Form 990-PF

Department of the Treasury Internal Revenue Service

~:perwork Reduction Act Notice, see Instructions.

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

Do not enter social security numbers on this form as it may be made public.
 ▶Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0052 2017

Form 990-PF (2017)

For calendar year 2017 or tax year beginning , and ending A Employer Identification number Name of foundation Moore Family Trust 23-7181994 Telephone number (see instructions) Number and street (or P.O. box number if mail is not delivered to street address) 215 South Monroe Street, Ste. 400 850-681-6810 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here FL 32301 Tallahassee D 1. Foreign organizations, check here G Check all that apply: Initial return Initial return of a former public charity Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation X Cash Accrual Stair market value of all assets at J Accounting method: If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Other (specify) end of year (from Part II, col. (c), 1,343,092 (Part I, column (d) must be on cash basis.) eline 16) ▶ \$ (d) Disbursements Analysis of Revenue and Expenses (The total of (c) Adjusted net for charitable (b) Not investment amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).) enses books Ö (cash basis only) 277,042 Contributions, gifts, grants, etc., received (attach schedule) Check ► If the foundation is not required to attach Sch. 8 Interest on savings and temporary cash investments 2,110 2,110 1,845 1,845 Dividends and interest from securities Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 277.903 Gross sales price for all assets on line 6a 277,903 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications Gross sales less returns and allowances 10a Less: Cost of goods sold Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) Stmt 1 2.776 2.776 561,676 284,634 12 Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc. 13 Other employee salaries and wages 14 Pension plans, employee benefits 15 Legal fees (attach schedule) 16a RECEIVED Accounting fees (attach schedule) Stmt 2 1,100 1,100 Other professional fees (attach schedule) 17 Taxes (attach schedule) (see instructions) Stmt 3 5.093 OGDEN. UT Depreciation (attach schedule) and depletion Occupancy Travel, conferences, and meetings Printing and publications Other expenses (att. sch.) Stmt 4 32,986 29,961 2,651 Total operating and administrative expenses. Add lines 13 through 23 39,179 29,961 3,751 Contributions, giffs, grants paid 54,576 25 54,576 Total expenses and disbursements. Add lines 24 and 25 . 93.755 29.961 0 58,327 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements 467,921 Net investment Income (if negative, enter -0-) 254,673 Adjusted net income (if negative, enter -0-).

**	eart.	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	E	nd of y	ear	
33336	*********	a nound perior of the William Chap, for a mendeductor,	(a) Book Value	(b) Book Value		(c) Fair Market	Value
1	1	Cash – non-interest-bearing	<u> </u>				
-1	2	Savings and temporary cash investments	24,925	883,4	39	883	,439
1	3	Accounts receivable					
-	_	Less: allowance for doubtful accounts ▶					
١	4	Pledges receivable ▶					
1	_	Less: allowance for doubtful accounts ▶					
-	5	Grants receivable			_		
-	6	Receivables due from officers, directors, trustees, and other					
-		disqualified persons (attach schedule) (see			- 1		
- [_	instructions) Other notes and loans receivable (att. schedule) ▶ See Wrk 677					
-	7		285	£	77		677
		Less: allowance for doubtful accounts ▶	265		''		677
믦	8	Inventories for sale or use	87		_		
8	9	Prepaid expenses and deferred charges	- 67		-		
٦	10a	Investments – U.S. and state government obligations (attach schedule)			-		
	b	Investments – corporate stock (attach schedule)			+		
	с 11	Investments – corporate bonds (attach schedule)					
	"	Investments – land, buildings, and equipment: basis ▶ Lass: accumulated depreciation (attach sch.) ▶			******		********
1	12						 -
1	13	Investments – mortgage loans Investments – other (attach schedule) See Statement 5	845,168	458,9	76	459	,976
1	14	Land buildings and englowers basis	2001-01-01-01-01-01-01-01-01-01-01-01-01-			100	
ı		Land, buildings, and equipment: basis			******		************
	15	Less: accumulated depredation (attach sch.) ▶ Other assets (describe ▶)			_		
	16	Other assets (describe ►) Total assets (to be completed by all filers – see the			_		
		instructions. Also, see page 1, item I)	870,465	1,343,0	92	1,343	.092
7	17	Accounts payable and accrued expenses		4,7	1000		
1	18	Grants payable					
8	19	Deferred revenue					
Ĭ	20	Loans from officers, directors, trustees, and other disqualified persons					
흶	21	Mortgages and other notes payable (attach schedule)					
7	22	Other liabilities (describe ▶ :)					
1	23	Total liabilities (add lines 17 through 22)	0	4,7	06		
1		Foundations that follow SFAS 117, check here					
9		and complete lines 24 through 26 and Ilnes 30 and 31.	}				
	24	Unrestricted					
	25	Temporarily restricted					
or rund Balar	26	Permanently restricted .	870,465	1,338,3	86		
틹		Foundations that do not follow SFAS 117, check here					
듼		and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds			_₩		
ASSeta	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
	29	Retained earnings, accumulated income, endowment, or other funds			₩		
	30	Total net assets or fund balances (see instructions)	870,465	1,338,3	86		
	31	Total liabilities and net assets/fund balances (see					
222		instructions)	870,465	1,343,0	92		
	2016						
1		net assets or fund balances at beginning of year – Part II, column (a), line 30 (must a		[
_	end-o	f-year figure reported on prior year's return)		····	1		<u>,465</u>
2	∟nter	amount from Part I, line 27a		·····	2	467	<u>,921</u>
3	Other	increases not included in line 2 (itemize)		·····	3	1 220	20-
		nes 1, 2, and 3			4	1,338	,300
5	Decre	ases not included in line 2 (itemize)		····	5	1 220	205
0	ISJOI	net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b),	<u>une 30 </u>		6	1,338	,360

Form 990-PF (2017)

(a) List and describe	the kind(s) of property sold (for example, real estate,	iii iiicome	(b) How acquired P - Purchase D - Popation	(c) Date acqu (mo., day,)		
1a 10 G+G LLC			P	12/31/	11 03/15/17	
b						
С						
<u>d</u>		·- ·-				
•						
(e) Gross sales price	(1) Depreciation allowed (or allowable)	10)		«	(h) Gain or (lose) (e) plus (l) minus (g))	
a 1,120,884			842,981		277,903	
b						
С						
<u>d</u>		 -				
Complete only for sesets showing	asin in column (h) and award by the foun	dation on 12/31/60				
(i) FMV as of 12/31/89	(I) Adjusted basis (Id) Syress of col (I)					
a					277,903	
<u>b</u>	•					
С						
d ·						
•						
2 Capital gain net income or (net cap	oital loss) 4			2	277,903	
3 Net short-term capital gain or (loss		unt 1, 1810 !	.]			
	(a) List and Gescribs the shotil) of property sold (for example, real states, Polymore Polymore) (b) How example, real states, Polymore Polymore) (c) GHG LLC 10 GHG LLC (b) GHG LLC (c) Gross sakes price (f) Depreciation aboved (or allowable) (g) Gross sakes price (g) G					
Part I, line 8				3		
Part V Qualification Un	der Section 4940(e) for Reduce	ed Tax on Net	<u>Investment incor</u>	ne		
f section 4940(d)(2) applies, leave this	part blank.				Yes X No	
 						
	ch column for each year; see the instruct	ions before making			(d)	
Base period years	•	Net vai	* *	,	Distribution ratio (coi (b) divided by coi (c))	
		. 780	878,		0.090786	
			901,		0.049519	
2014			953,		0.136441	
2013			1,029,		0.040937	
2012	<u>. </u>	,567	1,058,	756	0.034538	
2 Total of line 1, column (d)				2	0.352221	
3 Average distribution ratio for the 5-	year base period - divide the total on line	2 by 5.0, or by the		··· [
number of years the foundation has	s been in existence if less than 5 years $_{\dots}$			3	0.070444	
4 Enter the net value of noncharitable	: e-use assets for 2017 from Part X, line 5			4	1,091,691	
5 Multiply line 4 by line 3				. 5	76,903	
6 Enter 1% of net investment income	(1% of Part I, line 27b)			. 6	2,547	
					79,450	
				1 1	58,327	
If line 8 is equal to or greater than I	ine 7, check the box in Part VI, line 1b, ar	d complete that pa	rt using a 1% tax rate.	See the		

	Excise Tax Based on investment income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)	•		
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			*
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	•	5,0	93
	here ▶ ☐ and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of			
	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	<u> </u>		_0
3	Add lines 1 and 2		5,0	<u> 193</u>
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-		5,0	93
6	Credits/Payments:			
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 387			
b	Exempt foreign organizations – tax withheld at source			
C	Tax paid with original return 6c 4,763			
d	Backup withholding erroneously withheld 6d			### F^
7	Total credits and payments. Add lines 6a through 6d		<u>5,1</u>	<u>.50</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			<u> </u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<u>57</u>
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax > 57 Refunded > 11	 -		—
1a	Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
Ia	neutrinate es intercena in con relitient connected	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	· ''	\dashv	
	Instructions for the definition	16		x
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c	*******	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers. > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	*******	X
_	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	43		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	À 4b	一	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	\neg	X
_	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	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	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	Ret.			
ь	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	w0000000
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 2017 or the taxable year beginning in 2017? See instructions for Part XIV. If "Yes,"	[]		~000000
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		\neg	
	names and addresses	10	X	

	Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		1	
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			l
	person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	Ĺ
	Website address ▶ N/A			
14	Website address ► N/A The books are in care of ► Douglas L. Mannheimer Telephone no. ► 850-	681-	681	0
	215 South Monroe Street, Ste 400			
	Located at ▶ Tallahassee FL ZIP+4 ▶ 3230	1-18	04	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check nere			▶ [
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
the second	the foreign country ▶			
	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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.)			
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	1 <u>b</u>		
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2017?	1c		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)):			
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2017?			
	If "Yes," list the years ▶ 20 , 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		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶ 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2017.)	3 b		X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X
	· · · · · · · · · · · · · · · ·	Form 99	0-PF	(2017)

Form 990-PF (2017)

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

and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. See instructions. If none, e		
(a) Name and address of each parson peld more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		_
Part X-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the lax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A		
2		
3		
4		
,		
Part XXB Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

	Minimum Investment Return (All domestic foundations must complete this part. Foreign	n founda	ations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		4 400 044
a	Average monthly fair market value of securities	18	1,108,316
þ	Average of monthly cash balances	1b	0
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	1,108,316
0	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		_
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	1,108,316
4	Cash deemed held for charitable activities. Enter 1%% of line 3 (for greater amount, see	1	
	*instructions)	4	16,625
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,091,691
6	Minimum investment return. Enter 5% of line 5	6	54,585
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f	oundati	ons
	and certain foreign organizations check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	54,585
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	5,093
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	49,492
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	49,492
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	49,492
*****		 .	
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	58,327
b	Process and the different of the Astal Society Process Control of the Control of	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
-		2	
3	Amounts set aside for specific charitable projects that satisfy the:		
-		3a	
a	Suitability test (prior IRS approval-required) Cash distribution test (attach the required schedule)	3b	
D A	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	58,327
4	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	 	30,321
5		5	n
•	Enter 1% of Part I, line 27b. See instructions Adjusted qualifying distributions. Subtract line 5 from line 4	6	58,327
6	Adjusted qualifying distributions. Subtract line 5 from line 4		
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	<i>7</i> 11	
	qualifies for the section 4940(e) reduction of tax in those years.		

Form 990-PF (2017)

Part XIII	Undistributed Income (see instr	ructions)			
		(a)	(b)	(c)	(d)
	ole amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017 49,49
Undistribu	ted income, if any, as of the end of 2017:				
	=				
h Total for n	unt for 2016 only , 20 , 20 , 20	• • • • • • • • • • • • • • • • • • • •			
	stributions carryover, if any, to 2017:	_			
	2				
b From 201:	3				
c From 2014	4				
	5				
e From 2010	B	36,567			
f Total of lir	nes 3a through e	36,56	7		
	distributions for 2017 from Part XII,				
line 4: ▶	\$58,327				
a Applied to	2016, but not more than line 2a				
b Applied to	undistributed income of prior years				
(Election r	equired – see instructions)				
	distributions out of corpus (Election				
required -	see instructions)				
	2017 distributable amount				49,4
	amount distributed out of corpus				
Excess dia	stributions carryover applied to 2017				
(If an amo	unt appears in column (d), the same				
amount m	ust be shown in column (a).)				
Enter the	net total of each column as				
indicated	below:				
a Corpus. A	dd lines 3f, 4c, and 4e. Subtract line 5	45,402	2		
Prior year	s' undistributed income. Subtract				
line 4b from	m line 2b				
	amount of prior years' undistributed				
income for	r which a notice of deficiency has				
been issur	ed, or on which the section 4942(a)				
tax has be	en previously assessed				
d Subtract li	ne 6c from line 6b. Taxable				
amount -	see instructions				
• Undistribu	ted income for 2016. Subtract line				
	ne 2a. Taxable amount – see				
	s				
	ted income for 2017. Subtract lines				
	rom line 1. This amount must be				
distributed					
	reated as distributions out of corpus				
-	requirements imposed by section				
	F) or 4942(g)(3) (Election may be	,			
required	-see instructions)				
	stributions carryover from 2012 not				
	line 5 or line 7 (see instructions)				
	istributions carryover to 2018.	4.5			
	nes 7 and 8 from line 6a	45,402	2		
Analysis o					
Excess fro	om 2013				
Excess fro					
Excess fro	om 2015				
Excess fro	om 2016	36,567 8,835			

Supplementary Information (continued) 3 Grants and Contributions Pald During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to any foundation manager Purpose of grant or status of Amount contribution reciplent Name and address (home or business) or substantial contributor a Paid during the year Seminole Boosters, Inc. PO Box 1353 N/A Non-Profit Tallahassee FL 32302 athletic facilities and scholarships 54,000 Athletes Care Association Inc. 401 SW Bunker St. N/A Non-Profit Madison FL 32340 athletic award 500 Pass through from Partnerships Forms 1065 Schedules K-1 Peacock Re, LLC 265 Drivers Way : N/A Hardeeville SC 29927 54 Tallqueso, LLC 215 S. Monroe St. #400 Tallahassee FL 32301 22 **▶** 3a 54,576 Total b Approved for future payment N/A ▶ 3b Total

	017) Moore Family Trust	l141		<u>-7181994</u>	<u> </u>	Pag
	Analysis of Income-Producing Act					
r gross amo	ounts unless otherwise indicated.	(a) Business code	d business income (b) Amount	(c) Exclusion	(d) Amount	(e) Related or exemp function income
_	rvice revenue:			code		(See instructions
		-				
Fees an	nd contracts from government agencies					
nterest on s	o dues and assessmentssavings and temporary cash investments			14	2,110	
Dividends a	nd interest from securities			14	1,845	
let rental in	ncome or (loss) from real estate:					
Debt-fin	anced property vt-financed property			-		
let rental in	ncome or (loss) from personal property					
Other invest Bain or (los:	tment income s) from sales of assets other than inventory			18	277,903	·
let income	or (loss) from special events or (loss) from sales of inventory					 -
Other reven	ue: a					
					2,776	
	Statement 6			· ·		
-	Statement 6					
				0	294 634	
d	id columns (b), (d), and (e)			0	284,634 13	284,
Subtotal. Add I	Id columns (b), (d), and (e) line 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.)					284,
Subtotal. Add I worksheet	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	-
Subtotal. Add I worksheet art VISB ine No.	Id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	
Subtotal. Add I worksheet itt VIEB ine No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	
Subtotal. Add I worksheet itt VIEB ine No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	
Subtotal. Add I worksheet itt VIEB ine No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	
Subtotal. Add I worksheet ict X VI B ne No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	
Subtotal. Add I worksheet int XVIB ne No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	
Subtotal. Add I worksheet int XVIB ne No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	
Subtotal. Add I worksheet ict X VI B ne No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	
Subtotal. Add I worksheet int XVIB ne No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	
Subtotal. Add I worksheet int XVIB ne No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	
Subtotal. Add I otal. Add I worksheet int XVIB ne No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	
Subtotal. Add I worksheet int XVIB ne No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	
Subtotal. Add I worksheet ict X VI B ne No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	
Subtotal. Add I worksheet ict X VI B ne No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	-
Subtotal. Add I worksheet ict X VI B ne No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	
Subtotal. Add I worksheet itt VIEB ine No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	-
Subtotal. Add I worksheet itt VIEB ine No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	-
Subtotal. Add I worksheet	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	
Subtotal. Add I worksheet art VISB ine No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	-
Subtotal. Add I worksheet itt VIEB ine No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	-
Subtotal. Add I worksheet art VISB ine No.	id columns (b), (d), and (e) ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income is	complishme	ent of Exempt umn (e) of Part XVI-	Purposes -A contributed in	mportantly to the	-

Part		Information Regardate	_	insfers To and	i Transactio	ns and Relat	ionships Witl	n Noncharitable	₽		<u> </u>
in on	d the orga section 50 ganizations	nization directly or indication directly or indication (other than section)	ectly engage on 501(c)(3) c	organizations) or in	section 527, rel		escribed			Yes	No
									1a(1)		X
(2)	•	sets							1a(2)		X
		assets to a noncharita	ble exempt o	rganization					1b(1)	***************************************	X
(2)	Purchas	es of assets from a no	ncharitable e	xempt organization	۱				1b(2)		X
(3)	Rental o	f facilities, equipment,	or other asse	ets					1b(3)		X
(4)	Reimbur	rsement arrangements							1b(4)		X
(5)	Loans o	r loan guarantees							1b(5)		X
(6)) Perform	ance of services or me	mbership or	fundraising solicitat	tions				1b(6)		X
		icilities, equipment, ma							1c		X
		r to any of the above is	•	_			-				
		goods, other assets, or	_								
	iue in any ine no.	transaction or sharing (b) Amount involved		; SNOW IN COIUMN ((ne of noncharitable exemp				received. ensections, and sharing ar	TRACEMENT	rte .	
N/A	me no,	(B) Amount involved	(c) (480)	O NORCHERIADO GASTO	pr organization	(0) 54	acipion or valuable, u	213000010, and analog 2	- yana		
24/22								-			
								-			
								· · · · · · · · · · · · · · · · · · ·			
											
				·							
				·							
			<u> </u>								
		<u></u>									
de	scribed in	ation directly or indirect section 501(c) (other t	han section 5			exempt organizati	ons			s X	No
		a) Name of organization		(b) Type of o	organization		(c) Descrip	tion of relationship			
							<u></u>				
	· -			<u> </u>		1					
1	Under pen	alties of perjury, I declare the	it I have examinated the control of	ed this return, including : an taxpaver) is based o	accompanying scheme on all information of v	dules and statements which preparer has an	, and to the best of my y knowledge.	knowledge and belief, It i	s true,		
Sign Here				1 4		مار		May the IRS disc with the preparer See instructions.	show <u>n b</u> e] No
	L /		\mathcal{V}	ann o	90 111	10119	Trus	tee			
	Signa	iture of officer or trustee			Det	,	Title		-		
	Print/Tvs	pe preparer's name	/		Preparer's signatu			Date		Check	
Paid		on L. Skelton	, Jr.	•	132.	Shells	7	6-28	-19	self-em	pioyed
Prepare	Firm's n	01-14		yant, Bry	ant & S	carboro,	P.A.	PTIN PO	1050	186	<u>;</u>
Use Onl	v ——			wood Driv				Firm's EIN ▶ 59	-348	319	7

1320 Thomaswood Drive

Tallahassee, FL 32308-7939

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

2017

Employer identification number Name of the organization 23-7181994 Moore Family Trust Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 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** X 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 331/3% 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, 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

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).

Employer Identification number 23-7181994

Parti	Contributors (see instructions). Use duplicate copies of Pa	irt I if additional space is nee	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Coyle E. Moore Trust 215 South Monroe Street #400 Tallahassee FL 32301	s 277,042	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ <u></u>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number 23-7181994

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I 2.5% interest in partnership CTI-2 LLC 390 N. Orange Ave Ste. 1400 1 Orlando, Florida 32801 s 150,000 01/01/17 (a) No. (c) (d) (b) FMV (or estimate) from **Date received** Description of noncash property given Part I (See instructions.) (c) (a) No. (d) (b) from FMV (or estimate) Description of noncash property given Date received (See instructions.) Part I (c) (a) No. (d) (b) from FMV (or estimate) Date received Description of noncash property given (See instructions.) Part I (a) No. (c) (b) FMV (or estimate) from Date received Description of noncash property given (See Instructions.) Part I (c) (a) No. (d) (b) FMV (or estimate) from **Date received** Description of noncash property given (See instructions.) Part I

	,	•	Other Notes	and Loans Receiv	able		0045
Form	990-PF	For calendar year 2	017, or tax year beginn	ning	, and ending		2017
lame			OTT, OF LAX YEAR DESIRE		, and chang	Employer Ide	ntification Number
Moo	re Family	Tropie +				23-7181	1004
MOO	re ramily	ILUBC				25 /202	1934
For	m 990-PF,	Part II, Li	ne 7 - Addi	tional Informa	ation		
		Name of borrower			Relationship to disqu	ualified person	
	oan Recei						
2) 3)		<u> </u>					
3) 4)				·			
5)	·						
<u>6)</u>	·						
7) 8)							
9)							
10)							
							1.4
	Original amour borrowed	Date of loa	Maturity n date		Repayment terms		Interest rate
1)							
2)							-
3) 4)		١,					
5)							
6)							
<u>7)</u>							
8) 9)							
10)							
	8-				Purpose of	loan	
1)		curity provided by borrow	<u>er</u>		-uipose oi	IOBII	
2)		-					
3)							
<u>4)</u>							
5) 6)							
7)	-						
В)							
9)					·	<u> </u>	
10)							
	Consider	ation furnished by lender		Balance due at beginning of year	Balance due at end of year	Fai	r market value
1)				285		577	677
2)		•					
3) 4)					 	 	
*) 5)		··········					
B) ·							
7)							
B)							
9) 10)					<u> </u>		
Totals				285		77	677

.

Federal Statements	Other Income	Revenue per Net Investment Adjusted Net Books Income come come come come come come come	62 2,776 \$ 2,776	990-PF, Part I, Line 16b - Accounting Fees	Net Adjusted Charitable Investment Net Purpose	s 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Form 990-PF, Part I, Line 18 - Taxes	Net Adjusted Charitable Investment Net Purpose	\$. \$	0	Part I, Line 23 - Other Expenses	Net Adjusted Charitable Investment Net Purpose	у. У.		2,651	7,309	21,596	. ·
23-7181994	Statement 1 - Fo	Description Section 1231 gain	other income Total	Statement 2 - Form		CPA preparation of Form 990-PF \$ Total	Statement 3	Description	Excise tax on 2017 \$ investment income	Total	Statement 4 - Form 990-PF	Description	· ·	Expenses Maintenance of athletic facility memorial	and related expense Ordinary loss from limited	liability companies	net rental 1033 iron limited liability compani	

Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses (continued)

Charitable Purpose	, w	:	\$ 2,651
Adjusted Net	٠,		o
Net Investment	\$ 1,056		\$ 29,961
Total	\$ 1,056	374	\$ 32,986
Description	Portfolio deduction from limited liability company	Non deductible expense from limited liability company	Total

Statement 5 - Form 990-PF, Part II, Line 13 - Other Investments

Fair Market Value	w	129,946	91,786 237,244	\$ 458,976
Basis of Valuation				•
End of Year	\$	129,946	91, 786	\$ 458,976
Beginning of Year	φ.	842,168		\$ 845,168
Description	ir es pr	10 G+G LLC CT:-2 LLC	Taliquesco LLC Peacock RE LLC	Total

23-718,1994 •

Federal Statements

Statement 6 - Form 990-PF, Part XVI-A, Line 11 - Other Revenue

Description					
	Business Code	Unrelated Amount	Exclusion Code	Exclusion Amount	Related Income
Pass through	\$		\$		\$
from partnership	•		τ		•
Peacock Re LLC				•	
Section 1231 gain			18	2,714	
Ten G+G LLC				2,714	
other income			1.4	62	
Total .	s __		_ 14 0 \$	62 2,776	\$0

Federal Statements

Form 990-PF - Reason for Amending Return

.Description

Return amended to reflect amended Schedule K-1 (Form 1065) received in June 2019 from TALLQUESO LLC 82-1615571

Net changes

Ordinary (loss) reduced Interest income reduced Non deductible expense increased

(3750) (374)

Net reduction

(3195)