	n 990-PF or s	Return of Private Section 4947(a)(1) Trust Treat er social security numbers on	ed as Private Foundation this form as it may be m	ade public.	омв No. 1545-0047 2020
Interr	nal Revenue Service Go to www	v.irs.gov/Form990PF for instr L 1, 2020	uctions and the latest int , and ending	JUN 30, 2021	Open to Public Inspection
	me of foundation	L I, 2020	, and ending	A Employer identification	number
INdi				A cinployer identification	
D	I GOLDENE KEYT (THE GOLD	EN CHAIN), LT	Ο.	13-3849152	
	mber and street (or P.O. box number if mail is not delivered to street		Room/suite	B Telephone number	
P	O BOX 1597			917-623-73	09
City	y or town, state or province, country, and ZIP or foreign	postal code		C If exemption application is pe	ending, check here
N	EW YORK, NY 10113				
GC	Check all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations,	, check here
	Final return	Amended return		2 Earcien grandlastions mor	ting the 95% test
	X Address change	Name change		2. Foreign organizations mee check here and attach cor	nputation
HC		exempt private foundation		E If private foundation stat	
	Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	1 1	under section 507(b)(1)(A), check here
		nting method: X Cash	Accrual	F If the foundation is in a 6	
	rom Part II, col. (c), line 16)	Other (specify) umn (d), must be on cash basi	c)	under section 507(b)(1)(B), check here
				() A 12 - 4 - 1 - 4	(d) Disbursements
Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received			-	lecon anoio aniki
	2 Check ► if the (oundation is not required to attach Sch. B	01,002.	1.00		
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				10000
	b Net rental income or (loss)		100 C 10		
ø	6a Net gain or (loss) from sale of assets not on line 10		The second		
nua	b Gross sales price for all assels on line 6a		1		R III
Revenue	7 Capital gain net income (from Part iV, line 2)		0.		
Œ	8 Net short-term capital gain				
	9 Income modifications Gross sales less returns				
	1Ua and allowances				
	b Less: Cost of goods sold		-		
	c Gross profit or (loss)				
	11 Other income 12 Total. Add lines 1 through 11		0.	0.	
-	13 Compensation of officers, directors, trustees, etc.		0.	0.	0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
ses	16a Legal fees				
ieu	b Accounting fees				
ŭ	c Other professional fees				
ive	17 Interest				
trat	18 Taxes				
inis	19 Depreciation and depletion				
Operating and Administrative Expenses	20 Occupancy				
A bi	21 Travel, conferences, and meetings				
an		28.	0.	0.	28.
ting	23 Other expenses <u>STMT 1</u> 24 Total operating and administrative	20.	U .	0.	20.
lera	expenses. Add lines 13 through 23	28.	0.	0.	28.
op	25 Contributions, gifts, grants paid				67,229.
	26 Total expenses and disbursements.				
	Add lines 24 and 25	67,257.	0.	0.	67,257.
-	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	16,745.			
	b Net investment income (if negative, enter -0-)		0.		
	o Adjusted net income (if negative, enter -0-)			0.	

023501 12-02-20 LHA For Paperwork Reduction Act Notice, see instructions.

	990-PF (2020) DI GOLDENE KEYT (THE GOL	Beginning of year	End of	3849152 Page year
Par	t II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	Cash - non-interest-bearing	631.	17,376.	17,376
	2 Savings and temporary cash investments			
	Accounts receivable	201 5 100		
	Less: allowance for doubtful accounts			
·	Pledges receivable			
	Less: allowance for doubtful accounts			
	Grants receivable			
1	B Receivables due from officers, directors, trustees, and other disqualified persons			
	Other notes and loans receivable			
	Less; allowance for doubtful accounts 🕨			
	Inventories for sale or use			
	Prepaid expenses and deferred charges			
1	a Investments - U.S. and state government obligations			
["	b Investments - corporate stock			
	c Investments - corporate bonds			
4	Investments - land, buildings, and equipment: basis			
ľ.	Less: accumulated depreciation			
11	P. Investments - mortgage loans			
	Investments - other			
	Land, buildings, and equipment: basis			
''	Less: accumulated depreciation			
1.	i Other assets (describe)			
1	Total assets (to be completed by all filers - see the	631.	17,376.	17,376
4.	instructions. Also, see page 1, item I)	0.01.	17,570.	17,570
	Accounts payable and accrued expenses			
	Grants payable			
19				
20				
2				
22	2 Other liabilities (describe 🕨)			
	Tata Bab (B) as (add lines d7 desure) (20)	0.	0.	
23	5 /	U •	U.	
	Foundations that follow FASB ASC 958, check here			
	and complete lines 24, 25, 29, and 30.			
	Net assets without donor restrictions			
25	Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here 🕨 🔀			
	and complete lines 26 through 30.			
26		0.	0.	
27		0.	0.	
28		631.	17,376.	1.
29	Total net assets or fund balances	631.	17,376.	
30	Total liabilities and net assets/fund balances	631.	17,376.	
-			17,0704	
ar	Analysis of Changes in Net Assets or Fund Ba	lances		
Tot	al net assets or fund balances at beginning of year - Part II, column (a), line 29)		
	int agree with and of year figure reported on prior year's return)			631

ta not access of tand balances at organing of your in artin, column (a), into 20		
nust agree with end-of-year figure reported on prior year's return)	1	631.
nter amount from Part I, line 27a	2	16,745.
ther increases not included in line 2 (itemize) 🕨	3	0.
dd lines 1, 2, and 3	4	17,376.
ecreases not included in line 2 (itemize) 🕨	5	0.
otal net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	17,376.
		Form 990-PF (2020)

(1) List and decorber the kind(s) of properly sold (for name) and status. (1) List and decorber the kind(s) of properly sold (for name) and sold. (1) List and decorber the kind(s) of properly sold (for name). (1) List and decorber the kind(s) of properly sold (for name). (1) List and decorber the kind(s) of properly sold (for name). (1) List and decorber the kind(s) of properly sold (for name). (1) List and decorber the kind(s) of properly sold (for name). (1) List and decorber the kind(s) of properly sold (for name). (1) List and decorber the kind(s) of properly sold (for name). (1) List and decorber the kind(s) of properly sold (for name). (1) List and decorber the kind(s) of properly sold (for name). (1) List and decorber the kind(s) of properly sold (for name). (1) List and decorber the kind(s) of properly sold (for name). (1) List and decorber the kind(s) of properly sold (for name). (1) List and the combined (for and properly sold (for name). (1) List and prope). (1) List and properly sold (for nam		GOLDENE KEYT (TH and Losses for Tax on In		N), LTD.	13-384	9152 Page 3
11 NONE Image: Control of the section	(a) List and describe	the kind(s) of property sold (for exa	mple, real estate,	(b) How acquired P - Purchase D - Donation		
c d d d (e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis (b) Scin or (loss) (c) plus (f) minus (g) a (e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis (b) plus cyclene or faile (b) Gain or (loss) (c) plus (f) minus (g) a (f) Adjusted basis (a) Gross sates thorwing gain in column (h) and owned by the foundation on 12/3 1969. (f) FMV as of 12/3 1/69 (f) Gains (Col. (h) gain minus col. (h) but not lies fair-0-1) or Losses (from col. (h)) a (f) Adjusted basis (a) Gross as at 12/3 1/69 (h) Excess of col. (h) over col. (h). If any b (f) Gains (Col. **) gain minus col. (h). but not lies fair-0-1) or Losses (from col. (h)) b (f) Gains (col. **) gain minus col. (h). but not lies fair-0-1) or Losses (from col. (h)) copied jain net income or (net capital loss) (f foss), entr -0- in Part, line 7 2 Capital gain net income or (net capital loss) (f) Cost entructions. If (cos.), entr -0- in Part line 8. Column (C). Ges instructions. If (cos.), entr -0- in Part line 8. Column (C). Ges instructions. If (cos.), entr -0- in Part line 8. Column (C). Ges instructions. If (cos.), entructions. If (cos.), entructions and the fail of t	1a			Bonation		
d (i) Gross sales price (ii) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale (b) Gain or (loss) (e) plus (f) minus (g) a	b NO.	NE				
e (e) Grass sales price (f) Depreciation allowed (or allowable) (g) Cost or other hasis plue expanse of sale (h) Gain or (floss) (le) plus (f) minas (g)) a	C					
(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expanse of sale (h) Dain or (loss) (less) a	d					
Levidous states price (or allowable) plus expense of sale ((e) plus (f) minus (g)) a	e					
b c c c d c c complete only for assets showing gain in column (h) and owned by the foundation on 12/31/68. (l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)) c (h) FMV as of 12/31/69 (h) Adjusted basis (h) Excess of col. (h) col. (k), but not less than -0-) or Losses (from col. (h)) a c c col. (k), but not less than -0-) or Losses (from col. (h)) a c col. (k), but not less than -0-) or Losses (from col. (h)) a col. (k), but not less than -0-) or Losses (from col. (h)) col. (k), but not less than -0-) or Losses (from col. (h)) a col. (k), but not less than -0-) or Losses (from col. (h)) col. (k), but not less than -0-) or Losses (from col. (h)) a col. (k), but not less than -0-) or mart l, line 7 2 2 Capital gain net income or (net capital loss) { If gain, also enter in Part l, line 7 2 3 Net short-term capital gain or (loss) as defined in sections 12/25(3 and (b)); 3 2 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income Sectron 4940(e) Reserved Reserved Reserved Reserved col. (h) Reserved 2 </td <td>(e) Gross sales price</td> <td></td> <td></td> <td></td> <td></td> <td></td>	(e) Gross sales price					
c d d d d d complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (f) Gains (Col. (h) gain minus col. (h) or Losses of col. (f) over col. (j), if any column (h) and owned by the foundation on 12/31/69. d d d column (h) and owned by the foundation on 12/31/69. (f) Gains (Col. (h) gain minus column (h) and owned by the foundation on 12/31/69. a d d d column (h) and owned by the foundation on 12/31/69. column (h) and owned by the foundation on 12/31/69. a d d d d d column (h) and owned by the foundation on 12/31/69. column (h) and owned by the foundation on 12/31/69. column (h) and owned by the foundation on 12/31/69. column (h) and owned by the foundation on 12/31/69. column (h) and owned by the foundation on 12/31/69. column (h) and owned by the foundation on 12/31/69. column (h) and owned by the foundation on 12/31/69. column (h) and owned by the foundation on 12/31/69. column (h) and owned by the foundation on 12/31/69. column (h) and owned by the foundation on 12/31/69. column (h) and owned by the foundation on 12/31/69. column (h) and owned by the foundation on 12/31/69. column (h) and owned by the foundation on 12/31/69. column (h) and owned by the foundation on 12/31/69. column (h) and owned by the foundatin owned by the foundatin owned by the foundation owned the founda						
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(I) FMV as of 12/3/169 (I) red 12/3/169 (I) red 12/3/169 Losses (from col. (n)) a a a a a b c a a a c a a a a d a a a a c a a a a d a a a a a e a a a a a a e a a a a a a a e a <td>Complete only for assets showin</td> <td></td> <td></td> <td> c</td> <td>ol. (k), but not less thar</td> <td>nnnus 1 -0-) or</td>	Complete only for assets showin			c	ol. (k), but not less thar	nnnus 1 -0-) or
b c c d c c d c c e c c 2 Capital gain net income or (net capital loss) { If (gain, also enter in Part I, line 7 c 3 Net short-term capital gain net income or (net capital loss) c (loss), enter -0- in Part I, line 7 c c 9 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income s Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income s SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE. 1 1 Reserved Reserved Reserved Reserved Reserved Reserved Reserved Reserved Reserved Reserved 2 2 Reserved 2 3 Reserved 3 4 S S 4 S S 5 S S 6 S S 7 S S 8 S S					Losses (from col. (h)) ´
c d d e d d e d d 2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7						
d						
e 2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 2 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): 1 2 3 It gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 2 3 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income 3 SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE. 1 1 Reserved Reserved Reserved Reserved Reserved Reserved Reserved 1 Reserved Reserved 1 Reserved Reserved 1 Reserved 1 1 Reserved </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 { If (loss), enter -0- in Part I, line 7 { If (loss), enter -0- in Part I, line 7 Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 2						
SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE. 1 Reserved Image: Colspan="2">Reserved 1 Reserved	 3 Net short-term capital gain or (los If gain, also enter in Part I, line 8, Part I, line 8 Part V Qualification U 	pital loss) { If (loss), enter -0- is) as defined in sections 1222(5) an column (c). See instructions. If (loss nder Section 4940(e) for	in Part I, line 7 d (6):), enter -0- in Reduced Tax on Ne t) 3 t Investment Ir	ncome	
(a) Reserved (b) Reserved (c) Reserved Reserved Reserved	SECTIO	ON 4940(e) REPEALED O	N DECEMBER 20, 20	019 - DO NOT	COMPLETE.	-
Reserved Reserved Reserved						740
Reserved 2 Reserved 2 Reserved 2 3 Reserved 3 4 Reserved 4 5 Reserved 5 6 Reserved 6 7 Reserved 7 8 Reserved 8					Re	(a) served
Reserved 2 Reserved 2 2 Reserved 2 3 Reserved 3 4 Reserved 4 5 Reserved 5 6 Reserved 6 7 Reserved 7 8 Reserved 8				1		
Reserved 2 2 Reserved 3 Reserved 3 Reserved 4 Reserved 5 Reserved 6 Reserved 7 Reserved 8 Reserved						
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2 Reserved 2 3 Reserved 3 4 Reserved 4 5 8 5 6 7 8						
3 Reserved 3 4 Reserved 4 5 Reserved 5 6 Reserved 6 7 Reserved 7 8 Reserved 8	Reserved					
4 Reserved 4 5 Reserved 5 6 Reserved 6 7 Reserved 7 8 Reserved 8	2 Reserved				2	
5 Reserved 5 6 Reserved 6 7 Reserved 7 8 Reserved 8	3 Reserved					
6 6 7 7 8 8	4 Reserved				4	
7 Reserved 7 8 8	5 Reserved				5	
8 Reserved	6 Reserved				6	
	7 Reserved				7	
	8 Reserved				the second se	

Form 990-PF (2020) DI GOLDENE KEYT (THE GOLDEN CHAIN), LTD. 13-38 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instru		2	Page 4
1a Exempt operating foundations described in section 4940(d)(2), check here \blacktriangleright and enter "N/A" on line 1.	stionio	112	-
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b Reserved			0.
c All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations, enter 4%		1	
of Part I, line 12, col. (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.
3 Add lines 1 and 23		_	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		_	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			0.
6 Credits/Payments:			
a 2020 estimated tax payments and 2019 overpayment credited to 2020 6a 0.			
b Exempt foreign organizations - tax withheld at source 6b 0.			
c Tax paid with application for extension of time to file (Form 8868) 6c 0.			
			0
7 Total credits and payments. Add lines 6a through 6d 7	_	_	0.
 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 		-	0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10			0.
11 Enter the amount of line 10 to be: Credited to 2021 estimated tax			
Part VII-A Statements Regarding Activities			
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
any political campaign?	1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition			X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		1	-
distributed by the foundation in connection with the activities.			
c Did the foundation file Form 1120-POL for this year?	10		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			000
(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.	1.2		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		1.2	
managers. 🕨 \$ 0.		12.5	
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.	1.1	1	
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	1-1-	1.19	
bylaws, or other similar instruments? if "Yes," attach a conformed copy of the changes	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			X
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.		1.0	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		1.	
By language in the governing instrument, or			
• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	0	x	-
remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		X	-
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		•	
8a Enter the states to which the foundation reports or with which it is registered. See instructions.			1
	-		200
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	-		
of each state as required by General Instruction G? If "No," attach explanation	8b	x	
 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar 			
year 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If "Yes," complete Part XIV	9		X
10 Did any persons become substantial contributors during the tax year? II "Yes," attach a schedule listing their names and addresses			X
	Form 99	0-PF	(2020)

Form 990-PF (2020) DI GOLDENE KEYT (THE GOLDEN CHAIN), LTD.	13-3849	152		Page 5
			Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			165	x
section 512(b)(13)? If "Yes," attach schedule. See instructions		11		~
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory pr If "Yes," attach statement. See instructions	-	12	1	x
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	
Website address MAZICMUSIC.COM/DGK.HTM				
14 The books are in care of THE ORGANIZATION Telephone no.				
Located at PO BOX 1597, NEW YORK, NY	ZIP+4 ▶10	113		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			🕨	
and enter the amount of tax-exempt interest received or accrued during the year	15		/A	
16 At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank,			Yes	No
securities, or other financial account in a foreign country?		16	1.	X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the				1
foreign country 🕨				
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a During the year, did the foundation (either directly or indirectly):			1	
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	s 🛛 No		1.	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		100		
	s X No		1.1	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	s X No		1.1	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	s X No			
(5) Transfer any income or assets to a disqualified person (or make any of either available			-51	
for the benefit or use of a disqualified person)? Ye	s X No			
(6) Agree to pay money or property to a government official? (Exception. Check "No"				-
if the foundation agreed to make a grant to or to employ the official for a period after		1		
termination of government service, if terminating within 90 days.) Ye	s X No		2.1	
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		15		
Organizations relying on a current notice regarding disaster assistance, check here	.: ►L	-	113	
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		-	- 1	
before the first day of the tax year beginning in 2020?		10		X
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)):			1	
a At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines				
6d and 6e) for tax year(s) beginning before 2020?	s X No			
If "Yes," list the years ► , ,			6 . I	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect				
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach				
statement - see instructions.)	N/A	26		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
			1.0	
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	s X No		1	
during the year? Yes b If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or disqualified persons afte		-		
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dis				
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,	pose			
Schedule C, to determine if the foundation had excess business holdings in 2020.)	N/A	3b		
 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 		4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose				
had not been removed from jeopardy before the first day of the tax year beginning in 2020?		4b		x

Form 990-PF (2020) DI GOLDENE KEYT (THE GO			13-38491	.52	Page 6
Part VII-B Statements Regarding Activities for Whic	h Form 4720 May Be I	Required (contin	ued)		
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 (sec			es X No		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indire				
any voter registration drive?			es 🔀 No		
(3) Provide a grant to an individual for travel, study, or other similar purport	ses?	Υ	es 🗶 No 📔		
(4) Provide a grant to an organization other than a charitable, etc., organization	ation described in section				
4945(d)(4)(A)? See instructions		Y	es 🔀 No 📗		
(5) Provide for any purpose other than religious, charitable, scientific, litera	ary, or educational purposes, or f	or			
the prevention of cruelty to children or animals?		Y	es 🔀 No 📗		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify					1.1
section 53.4945 or in a current notice regarding disaster assistance? See in	structions		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, che					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemptio					
expenditure responsibility for the grant?	Ň	[/AY	es 🔄 No		10
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		-			
6a Did the foundation, during the year, receive any funds, directly or indirectly,	to pay premiums on				
a personal benefit contract?			es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on	a personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.	.,,				
7a At any time during the tax year, was the foundation a party to a prohibited ta	ax shelter transaction?		es X No		
 b If "Yes," did the foundation receive any proceeds or have any net income att 	ributable to the transaction?		N/A	7b	-
 8 Is the foundation subject to the section 4960 tax on payment(s) of more that 					
Part VIII Information About Officers, Directors, Tru	stees Foundation Ma	nagers Highl	V		-
Paid Employees, and Contractors	stees, roundation ma	inagers, riigin	y		
1 List all officers, directors, trustees, and foundation managers an	d their compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to	(e) Exp account	pense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benetil plans and deterred compensation	account	, other
LINDA ROSENGART	PRESIDENT, AS		Compensation		
230 EAST 15TH STREET #11G					
NEW YORK, NY 10003	0.00	0.	0.		0.
PAULETTE SCHNEIDER	SECRETARY, AS				•••
755 EAST MOUNTAIN RD S.					
COLD SPRING , NY 10516	0.00	0.	0.	0.0	Ο.
LORI WEISENBERG-CATALANO	TREASURER, AS				
90 LA SALLE STREET #15H		INDQUINDD			
NEW YORK, NY 10027	0.00	0.	0.		Ο.
NEW TORK, NT TOUZ?	0.00	0.	0.		0.
	-				
2 Compensation of five highest-paid employees (other than those	included on line 1). If none.	enter "NONE."	1	<u> </u>	
	(b) Title, and average		(d) Conkibulians to	(e) Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	allowa	, other
NONE	develoe to position		compensation	andero	11000
NOME	-				
	-				
	_				
	-				
	_				
T-A-L number of other employing paid over \$50,000				1	0
Total number of other employees paid over \$50,000					U

Form 990-PF (2020) DI GOLDENE KEYT (THE GOLDEN CHAIN)		849152 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "No	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical i number of organizations and other beneficiaries served, conferences convened, research papers produced	nformation such as the , etc.	Expenses
GRANTS TO CHORAL ORGANIZATIONS THAT PERFORM YI	DDISH CHORAL	
MUSIC TO ENHANCE PUBLIC AWARENESS AND APPRECIA	TION	
		67,229.
2		
3		
······		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.
grait Aug lines I (httpugh 5		E 000 DE (0000

Form	990-PF (2020) DI GOLDENE KEYT (THE GOLDEN CHA	IN), LTD.	13-3	849152 Page 8
Pa	rt X Minimum Investment Return (All domestic foundations must comp	lete this part. Foreign fou	ndations, se	e instructions.)
1 F	air market value of assets not used (or held for use) directly in carrying out charitable, etc., purp	oses;		
	Average monthly fair market value of securities		1a	0.
	Average of monthly cash balances		1b	7,234.
c F	air market value of all other assets		10	
d	Total (add lines 1a, b, and c)		1d	7,234.
	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0.		
	Acquisition indebtedness applicable to line 1 assets		2	0.
	Subtract line 2 from line 1d		3	7,234.
4 (Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instruc	tions)	4	109.
	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line		5	7,125.
	Minimum investment return. Enter 5% of line 5		6	356.
	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) priv		nd certain	
	foreign organizations, check here and do not complete this part.)			
1 1	Ninimum investment return from Part X, line 6		1	356.
	Fax on investment income for 2020 from Part VI, line 5			
bΙ	ncome tax for 2020. (This does not include the tax from Part VI.) 2b			
	Add lines 2a and 2b		20	0.
3 [Distributable amount before adjustments. Subtract line 2c from line 1		3	356.
	Recoveries of amounts treated as qualifying distributions		4	0.
	Add lines 3 and 4		5	356.
6 [Deduction from distributable amount (see instructions)		6	0.
	. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		7	356.
Pa	rt XII Qualifying Distributions (see instructions)			
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		1.13	
	xpenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	67,257.
b F	Program-related investments - total from Part IX-B	*****	1b	0.
2 A	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., pur	poses	2	
3 A	Amounts set aside for specific charitable projects that satisfy the:		10.24	
a S	Suitability test (prior IRS approval required)		3a	
bC	Cash distribution test (attach the required schedule)	*****	3b	
4 (Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII,	line 4	4	67,257.
5 F	oundations that qualify under section 4940(e) for the reduced rate of tax on net investment			
	ncome. Enter 1% of Part I, line 27b		5	0.
6 A	Adjusted qualifying distributions. Subtract line 5 from line 4		6	67,257.
ľ	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calcula	ting whether the foundation (qualifies for the	e section

4940(e) reduction of tax in those years.

DI GOLDENE KEYT (THE GOLDEN CHAIN), LTD.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI,				
line 7				356
2 Undistributed income, if any, as of the end of 2020:		1 10 1	0	
a Enter amount for 2019 only b Total for prior years:			0.	
g rotation prior years.	- 201	0.		
3 Excess distributions carryover, if any, to 2020:				
a From 2015			and the same	
bFrom 2016				
c From 2017			1	
dFrom 2018				
e From 2019				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2020 from				
Part XII, line 4: ►\$ 67,257.				
a Applied to 2019, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		A REAL PROPERTY OF		
(Election required - see instructions)	0.			
d Applied to 2020 distributable amount				356.
e Remaining amount distributed out of corpus	66,901.			and the second
5 Excess distributions carryover applied to 2020 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.		1.1	0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	66,901.			11
b Prior years' undistributed income. Subtract		011	1. Mar.	
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions		0.		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2020. Subtract				
lines 4d and 5 from line 1. This amount must			11	
be distributed in 2021			and the second	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by			and the second s	
section 170(b)(1)(F) or 4942(g)(3) (Election			100	
may be required - see instructions)	0.			
8 Excess distributions carryover from 2015				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2021.				
Subtract lines 7 and 8 from line 6a	66,901.			
0 Analysis of line 9:				
a Excess from 2016				
b Excess from 2017			in the second	
c Excess from 2018				
dExcess from 2019				
e Excess from 2020 66,901.				Form 000 DE (0000)

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e 1 1		t it is a private operating			
foundation, and the ruling is effective for a					
Check box to indicate whether the founda	tion is a private operation	ng foundation described i	n section	4942(j)(3) or 49	42(j)(5)
Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2020	(b) 2019	(c) 2018	(d) 2017	(e) Total
85% of line 2a Qualifying distributions from Part XII,					
line 4, for each year listed Amounts included in line 2c not used directly for active conduct of exempt activities					
Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed					
"Support" alternative test - enter:					
 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					
rt XV Supplementary Infor	nation (Comple	te this part only	f the foundation	had \$5,000 or mo	ore in assets

NONE

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

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ► X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

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

c Any submission deadlines:

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

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Form 990-PF (2020) DI GOLDENE KEYT (THE GOLDEN CHAIN), LTD. 13-3849152 Page 11 Part XV Supplementary Information (continued) Page 11

3 Grants and Contributions Paid During the Ye Recipient	If recipient is an individual			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
JEWISH PEOPLE'S PHILHARMONIC CHORUS,		NONE	PROGRAM SUPPORT	
C/O NAN BASES 316 WEST 22ND STREET, #2				
NEW YORK, NY 10011				41,82
YIDDISH PHILHARMONIC CHORUS, C/O NAN		NONE	PROGRAM SUPPORT	
316 WEST 22ND STREET, #2 NEW YORK, NY 10011				25,40
Total	1	1	► 3a	67,22
b Approved for future payment				
AND			PROGRAM SUPPORT	
JINDA ROSENGART				
PO BOX 1597				16.05
NEW YORK, NY 10113				16,87
Total	******		► 3b	16,87 rm 990-PF (20)

DI GOLDENE KEYT (THE GOLDEN CHAIN), LTD.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated t	ousiness income		by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a					-
h					
c					
d					
e					-
1					-
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate: a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
8					
ab					
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0	-	0.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	0.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Accor	nlishment of I	Exempt P	urnoses	
	1				
Line No. Explain below how each activity for which incom			-A contribute	d importantly to the accomp	plishment of
the foundation's exempt purposes (other than b	y providing funds	for such purposes).			

Form 990-PF (2020) DI GOLDENE KEYT (THE GOLDEN CHAIN), LTD. 13-3849152 Page 13

Part XV	Information Re Exempt Organi		sfers to a	nd Transactions a	nd Relation	nships With Nonc	haritable	
1 Did the	e organization directly or indire		of the followin	ig with any other organizati	on described in s	ection 501(c)	Y	es No
(other	than section 501(c)(3) organi	izations) or in section	on 527, relatin	g to political organizations?	•			
a Transf	ers from the reporting founda	tion to a noncharita	able exempt or	ganization of:			1.1 - 1	
	ash							X
(2) Other assets								X
	transactions:							
(1) Sa	ales of assets to a noncharitab	le exempt organiza	ition				1b(1)	X
(2) Pt	urchases of assets from a non	icharitable exempt	organization				1b(2)	X
(3) Re	ental of facilities, equipment, c	or other assets ,				*******	1b(3)	X
(4) HE	eimbursement arrangements						1b(4)	X
(0) EC	pans or loan guarantees	abarahin ar fundrai	ioina colicitatio				1b(5)	X
c Sharin	erformance of services or mer	ling lists, other acc	ising solicitatio	nis			1b(6)	
	g of facilities, equipment, mail answer to any of the above is "							
or serv	vices given by the reporting fo n (d) the value of the goods, o	undation. If the fou	ndation receiv	ed less than fair market val	-	-		,3
a)Line no.	(b) Amount involved			e exempt organization	(d) Descrip	otion of transfers, transactions	, and sharing arrang	gements
			N/A					
					_			
					-			
					_			
					-			
			_				_	
								-
					-			
	oundation directly or indirectly ion 501(c) (other than section						Yes	X No
	" complete the following sche		GUIUN JZ7 !		*** ***********************************	*********************************	[] 165	LAB IVU
	(a) Name of orga			(b) Type of organization		(c) Description of relat	ionship	
	N/A							
			_					
10-	der penalties of perjury, I declare th	at I have examined the	is return includio	n accompanying schodulae and	statemente and to	the best of my knowledge		
	d belief, it is true, correct, and comp						May the IHS disc return with the pr	uss this reparer
Here				1	PRES	IDENT	shown below? So	ee instr.
	Signature of officer or trustee			Date	Title		LAL TES	L No
l	Print/Type preparer's nar	ne	Preparer's si		Date	Check if P	TIN	
						self- employed		
Paid	the second	COPY					P012607	96
Prepare Use Onl		HBINDER T	UNICK	& CO. LLP		Firm's EIN ► 13		
	Firm's address > ONE	E PENN PL	AZA -	SUITE 3200				
	NEV	VYORK, N	Y 1011	9-0002		Phone no. 212	-695-50	03

Form 8868	Application for Automatic Extension of Time To File an
(Rev. January 2020)	Exempt Organization Return

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or	Name of exempt organization or other filer, see instru	uctions.		Taxpayer	identification r	number (TIN)
print	DI GOLDENE KEYT (THE GOLDE	13-3849152				
File by the due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, s PO BOX 1597	see instruc	tions.			
instructions.	City, town or post office, state, and ZIP code. For a f NEW YORK, NY 10113	oreign ado	lress, see instructions.			
Enter the	Return Code for the return that this application is for (fi	le a separa	ate application for each return)			0 4
Applicati	on	Return	Application			Return
Is For		Code	Is For			Code
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990	BL	02	Form 1041-A			08
Form 472	0 (individual)	03	Form 4720 (other than individual)			09
Form 990	PF	04	Form 5227			10
Form 990	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	T (trust other than above) THE ORGANIZATI	06	Form 8870			12
box ▶ [1 I red the ▶[▶[s for a Group Return, enter the organization's four digit . If it is for part of the group, check this box . quest an automatic 6-month extension of time until organization named above. The extension is for the org calendar year or tax year beginning JUL 1, 2020 e tax year entered in line 1 is for less than 12 months, of Change in accounting period	and atta	ach a list with the names and TINs of the names and TINs of the names and TINs of the name of t	f all memb	ers the extension of th	on is for.
	is application is for Forms 990-BL, 990-PF, 990-T, 4720 nonrefundable credits. See instructions.	, or 6069,	enter the tentative tax, less	3a	\$	0.
	is application is for Forms 990-PF, 990-T, 4720, or 6069 mated tax payments made. Include any prior year over			3b	\$	0.
c Bala	ance due. Subtract line 3b from line 3a. Include your page FTPS (Electronic Federal Tax Payment System). Se	ayment wit	h this form, if required, by	30	s	0.
Caution: instructior	If you are going to make an electronic funds withdrawa	l (direct de	bit) with this Form 8868, see Form 8		nd Form 8879-1	

OMB No. 1545-0047

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2020

er

Name of the	organization
-------------	--------------

Organization type (check one):

n							Employer identification numb
DI	GOLDENE	KEYT	(THE	GOLDEN	CHAIN),	LTD.	13-3849152
ck on	e):						

Filers of:	Section:
Form 990 or 990-EZ	501(c)() (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization

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Employer identification number

13-3849152

DI GOLDENE KEYT (THE GOLDEN CHAIN), LTD.

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	ALBERT AND CLAIRE ZUCKERMAN 234 WEST 22ND STREET NEW YORK, NY 10011	\$15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	PAUL AND RODICA BURG161 EAST 71ST STREETNEW YORK, NY 10021-4322	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3	MARINUS AND MINNA B. KOSTER FOUNDATION ATTN. KATHERINE BYRNE, PNC PLAZA, 300 FIFTH AVE., 27TH FLOOR PITTSBURGH, PA 15222	\$8,000.	Person X Payroll I Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4	SPINGOLD FOUNDATION C/O PRYOR CASHMAN LLP 7 TIMES SQUARE NEW YORK, NY 10036-6569	\$6,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5	ELLEN AND DON WALKER 747 ORIENTA AVENUE MAMARONECK, NY 10543	\$6,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
6	MARC CRAWFORD LEAVITT 39-75 46TH STREET SUNNYSIDE, NY 11104	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

	DENE KEYT (THE GOLDEN CHAIN), LTD.		3-3849152	
Part II I	Noncash Property (see instructions). Use duplicate copies of F	Part II if additional space is needed.		
(a) No. from Part I	(b) (c) Description of noncash property given (See instruction)		(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	

Employer identification number

(a) (c) No. (b) FMV (or estimate) from Description of noncash property given (See instructions.) Part I \$ 023453 11-25-20

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

(d)

Date received

\$

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization

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	rm 990, 990-EZ, or 990-PF) (2020)	1		Page 4
Name of organi	zation		•	Employer identification number
DI GOLDE	ENE KEYT (THE GOLDEN	CHAIN), LTD.		13-3849152
Part III Ex fro cor Us	clusively religious, charitable, etc., contribut om any one contributor. Complete columns (a mpleting Part III, enter the total of exclusively religious, se duplicate copies of Part III if additional	tions to organizations described in s) through (e) and the following line en charitable, etc., contributions of \$1,000 or	tny For organizations	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
-		(e) Transfer of gif		
_	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
- =				
		(e) Transfer of gif	t	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee
(a) No.			······	
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
		(e) Transfer of gif		
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(4) Doo	cription of how gift is held
Part I		(c) Use of girt		
	Transferee's name, address, at	(e) Transfer of gif nd ZIP + 4		ansferor to transferee
-				

023454 11-25-20

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

13-3849152

OTHER E	XPENSES	STATEMENT 1		
(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
28.	0.	0.	28.	
28.	0.	0.	28.	
	(A) EXPENSES PER BOOKS 28.	EXPENSES NET INVEST- PER BOOKS MENT INCOME 28. 0.	(A)(B)(C)EXPENSESNET INVEST- MENT INCOMEADJUSTED NET INCOME28.0.0.	