17 through 22) . . _ 0 0 Foundations that follow FASB ASC 958, check here and **Assets or Fund Balances** complete lines 24, 25, 29, and 30 24 25 Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check 26 27 Paid-in or capital surplus, or land, bldg., and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds . . 92,511 95,745 29 Total net assets or fund balances (see instructions) 92,511 95,745 Net (30 Total liabilities and net assets/fund balances (see 92,511 95,745 **Analysis of Changes in Net Assets or Fund Balances** 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with

	end-of-year figure reported on prior year's return)	1	92,511
2	Enter amount from Part I, line 27a	2	69,067
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	161,578
5	Decreases not included in line 2 (itemize) STM116	5	65,833
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	95,745

		YER FOUNDATION			02-0569	535 Pa	age 3
Part	(a) List and describe the	I Losses for Tax on Investi e kind(s) of property sold (for example, re house; or common stock, 200 shs. MLC	eal estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.))
1a :	300 SHS SCHINDER HOLI			P-Donation	09-13-2006	10-24-2024	
b							
С							
d							
е							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis ense of sale		ain or (loss) s (f) minus (g))	
а	82,114			16,281		65,8	333
b							
C							
d							
е							
	Complete only for assets show	ving gain in column (h) and owned b	by the foundation on	12/31/69.	(I) Gains (C	ol. (h) gain minus	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col. (j		col. (k), but no	ot less than -0-) or from col. (h))	
a						65,8	333
b							
C							
d							
е			1				
2	Capital gain net income or (ne	et capital loss) 1	gain, also enter in P	· }			
•	Not about town assistal main an		(loss), enter -0- in P	art I, line 7	2	65,8	333
3		(loss) as defined in sections 1222(5	, , ,	_			
		e 8, column (c). See instructions. If (I	, ·	}	3		
Part		on Investment Income (Section					
1a		described in section 4940(d)(2), ch			_ 1		
ıu	Date of ruling or determination	, , , ,				1 9	15
b	•	s enter 1.39% (0.0139) of line 27b. E			his)		13
-		ıl. (b)					
2	,	stic section 4947(a)(1) trusts and tax)-)	2	0
3	Add lines 1 and 2					3 9	15
4	Subtitle A (income) tax (dome	stic section 4947(a)(1) trusts and tax	xable foundations o	nly; others, enter -	0-)	1	0
5		come. Subtract line 4 from line 3. I		-		5 9	15
6	Credits/Payments:						
а	2024 estimated tax payments	and 2023 overpayment credited to 2	2024	6a			
b	Exempt foreign organizations	- tax withheld at source		6b			
С	Tax paid with application for e	xtension of time to file (Form 8868)		6c			
d	-	sly withheld					
7		dd lines 6a through 6d	_			7	
8		ayment of estimated tax. Check her		m 2220 is attached		3	
9		and 8 is more than line 7, enter an					15
10		re than the total of lines 5 and 8, en		erpaid		0	
11	Enter the amount of line 10 to	be: Credited to 2025 estimated t	ax		Refunded . 1	1	
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Part	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		х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		х
	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		х
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		х
	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		х
	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	х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	NY			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2024 or the tax year beginning in 2024? See the instructions for Part XIII. If "Yes,"			
	complete Part XIII	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		Х
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
40	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	40		
40	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 WWW.MAYERFOUNDATION.COM	0004		
14	The books are in care of CHARLES MAYER Telephone no. 212-772-	0004		
45	Located at 300 EAST 74TH ST, NEW YORK, NY ZIP+4 10021			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			• ∟
16			Yes	Na
16	At any time during calendar year 2024, did the foundation have an interest in or a signature or other authority	16	162	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			

Part	VI-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)		х
	(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)		х
	(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)		х
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	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 2024?	1d		х
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 2024, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for			
	tax year(s) beginning before 2024? If "Yes," list the years	2a		х
	20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions.)	2b		х
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	3a		х
b	If "Yes," did it have excess business holdings in 2024 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 2024.)	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 2024?	4b		X

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Part	VI-B Statements Regarding Activities	tor wr	iich Form 4	1 ZU IVI	ау ве ке	quired	(continuea)			
5a	During the year, did the foundation pay or incur any amo								Yes	No
	(1) Carry on propaganda, or otherwise attempt to influe	ence legi	slation (section	4945(e))?			5a(1)		х
	(2) Influence the outcome of any specific public election	n (see se	ection 4955); or	to carry	on, directly o	or				
	, ,							5a(2)		X
	(3) Provide a grant to an individual for travel, study, or or							5a(3)		х
	(4) Provide a grant to an organization other than a char	ritable, et	c., organization	n describ	ed in section	4945(d)			
	(4)(A)? See instructions							5a(4)		X
	(5) Provide for any purpose other than religious, charita	ble, scie	ntific, literary, o	r educat	ional purpose	es, or fo	•			
	the prevention of cruelty to children or animals?							5a(5)		Х
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans									
	in Regulations section 53.4945 or in a current notice re	-					_	5b		
С	Organizations relying on a current notice regarding disa									
d	If the answer is "Yes" to question 5a(4), does the found									
	maintained expenditure responsibility for the grant?							5d		
	If "Yes," attach the statement required by Regulations s									
6a	Did the foundation, during the year, receive any funds, or	directly o	r indirectly, to p	ay prem	iums on a pe	ersonal				
	benefit contract?							6a		Х
b	Did the foundation, during the year, pay premiums, direct	ctly or ind	directly, on a pe	rsonal b	enefit contra	ct? .		6b		Х
	If "Yes" to 6b, file Form 8870.									
7a	At any time during the tax year, was the foundation a pa							7a		X
b	If "Yes," did the foundation receive any proceeds or have	•					• • • • • • • • •	7b		
8	Is the foundation subject to the section 4960 tax on pay	ment(s)	of more than \$1	,000,000	0 in remunera	ation or				
D1								8		X
Part	·	ors, ir	ustees, Fol	indatio	on wanag	ers, H	ignly Paid Em	pioyee	es, a	na
	Contractors									
1	List all officers, directors, trustees, and found		managers an e, and average		mpensation		Contributions to			
	(a) Name and address	` hou	rs per week	` (If n	ot paid,	empl	oyee benefit plans	(e) Expe	nse ac Illowan	
			ed to position	en	iter -0-)	and de	erred compensation			
	LES MAYER	PRESI								_
-	EAST 74TH ST NEW YORK, NY 10021	ļ	10.00		0		0			0
	EL BOOCKVAR	SECY/								_
-	EST 75TH ST New York, NY 10023	 	1.00		0		0			0
	MAYER	V.P./								_
300 1	EAST 74TH ST New York, NY 10021		1.00		0		0			0
	Compensation of five highest-paid employee	o (otho	* than than	امماريط	ad an lina	1 000	inatrustians) If	fnana	onto	
2		s (otne	r than those	inciua	ea on line	ı - see	instructions). Il	none,	ente	ľ
	"NONE."						(d) Contributions to			
1	a) Name and address of each employee paid more than \$50,000	1	(b) Title, and a		(c) Comper	oction	employee benefit	(e) Expe		
•	a) Name and address of each employee paid more than \$60,000		devoted to po		(c) Comper	isalion	plans and deferred compensation	other a	allowan	ices
NONE							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
NONE										
Total	number of other employees paid over \$50,000 .									0
		· · · ·				· · · ·				

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U	2	-1	υ	5	6	9	5	3	5	

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Part VII	Information About Officers, Directors, Trustees, For Contractors (continued)	undation Managers, Highly Paid Ei	nployees, and
3 Five h	nighest-paid independent contractors for professional serv	rices. See instructions. If none, enter "	NONE."
NONE	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number	of others receiving over \$50,000 for professional services Summary of Direct Charitable Activities		
List the foun	dation's four largest direct charitable activities during the tax year. Include relevants and other beneficiaries served, conferences convened, research papers products.		Expenses
1 NONE			
2			0
3			
4			
Part VIII-B	Summary of Program-Related Investments (see in	nstructions)	
Describe the	e two largest program-related investments made by the foundation during the tax	•	Amount
1 NONE			
2			0
-	gram-related investments. See instructions.		
3			
Total. Add lin	es 1 through 3		0
EEA	<u> </u>		Form 990-PF (2024)

Part		tions,	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	0
b	Average of monthly cash balances	1b	68,739
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	68,739
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	68,739
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see		
	instructions)	4	1,031
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	67,708
6	Minimum investment return. Enter 5% (0.05) of line 5	6	3,385
Part		ns	
	and certain foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part IX, line 6	1	3,385
2a	Tax on investment income for 2024 from Part V, line 5 2a 915		
b	Income tax for 2024. (This does not include the tax from Part V.)		
С	Add lines 2a and 2b	2c	915
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,470
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,470
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	2,470
Part	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	77,350
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	77,350

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Part XII Undistributed Income (see instructions) (a) Corpus (b) Years prior to 2023 (c) 2023 1 Distributable amount for 2024 from Part X, line 7 2,470 2 Undistributed income, if any, as of the end of 2024: a Enter amount for 2023 only **b** Total for prior years: 20 , 20 Excess distributions carryover, if any, to 2024: **a** From 2019 59,892 **b** From 2020 124,505 **c** From 2021 53,051 **d** From 2022 81,401 **e** From 2023 97,449 f Total of lines 3a through e 416,298 Qualifying distributions for 2024 from Part XI, line 4: \$ 77,350 a Applied to 2023, but not more than line 2a **b** Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) **d** Applied to 2024 distributable amount 2,470 e Remaining amount distributed out of corpus 74,880 Excess distributions carryover applied to 2024 (If an amount appears in column (d), the same amount must be shown in column (a).) Enter the net total of each column as indicated below: a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 . . 491,178 **b** Prior years' undistributed income. Subtract c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b. Taxable e Undistributed income for 2023. Subtract line 4a from line 2a. Taxable amount - see instructions f Undistributed income for 2024. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2025 0 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) Excess distributions carryover from 2019 not applied on line 5 or line 7 (see instructions) 59,892 Excess distributions carryover to 2025. Subtract lines 7 and 8 from line 6a 431,286 10 Analysis of line 9: a Excess from 2020 124,505 **b** Excess from 2021 53,051 c Excess from 2022 81,401 Excess from 2023 97,449

74,880

Excess from 2024

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Part	XIII Private Operating Founda	itions (see inst	ructions and Par	t VI-A, question 9))	
1a	If the foundation has received a ruling or dete	ermination letter that	t it is a private operati	ing		
	foundation, and the ruling is effective for 2024	l, enter the date of t	he ruling			
b	Check box to indicate whether the foundation	ı is a private operati	ng foundation describ	oed in section	4942(j)(3	3) or
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		/ \ -
	income from Part I or the minimum investment return from Part IX for	(a) 2024	(b) 2023	(c) 2022	(d) 2021	(e) Total
	each year listed					
b	85% (0.85) of line 2a					
С	Qualifying distributions from Part XI,					
C	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: "Assets" alternative test - enter:					
а	(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	ı				
	(4) Gross investment income					
Part	XIV Supplementary Informatio	n (Complete th	nis part only if t	he foundation h	ad \$5,000 or mo	ore in assets at
	any time during the year -	see instruction	ns.)			
1	Information Regarding Foundation Manag	gers:				
а	List any managers of the foundation who have before the close of any tax year (but only if the second secon					
THAR.	LES MAYER					
b	List any managers of the foundation who ow ownership of a partnership or other entity) or				ge portion of the	
NONE			J			
2	Information Regarding Contribution, Gran	nt Gift Loan Scho	larshin etc. Progra	ame:		
_			.,			
	Check here if the foundation only makes unsolicited requests for funds. If the foundat	ion makes gifts, gra				
	complete items 2a, b, c, and d. See instruction		the person tol- =	opplications of sulfilling	addrossed:	
а	The name, address, and telephone number	or email address of	the person to whom a	applications snould be	; addressed:	
b	The form in which applications should be su	bmitted and informa	ation and materials th	ey should include:		
С	Any submission deadlines:					
			and a manage of the control of	talala libada et teorre et		
d	Any restrictions or limitations on awards, suc factors:	as by geographic	aı areas, charitable f	ieias, kinas of instituti	ons, or other	

EEA Form **990-PF** (2024)

3 Grants and Contributions Paid During th	ne Year or Approve	d for Futu	ıre Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
ALAIN VAN BEAUX				
PO BOX 448				
Brooklyn, NY 11209-1001	NONE	I	GENERAL WELFARE	1,000
SAL CECERE				
442W 45TH ST				
New York, NY 10031-1209	NONE	I	GENERAL WELFARE	1,000
JODIE KIRSHNER				
269 W 778ND ST				
New York, NY 10023	NONE	I	GENERAL WELFARE	1,000
ADUKE WEBB				
8023 19254 NUBER AVE		L		
Mount Vernon, NY 10551-1214	NONE	I	GENERAL WELFARE	1,000
CARL DEJON PATTERSON				
2262 ADAM CLAYTON BLVD				
New York, NY 10031-0457	NONE	I	GENERAL WELFARE	1,000
TERONA BROWN				
102 CUMBERLAND WALK				
Brooklyn, NY 11201-0021	NONE	I	GENERAL WELFARE	1,000
MARYAM BASIR				
282 LENOX AVE				
New York, NY 10021-0103	NONE	I	GENERAL WELFARE	1,000
CELESTE RAMOS				
301 E 199 ST				
New York, NY 10021-1234	NONE	I	GENERAL WELFARE	1,000
Total			3a	
b Approved for future payment				
Total				

02-0569535 Part XIV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient Foundation Purpose of grant or contribution show any relationship to status of recipient Amount any foundation manager Name and address (home or business) or substantial contributor Paid during the year MERIDITH LIPPINCOTT 289 ECKFORD ST 1,000 Brooklyn, NY 11231-1224 NONE GENERAL WELFARE BRANDAN MC HUGH 389 ECKFORD ST Brooklyn, NY 11231-1212 NONE GENERAL WELFARE 1,000 THURAYYAH RICHARDSON 244 5TH AVE New York, NY 10001-0014 NONE GENERAL WELFARE 1,000 HAEINDA SOOT 16 POPLAR ST Jersey City, NJ 07307 NOME GENERAL WELFARE 750 JEFFREY SPENCER 1261 PARK AVE New York, NY 10021-1561 NONE GENERAL WELFARE 1,000 JOYNAL MC DONIELS 110 W 131TH ST New York, NY 10001-0017 500 NONE GENERAL WELFARE JONAL MC DONIELS 110 W 131TH ST New York, NY 10031-0017 NONE GENERL FUND 500 RUTH MC DANIELS 110 W 131TH ST New York, NY 10031-0036 NONE GENERAL WELFARE 500 **b** Approved for future payment

3b

3 Grants and Contributions Paid During th	ne Year or Approve	d for Futu	ire Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
CHRISTIAN BLACKWELL				
1173 WARTON AVE				
Bronx, NY 10451-1205	NONE	I	GENERAL WELFARE	750
ANTHONY TORRES				
770ST NICHOLAS AVE				
New York, NY 10031-1207	NONE	I	GENERAL WELFARE	1,000
BRENDA MONKS				
44 MONROE ST				
New York, NY 10001-1236	NONE	I	GENERAL WELFARE	1,000
TOMER RAFAEL				
215 E 68TH ST				
New York, NY 10065	NONE	I	GHENERAL WELFARE	1,000
DONALD MILLER				
546 W147TH ST				
New York, NY 10031-1232	NONE	I	GENERAL WELFARE	1,000
FRESH AIR FUND				
633 THIRD AVE				
Bronx, NY 10459	NONE	PC	GENERAL WELFARE	2,500
HELEN GARCIA				
517 W 212TH ST				
New York, NY 10031-0456	NONE	I	GENERAL WELFARE	1,000
JOSEPHINE CHO				
5828 44TH AVE				
Woodside, NY 11377	NONE	I	GENERAL WELFARE	1,000
Total			3a	
b Approved for future payment				
Total			3b	

Form 990-PF (2024) THE MAYER FOUNDATION 02-0569535 Page 11 Part XIV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient Foundation Purpose of grant or contribution show any relationship to status of recipient Amount any foundation manager Name and address (home or business) or substantial contributor Paid during the year JUANA WILLIAMS 1121 ELDER AVE 1,000 Bronx, NY 10472 NONE GENERAL WELFARE SOPHIA GUTCHINOV 453 E 83RD ST New York, NY 10021-0128 NONE GENERAL WELFARE 1,000 JOHN REYNOLDS 1173 BUSHWICK AVE Brooklyn, NY 11221-1554 NONE GENERAL WELFARE 1,000 NADJA MARCIN 0 GRAND AVE Brooklyn, NY 11205-0457 NONE GENERAL WELFARE 1,000 LINWOOD BROWN 194-42 115TH AVE Saint Albans, NY 11412-1235 NONE GENERAL WELFARE 1,000 SADIE TAYLOR 2930W 30TH ST Brooklyn, NY 11221-0009 NONE GENERAL WELFARE 1,000 MELISSA JOSEPH 1227 E 72ND ST Brooklyn, NY 11231-0009 NONE GENERAL WELFARE 1,000 RAFFAELLA TRIVI

225 BENNET AVE New York, NY 10041-1207 NONE GENERAL WELFARE 1,000 **b** Approved for future payment 3b

Part XIV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient Foundation Purpose of grant or contribution show any relationship to status of recipient Amount any foundation manager Name and address (home or business) or substantial contributor Paid during the year MARVIN JEFFERSON 180156 CLAIRMONT AVE Montclair, NJ 07042-1201 NONE GENERAL WELFARE 750 ANGELA SMITH 240 W 11TH ST New York, NY 10026 NONE GENERAL WELFARE 1,000 YUONNA DANIELS 23-09 162ND ST FLUSHING, NY 11366-1217 NONE GENERAL WELFARE 1,000 DOMINICO DEL GIACCO 1930 77ND ST Saint Albans, NY 11412 NONE GENERAL WELFARE 1,000 KELLY POKAR 1641 OCEAN AVE Brooklyn, NY 11231-0027 NONE GENERAL WELFARE 1,000 FREDERIC USHERSON 1184 THOMAS ST Hewlett, NY 11557-1235 NONE GENERAL WELFARE 1,000 VOLUNTEERS IN MEDICINE 777 MAIN ST NC 2,500 GREAT BARRINGTON, MA 02302 NONE GENERAL WELFARE ANDRA CEZANE 1530 STORY AVE Bronx, NY 10471-0002 NONE GENERAL WELFARE 1,000 **b** Approved for future payment

3b

Recipient	If recipient is an individual, show any relationship to any foundation manager	status of	Purp	oose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient			
a Paid during the year					
BOHDANA SMRYRNOUD					
6717 FT HAMILITON PKWY					
Brooklyn, NY 11219	NONE	I	GENERAL WE	LFARE	1,000
ILYA & OKSANA SHUCHAKUYA					
2280 BURNETT 63-84 SANDERST APT 15					
REGO PARK, NY 11412	NONE	I	GENERAL WE	LWARE	1,000
JOANNA PLACENCIA					
550 W 174TH S T					
New York, NY 10033-0128	NONE	I	GENERAL WE	LWARE	1,000
DANTE LENTZ					
345 CLINTON AVE					
Brooklyn, NY 11238	NONE	I	GENERAL WE	LFARE	1,000
BRONWYN ROE					
30 PARK TERRACE EAST					
New York, NY 10034	NONE	I	GENERAL WE	LFARTE	1,000
PAMELA EADY					
24-17 96TH ST					
East Elmhurst, NY 11369	NONE	I	GENERAL WE	LFARE	1,200
ALLISON ADAMS					
31-57 31ST ST					
QUEENS, NY 11101-1232	NONE	I	GENERAL WE	LFARE	1,000
MARIA TORRES					
45 KEW GARDENS RD					
Kew Gardens, NY 11415	NONE	I	GENERAL WE	LFARE	1,000
Total				3	Ba
b Approved for future payment					
			1		1

Recipient	If recipient is an individual, show any relationship to	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
JAZZMIN SMITH				
2750 E 12TH ST				
Brooklyn, NY 11231-0003	NONE	I	GENERAL WELFARE	1,000
LORI FAIELLA				
30-67 44TH ST				
Astoria, NY 11103-1220	NONE	I	GENERAL WELFARE	1,000
HANNAH BENITEZ				
1641 OCEAN AVE				
Brooklyn, NY 11203	NONE	I	GENERAL WELFARE	1,000
SASIE EFRAT				
162 E 2ND S T				
New York, NY 10031	NONE	I	GENERAL WELFARE	750
GRACIELA ORITZ				
PO BOX 720				
Flushing, NY 11371-0108	NONE	I	GENERAL WELFGARE	750
MADISON NASH				
2111 ALBEMARIE				1 00
Brooklyn, NY 11221-0030	NONE		GENERAL WELFARE	1,000
YOULIN NAM				
22 MAC DONALD ST				
Brooklyn, NY 11211-0025	NONE		GENERAL WELFARE	1,000
VINNEITA SCRIVO				
310 LIVINGTON ST		L		1 00
Brooklyn, NY 11211-0280	NONE	1	GENERAL WELFARE	1,000
Total				1
b Approved for future payment				

Recipient	If recipient is an individual, show any relationship to	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
TAMEISHIA PETERSON				
255 AURBURN AVE				
New York, NY 10033	NONE	I	GENERAL WELFARE	1,000
KYOKO HAMAGUCHI				
2818 AVE I				
Brooklyn, NY 11211-0026	NONE	I	GENERAL WELFARE	1,200
MARK DORF				
847 CARROLL ST				
Brooklyn, NY 11211-0456	NONE	I	GENERAL WELFARE	1,200
SADIE RESECCA STARNES				
178 WEST ST Brooklyn, NY 11221-0028	NONE	_	GENERAL WELFARE	1,500
BIOOKIYII, NI 11221-0020	NONE		GENERAL WELLFARE	1,500
ANTHONY ORLANDO CEDENO				
1204 NOSTRAND AVE				
Brooklyn, NY 11221-0129	NONE	I	GENERAL WELFARE	1,200
HARDENING HEARTS				
PO BOX 2674				
New York, NY 10163	NONE	I	GENERAL WELFARE	1,000
SARA SLATER				
495 FRANKLIN AVE				
Brooklyn, NY 11201-0035	NONE	I	GENERAL WELFARE	1,200
MAYOWA WILLOUGHBY				
130 CHERRY ST				
Ithaca, NY 14851-0451	NONE	I	GENERAL WELFARE	1,000
Total				
b Approved for future payment				

02-0569535 Part XIV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient Foundation Purpose of grant or contribution show any relationship to status of recipient Amount any foundation manager Name and address (home or business) or substantial contributor Paid during the year ALEX SCHMIDT 746 WASHINGTON ST 1,200 New York, NY 10014 NONE GENERAL WELFARE ASHLEY HAZZARD 787 9TH AVE New York, NY 10011-1237 NONE GENERAL WELFARE 1,200 RAINER J HANSHE 252E 23RD ST Brooklyn, NY 11221-1237 NONE GENERAL WELFARE 1,200 KRASLEN MILLS 290 CARROLL ST Brooklyn, NY 11231-0013 NONE GENERAL WELFARE 1,500 VOLUNTEERS IN MEDICINE 777 MAIN ST Brockton, MA 02302 NONE NC GENERAL WELFARE 2,500 NY TIMES COMMUNITY FUND 620 8TH AVE New York, NY 10018-0001 NC NONE GENERAL WELFARE 2,500 PETER GORDON 354 W 38TH ST New York, NY 10018 NONE GENERAL WELFARE 1,500 77,350 **b** Approved for future payment

3b

		F (2024) THE MAYER FOUNDATION				02-0569535	Page 1
Pa	rt XV-	-A Analysis of Income-Producing Act	ivities				
Ente	r gross	amounts unless otherwise indicated.	Unrelated bu	usiness income	Excluded by sect	on 512, 513, or 514	(e)
			(2)	(b)	(a)	(4)	Related or exempt function income
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See instructions.)
1	Progr	am service revenue:					
	a						
	b						
	f						
	_	es and contracts from government agencies					
2	_	pership dues and assessments					
3		est on savings and temporary cash investments			03	7	
4		ends and interest from securities			- 05	,	
5							
3		ental income or (loss) from real estate:					
		ebt-financed property					
_		ot debt-financed property					
6		ental income or (loss) from personal property					
7		investment income					
8		or (loss) from sales of assets other than inventory.			18	65,833	
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory					
11	Other	revenue: a					
	е						
12	Subto	otal. Add columns (b), (d), and (e)				65,840	
13		. Add line 12, columns (b), (d), and (e)					65,840
(See		neet in line 13 instructions to verify calculations.)					
	rt XV-		ccomplishme	ent of Exemp	t Purposes		
	ne No.	Explain below how each activity for which income				mportantly to the a	ccomplishment
		of the foundation's exempt purposes (other than b	y providing funds	for such purpose	es). (See instruction	ns.)	ooon piioi ii non
			-				

Form **990-PF** (2024)

Bill Berger

Firm's address

Firm's name WILLIAM BERGER LLC

43 WINTERGREEN DR

Preparer

Use Only

Form 990-PF (2024) THE MAYER FOUNDATION 02-0569535 Page 13 Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt **Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described 1 Yes No in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political Transfers from the reporting foundation to a noncharitable exempt organization of: 1a(1) х 1a(2) Х Other transactions: 1b(1) x 1b(2) 1b(3) х 1b(4) 1b(5) х х Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c х C If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Yes If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign May the IRS discuss this return with the preparer shown below? Here CHARLES MAYER PRESIDENT See instructions. Yes X No Signature of officer or trustee Date Title Preparer's name Date Preparer's signature X if **Paid**

Englishtown NJ 07726

03-13-2025

self-employed

Phone no. 732-536-5876

Firm's EIN

P01216822

Federal Supporting Statements 2024 PG01 Tax ID Number Name(s) as shown on return THE MAYER FOUNDATION 02-0569535 Form 990PF - Part III - Line 5 Statement #116 Other Decreases Schedule GAIN RECORDED IN REVENUE SCREEN 65,833 65,833 Total

Name(s) as shown on return HE MAYER FOUNDATION Form 990PF - Part I - Line 4 - Subsidiary Schedule Subsidiary Statemen Revenue Net Adjusted Description and expenses investment net income DIVIDENDS INTEREST 7 0 0 0 Totals Totals Form 990PF - Part I - Line 23 - Other Expenses Schedule Revenue Net Adjusted Charitable			Federal Su	upporting State	ments	2024 PG01
Form 990FF - Part I - Line 4 - Subsidiary Schedule Revenue Net Adjusted Description and expenses investment 7 0 0 Totals 7 0 0 Form 990FF - Part I - Line 23 - Other Expenses Schedule Revenue Net Adjusted Charitable Description and expenses Revenue Net Adjusted Charitable Description and expenses Schedule Description and expenses investment net income purpose BANK SERVICE CHARGES 567 0 0 0 0	Name(s) as shown on return					
Revenue Net Adjusted Description and expenses investment net income DIVIDENDS INTEREST 7 0 0 0 Totals 7 0 0 0 Form 990PF - Part I - Line 23 - Other Expenses Schedule Revenue Net Adjusted Charitable Description and expenses investment net income purpose BANK SERVICE CHARGES 567 0 0 0 0	HE MAYER FOUNDATION					02-0569535
Description and expenses investment net income DIVIDENDS INTEREST 7 0 0 0 Totals Form 990PF - Part I - Line 23 - Other Expenses Schedule Revenue Net Adjusted Charitable Description and expenses investment net income purpose BANK SERVICE CHARGES 567 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Form 9901	PF - Part I - Line 4	- Subsidiary Schedu	ule	Subsidiary Statement
Totals 7 0 0 Totals 7 0 Form 990PF - Part I - Line 23 - Other Expenses Schedule Revenue Net Adjusted Charitable Description and expenses investment net income purpose BANK SERVICE CHARGES 567 0 0 0 0		Revenue	Net	Adjusted		
Totals	Description	and expenses	investment	net income		
Form 990PF - Part I - Line 23 - Other Expenses Schedule Statement #103~ Revenue Net Adjusted Charitable Description and expenses investment net income purpose BANK SERVICE CHARGES	DIVIDENDS INTEREST	7	0	0		
Form 990PF - Part I - Line 23 - Other Expenses Schedule Statement #103~ Revenue Net Adjusted Charitable Description and expenses investment net income purpose BANK SERVICE CHARGES	Totala	7	0	0		
Revenue Net Adjusted Charitable Description and expenses investment net income purpose BANK SERVICE CHARGES 567 0 0 0	IOCAIS					
Revenue Net Adjusted Charitable Description and expenses investment net income purpose BANK SERVICE CHARGES 567 0 0 0						
Revenue Net Adjusted Charitable Description and expenses investment net income purpose BANK SERVICE CHARGES 567 0 0 0						
Revenue Net Adjusted Charitable Description and expenses investment net income purpose BANK SERVICE CHARGES 567 0 0 0						
Revenue Net Adjusted Charitable Description and expenses investment net income purpose BANK SERVICE CHARGES						PG01
Description and expenses investment net income purpose BANK SERVICE CHARGES		Form 990PF	- Part I - Line 23	- Other Expenses Sch	nedule	Statement #103~
Description and expenses investment net income purpose BANK SERVICE CHARGES						
BANK SERVICE CHARGES		Revenue	Net		Charitable	
	Description				purpose	
Totals	BANK SERVICE CHARGES	567	0	0	0	
	Totala	567	0	0	0	
	iotais					

ame(s) as shown on return		Federal St	upporting State	ments	2024 PG01 Tax ID Number 02-0569535
	Schedule	Statement #108~			
	Revenue	Net	Adjusted	Charitable	
escription	and expenses	investment	net income	purpose	
COUNTING FEES	700	0	0	0	
h - 3	700	•	•		
tals	700	0	0	0	
					PG01
	Form 99	90PF - Part I - Line	e 18 - Taxes Schedule	2	Statement #110~
	Revenue	Net	Adjusted	Charitable	
escription	and expenses	investment	net income	purpose	
CISE TAXES	233	0	0	0	
h . 7	022	•	•		
tals	233	0	0	0	