

# Extended to November 15, 2018 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.

For	r calendar year 2017 or tax year beginning		, and ending		
Na	ame of foundation		-	A Employer identification	number
T	The <u>Lee Foundation</u>			59-6148803	
	umber and street (or P O box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number	
_ <u>P</u>	P.O. Box 2113			407~857-28	35
	ity or town, state or province, country, and ZIP or foreign po	stal code		C If exemption application is p	ending, check here
	Orlando, FL 32802			)	
G (	Check all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
	Final return	Amended return		2 Foreign organizations me	eting the 85% test
_	Address change	Name change	<del></del>	2 Foreign organizations me check here and attach co	mputation
H (	Check type of organization: X Section 501(c)(3) exe			E If private foundation sta	tus was terminated
上		ther taxable private founda		under section 507(b)(1)	(A), check here
	Fair market value of all assets at end of year   J   Accounting	=	Accrual	F If the foundation is in a	
•	from Part II, col. (c), line 16)	er (specify)		under section 507(b)(1)	(B), check here
	\$ 2,036,259. (Part I, column	(d) must be on cash basis	S.)		<del></del>
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	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	22,500.			
	2 Check If the foundation is not required to attach Sch. B				
	Interest on savings and temporary cash investments	15,070.	15,070.	15,070.	Statement 1
	4 Dividends and interest from securities	35,890.	35,890.	35,890.	Statement 2
	5a Gross rents				
	b Net rental income or (loss)				
ø	6a Net gain or (loss) from sale of assets not on line 10	32,378.			
Š	b Gross sales price for all 217,006.				
Revenue	7 Capital gain net income (from Part IV, line 2)		32,378.		
Œ	8 Net short-term capital gain			0.	
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold		<del></del>		
	c Gross profit or (loss)				<b> </b>
	11 Other income		<del></del>		
_	12 Total Add lines 1 through 11	105,838.	83,338.	50,960.	
	13 Compensation of officers, directors, trustees, etc	0.	<u> </u>	0.	0.
	14 Other employee salaries and wages				
ņ	15 Pension plans, employee benefits		DEOF	/FD	
nse	16a Legal fees		RECEIV	<u>/ED</u>	<del></del>
g	b Accounting fees		<u> </u>	2019	<del> </del>
Ü	c Other professional fees		8 MAY 2 9	2018   <del>[</del> ]	
Ě	17 Interest		<u> </u>		<b></b>
stra	18 Taxes		OGDEN		
Ë	19 Depreciation and depletion		CODEN	<del>                                     </del>	
Щ	20 Occupancy 21 Travel, conferences, and meetings				<del></del>
þ	21 Travel, conferences, and meetings 22 Printing and publications				<del> </del>
ga	22 23 Other expenses Stmt 3	202.	202.	202.	202
ţi	24 Total operating and administrative	402.	202.	404.	
Operating and Administrative Expenses	expenses Add lines 13 through 23	202.	202.	202.	202
Ö	25 Contributions, gifts, grants paid	74,611.		404.	74,611
	26 Total expenses and disbursements.	, <del>=</del> , <del>+</del> , <del>+</del> + + •			, =, 011
	Add lines 24 and 25	74,813.	202.	202.	74,813
_	27 Subtract line 26 from line 12:	, = , 0 x 3 •	202•	202.	/ - / - / - / - / - / - / - / - / - / -
	2 Excess of revenue over expenses and disbursements	31,025.			
	b Net investment income (if negative, enter -0-)	31,023.	83,136.		
	c Adjusted net income (if negative, enter -0-)		<u> </u>	50,758.	
	2501 01-03-18 LHA For Paperwork Reduction Act Notice,	see instructions			Form <b>990-PF</b> (2017

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P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of year				
_	di r	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash - non-interest-bearing	19,731.	42,843.	42,843.			
	2	Savings and temporary cash investments						
	3	Accounts receivable						
	١.	Less: allowance for doubtful accounts ▶						
	4	Pledges receivable ►						
	_	Less: allowance for doubtful accounts ▶						
	5	Grants receivable						
	6	Receivables due from officers, directors, trustees, and other	İ					
	,	disqualified persons						
	7	Other notes and loans receivable  Less: allowance for doubtful accounts  0.	208,707.	193,351.	193,351.			
	8	Inventories for sale or use	200,707.	193,331.	193,331.			
Assets	۵	Prepaid expenses and deferred charges						
As	10a	Investments - U.S. and state government obligations						
	í	Investments - corporate stock						
	1	Investments - corporate bonds						
	1	Investments - land, buildings, and equipment, basis						
		Less accumulated depreciation						
	12	Investments - mortgage loans						
	13	Investments - other Stmt 4	1,268,316.	1,291,585.	1,800,065.			
	14	Land, buildings, and equipment: basis ▶						
		Less accumulated depreciation						
	15	Other assets (describe ►)						
	16	Total assets (to be completed by all filers - see the						
		instructions Also, see page 1, item I)	1,496,754.	1,527,779.	<u>2,036,259.</u>			
	17	Accounts payable and accrued expenses						
	18	Grants payable						
ies	19	Deferred revenue						
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons						
Lia	21	Mortgages and other notes payable	<del></del>					
	22	Other liabilities (describe )		<del></del>				
	23	Total liabilities (add lines 17 through 22)	0.	0.				
	20	Foundations that follow SFAS 117, check here						
	ļ	and complete lines 24 through 26, and lines 30 and 31.						
es	24	Unrestricted		İ				
Net Assets or Fund Balances	25	Temporarily restricted						
Bal	26	Permanently restricted						
P		Foundations that do not follow SFAS 117, check here						
딥	1	and complete lines 27 through 31.						
S	27	Capital stock, trust principal, or current funds	0.	0.				
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.				
Ϋ́	29	Retained earnings, accumulated income, endowment, or other funds	1,496,754.	1,527,779.				
Š	30	Total net assets or fund balances	1,496,754.	1,527,779.				
	1			1				
	31	Total liabilities and net assets/fund balances	1,496,754.	1,527,779.				
P	art	III Analysis of Changes in Net Assets or Fund Ba	lances					
_		net assets or fund balances at beginning of year - Part II, column (a), line 30	<u> </u>	<del></del>				
1		• •	J		1 406 754			
2	•	it agree with end-of-year figure reported on prior year's return) amount from Part I, line 27a		2	1,496,754. 31,025.			
		r increases not included in line 2 (itemize)	•	3	31,023.			
		lines 1, 2, and 3		4	1,527,779.			
		eases not included in line 2 (itemize)		5	0.			
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	ımn (b), line 30	6	1,527,779.			
_					Form <b>990-PF</b> (2017)			

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See the Part VI instructions.

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	art VI Excise Tax Based on Investment Income (Section 4940(a),		or 4948	- see i	nstru	ctior	<u>ıs)_</u> _
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N		- 1	1			
	Date of ruling or determination letter: (attach copy of letter if necessar		į			_	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	1	ļ <u>.</u>		L,6	<u>63.</u>
	of Part I, line 27b						
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of P	• •		1			_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others,	enter -0-)	2	<del></del>			0.
	Add lines 1 and 2		3	<b></b>		L,6	<u>63.</u>
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others,	enter -0-)	4	<del> </del>			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	<del> </del>		1,6	63.
	Credits/Payments:	1 10		ĺ			
	2017 estimated tax payments and 2016 overpayment credited to 2017	<del></del>		i			
	Exempt foreign organizations - tax withheld at source  The product of the contract of the cont		0.	{			
	Tax paid with application for extension of time to file (Form 8868)  Balance with address are application for extension of time to file (Form 8868)		0.	ļ			
	Backup withholding erroneously withheld  Tatal and the and asymptote. Add lines Co. through Cd.	<u> </u>				ı 1	0 1
	Total credits and payments. Add lines 6a through 6d  Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		7	<del> </del>	<u>·</u>	L,1	04.
	• • •		$ ightharpoonup \left  \frac{8}{9} \right $	<del> </del>			<del>79.</del>
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	<del> </del>			13.
	Enter the amount of line 10 to be: Credited to 2018 estimated tax	Refunded		-			
	rt VII-A Statements Regarding Activities			<u> </u>			<del></del>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation	or did it participate or inter	vene in			Yes	No
ıα	any political campaign?	or did it participate or litter	VOIIO III		1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? S	See the instructions for the	definition		1b		X
-	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any						
	distributed by the foundation in connection with the activities.	F					
С	Did the foundation file Form 1120-POL for this year?				1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation ▶ \$ (2) On foundation managers. ▶		0.			}	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure to					ļ	
	managers > \$0.				,	,	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		<u>X</u>
	If "Yes," attach a detailed description of the activities.					ĺ	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instruit	ment, articles of incorporati	on, or			}	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		<u>X</u> _
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		_		4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?		r	1/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		<u>X</u>
_	If "Yes," attach the statement required by General Instruction T					1	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					]	
	By language in the governing instrument, or	-4 4b-4 4b-4b-	-4-4-				
	By state legislation that effectively amends the governing instrument so that no mandatory directions in the concerns in	ctions that conflict with the	state law			v	
7	remain in the governing instrument?  Old the foundation being at least \$5,000 in secrets at any time during the year? If "Yea." complete D	lart II and (a) and Dort VI			7	X	—
′	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete P	art II, COI. (C), AIIU MAIT XV			<del>                                     </del>	^	
Да	Enter the states to which the foundation reports or with which it is registered. See instructions.	None					
Ja	Enter the states to which the foundation reports of with which it is registered one instructions.	110116				}	
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorne	ev General (or designate)					
Ü	of each state as required by General Instruction G? If *No," attach explanation	See Stat	ement	5	   8b		X
9	is the foundation claiming status as a private operating foundation within the meaning of section			_			M
-	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete				9	X_	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing		Stmi	5 6	10	X	`
					m <b>990</b>	-PF	(2017)

Part VII-A 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 meaning of			
section 512(b)(13)? If "Yes," attach schedule. See instructions	11	1	X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileg	es?		
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		
Website address ► N/A	عنب)		
14 The books are in care of ► Ann Gyde  Telephone no. ► 40	7-857-	2835	5
	4 ▶3282		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	, <u>, , , , , , , , , , , , , , , , , , </u>		• [ ]
and enter the amount of tax-exempt interest received or accrued during the year	1	N/A	
16 At any time during calendar year 2017, 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		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	10	<u></u>	<del> </del>
foreign country			1
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			<del></del>
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):	-	1.00	1.00
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Z No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		1	
a disqualified person?	⊒ No		
(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	2 110	1	
for the benefit or use of a disqualified person)?	Z No		
(6) Agree to pay money or property to a government official? (Exception. Check "No"	- NO		
If the foundation agreed to make a grant to or to employ the official for a period after			
	Z No	1	
	- ON -		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	46	-	x
section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	▶	+	+≏
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	· — )	1	
	4.0		x
before the first day of the tax year beginning in 2017?	<u>1c</u>	+	1
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?	Z] No	1	}
and the second of the second o	ין אוי		
If "Yes," list the years \( \) , , , , , , , , , , , , , , , , , ,			
		1	
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	J/A 2b	1	
statement - see instructions.)  c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	I/A <u>2b</u>		+
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1		
during the year?	E No		
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	יין או רב		
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		1	
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,	'		
	1/A 3b		1
			X
<ul> <li>4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?</li> <li>b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that</li> </ul>	<u> 4a</u>	+	┼^
had not been removed from jeopardy before the first day of the tax year beginning in 2017?	46		x
nac not each removed norm jeophardy beliefe the linst day of the tax year beginning in 2017.	Form 9		

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Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be I	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:			( <del></del> )	Yes	No
'(1) Carry on propaganda, or otherwise attempt to influence legislation (section	` ''		es X No	Ì	1
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir				İ
any voter registration drive?	•		es X No	Ì	
(3) Provide a grant to an individual for travel, study, or other similar purposes'		Y6	es X No		!
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		es X No	j	
4945(d)(4)(A)? See instructions			es LA NO		
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	or educational purposes, or		es X No	]	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	for the executions described		S LAJ NO		
section 53 4945 or in a current notice regarding disaster assistance? See instri	•	iii negulations	N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check h			N/A	<del>50</del>	+
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		uned			
expenditure responsibility for the grant?			es 🔲 No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).	•	1/1	,5 110		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	nav nremijims on				
a personal benefit contract?	pay promiums on		es X No	1	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?		,3 [22] 110	6b	X
If "Yes" to 6b, file Form 8870.	oroonar gonome gona aut			-	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	T Y	es X No	ļ	
b_lf "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Trusto		nagers, Highly			
Paid Employees, and Contractors					
1 List all officers, directors, trustees, and foundation managers and t				,	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Ex	pense t, other
(a) numb and address	to position	enter -0-)	compensation	allow	ances
			,		
					^
See Statement 7		0.	0.		0.
				1	
				<del></del>	
		<del> </del>		<del></del>	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		·	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(-) Company	(d) Contributions to employee benefit plans and deferred	(e) Ex	pense it, other
(a) warne and address of each employee paid more than \$50,000	` 'hour's per week devoted to position	(c) Compensation	and deferred compensation	accoun	ances
NONE					
				_	
		<u> </u>			
	· <del></del>	_		_	_
		<u> </u>			
		]			
				ļ	
			<u>L</u> _	<u></u>	
Total number of other employees paid over \$50,000	<del></del>			000 D	0
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Part VIII Information About Officers, Directors, Trustees, Foundation Management Paid Employees, and Contractors (continued)	anagers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE.	п	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		<u> </u>
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inform	ation such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		
1 <u>N/A</u>		
		0.
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	12.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		<del></del>
All office program related involutions. Occ monadations.		
Total, Add lines 1 through 3		0.

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Pa	rt X Minimum Investment Return (All domestic foundations must complete this part Foreign fou	ındatıor	ns, see instructions )
1 F	air market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1 1a	1,525,807.
b /	Average of monthly cash balances	1b	1,525,807. 31,188.
c F	air market value of all other assets	1c	
<b>d</b> 1	fotal (add lines 1a, b, and c)	1d	1,556,995.
e F	Reduction claimed for blockage or other factors reported on lines 1a and		
•	c (attach detailed explanation)	.	
2 /	Acquisition indebtedness applicable to line 1 assets	2	0.
3 5	Subtract line 2 from line 1d	3	1,556,995.
4 (	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	23,355.
5 1	let value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,533,640.
<u>6</u> !	Minimum investment return. Enter 5% of line 5	6	76,682.
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations, check here ► X and do not complete this part.)	nd certa	
1 1	Minimum investment return from Part X, line 6	1	
2a 1	ax on investment income for 2017 from Part VI, line 5		
b 1	ncome tax for 2017 (This does not include the tax from Part VI.)	] {	
c A	Add lines 2a and 2b	2c	
3 Ĺ	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4 F	Recoveries of amounts treated as qualifying distributions	4	
5 /	Add lines 3 and 4	5	
6 [	Deduction from distributable amount (see instructions)	6	
<u>7_[</u>	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Pa	rt XII Qualifying Distributions (see instructions)		
1 /	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a E	xpenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	74,813. 0.
b F	Program-related investments - total from Part IX-B	1b	0.
2 /	mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 <i>F</i>	mounts set aside for specific charitable projects that satisfy the.		
<b>a</b> S	suitability test (prior IRS approval required)	3 <u>a</u>	
<b>b</b> (	Cash distribution test (attach the required schedule)	3b	<del></del>
4 (	lualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	74,813.
5 F	oundations that qualify under section 4940(e) for the reduced rate of tax on net investment		<del></del>
П	ncome. Enter 1% of Part I, line 27b	5	0.
6 <i>F</i>	djusted qualifying distributions. Subtract line 5 from line 4	6	74,813.
N	lote: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation	qualifies	for the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (s	ee instructions)	N/A		
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2016	2016	2017
1 Distributable amount for 2017 from Part XI,				
line 7	<u> </u>			<u> </u>
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only				
b Total for prior years:				
3 Excess distributions carryover, if any, to 2017:				
<b>a</b> From 2012				
<b>b</b> From 2013				
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e				
4 Qualifying distributions for 2017 from				
Part XII, line 4: > \$				
a Applied to 2016, but not more than line 2a				
b Applied to undistributed income of prior				<del></del>
years (Election required - see instructions)				
c Treated as distributions out of corpus				<del>                                     </del>
(Election required - see instructions)				
d Applied to 2017 distributable amount		<del>                                     </del>		<del> </del>
e Remaining amount distributed out of corpus				<del>                                     </del>
5 Excess distributions carryover applied to 2017		<del>-</del>		<del> </del>
(if an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed d Subtract line 6c from line 6b. Taxable		<del></del>		<del> </del>
amount - see instructions				
e Undistributed income for 2016. Subtract line		<del></del>		<u> </u>
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)				
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7				
9 Excess distributions carryover to 2018				
Subtract lines 7 and 8 from line 6a				<u> </u>
10 Analysis of line 9:				
a Excess from 2013				1
b Excess from 2014				
c Excess from 2015				
d Excess from 2016				1
e Excess from 2017				

Form 990-PF (2017) The Lee	<u>Foundation</u>			<u> </u>	8803 Page 10
Part XIV Private Operating F	oundations (see ins	tructions and Part VII-	A, question 9)		
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for		-	<b>▶</b> <u> </u>		
<b>b</b> Check box to indicate whether the found		g <u>foundation described ir</u>		1942(j)(3) or 4942	?(j)(5) ~ ´ ´
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		r <sup>i</sup>
income from Part I or the minimum	(a) 2017	<b>(b)</b> 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					
each year listed	50,758.	41,254.	57,113.	65,/513.	214,638.
<b>b</b> 85% of line 2a	43,144.	35,066.	48,546.	55,686.	182,442.
c Qualifying distributions from Part XII,					
line 4 for each year listed	74,813.	78,415.	71,767.	74,950.	299,945.
d Amounts included in line 2c not				1	
used directly for active conduct of					
exempt activities	0.	0.	<i>""</i> 0.	0.	0.
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c	74,813.	78,415.	/ 71,767.	74,950.	299,945.
3 Complete 3a, b, or c for the					
alternative test relied upon:  a "Assets" alternative test - enter:		/	ľ		
(1) Value of all assets					0.
(2) Value of assets qualifying					-
under section 4942(j)(3)(B)(i)					0.
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed	_ 51,121.	49,386.	48,635.	43,675.	_192,817.
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					0.
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)				}	0.
(3) Largest amount of support from					
an exempt organization					0.
(4) Gross investment income					0.
Part XV Supplementary Info	rmation (Complet	e this part only i	f the foundation I	nad \$5,000 or mor	e in assets
at any time during t	he year-see instri	uctions.)			
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation who	o have contributed more t	han 2% of the total contr	ibutions received by the fo	oundation before the close	of any tax
year (but only if they have contributed m	ore than \$5,000). (See se	ction 507(d)(2).)			•
None					
b List any managers of the foundation who	o own 10% or more of the	stock of a corporation (	or an equally large portion	of the ownership of a part	nership or
other entity) of which the foundation has	s a 10% or greater interes	t.			
None					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pro	ograms:		
Check here ▶ ☐ If the foundation o				t accept unsolicited reques	ts for funds. If
the foundation makes gifts, grants, etc.,					
a The name, address, and telephone numl	per or email address of the	person to whom applica	ations should be addresse	d:	
Richard T. Lee, (407		•	·		
P.O. Box 2113, Orlan		2			
b The form in which applications should b			ould include:		
Letter stating purpo		•		proved by 50	1(c)(3)
c Any submission deadlines:					
January 31 each year					
d Any restrictions or limitations on awards	s, such as by geographical	areas, charitable fields. I	kınds of institutions, or ot	her factors:	
Major effort in Cent				•	
<b>3</b> -		- <del>-</del>			

723811 01-03-18

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year Albin Polasek Museum N/A 501(c)(3) Fund Charitable 633 Osceola Avenue Entity Activities Winter Park, FL 32789 200. Jewish Family Services N/A 501(c)(3) Fund Charitable 100 Lee Road Entity Activities Winter Park, FL 32789 100. N/A American Diabetes Association 501(c)(3) Fund Charitable 2301 Maitland Center Entity Activities Maitland, FL 32751 Fund Charitable Activities 2,000. A Place For Children N/A 501(c)(3) Fund Charitable 626 Lake Dot Circle Entity Activities Orlando, FL 32801 <u>500.</u> Fund Charitable Achievement Academy N/A 501(c)(3) 716 E Bella Vista St Entity Activities Lakeland FL 33805 1 000. See continuation sheet(s) **▶** 3a Total 74 611. b Approved for future payment None **▶** 3b **Total** 

#### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	d business income		ded by section 512, 513, or 514	(e)
zinor grood amounto amount amountaine.	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business	Amount	sion	Amount	function income
a					<del></del>
b	-				
c					
d			Ì		
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					15,070.
4 Dividends and interest from securities					15,070. 35,890.
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			<u> </u>		
7 Other investment income					
8 Gain or (loss) from sales of assets other	1		1		
than inventory		<u></u> _			32,378.
9 Net income or (loss) from special events		<del></del>	<u> </u>		
10 Gross profit or (loss) from sales of inventory		<del></del>			
11 Other revenue:					
a	_				
b	_	<del></del>			
c			<u> </u>		
d	1 1				<del></del>
e	_				<del></del>
12 Subtotal. Add columns (b), (d), and (e)		0.		0.	83,338.
13 Total Add line 12, columns (b), (d), and (e)				13	83,338.
(See worksheet in line 13 instructions to verify calculations.)					

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

Line No	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).										
3	Enables the Foundation to accomplish its charitable purpose										
4			Foundation								
8	Enables	the	Foundation	to	accomplish	its	charitable	purpose			
									<del>.</del>		
	<del> </del>										
	<del> </del>		<del></del>								
			<del></del>								
	<u> </u>		<del></del>								
	<del> </del>										
	<del> </del>						<del></del>				
	<del> </del>				<del></del>		<del></del>	<del></del>			
	<del> </del>				<del></del>		<del></del>		<del></del>		
	<del> </del>										
	<del> </del>										

Form 990-PF (2	2017) The L Information Re	ee Founda		nd Ti	ansactions a	nd Re	lationshins		614880		Page 13
	Exempt Organ										
	rganization directly or indi						bed in section 5	01(c)		Yes	No
	nn section 501(c)(3) organ			-	-	)					
a Transfers (1) Cash	from the reporting found	ation to a noncharita	Die exempt or	ganizati	on or:				10/	N	x
(1) Gasii (2) Othe									1a(		X
<b>b</b> Other train									147	1	†
	s of assets to a noncharita	ble exempt organizat	tion						1b(	n)	x
. ,	hases of assets from a no	· -							1b(	-	X
(3) Rent	al of facilities, equipment,	or other assets							1b(3	3)	X
(4) Reim	bursement arrangements								1b(-	1)	X
	s or loan guarantees								1b(	$\tau$	<u> </u>
	ormance of services or me								1b(		<u> X</u>
-	of facilities, equipment, ma								<u> 1c</u>		X
	wer to any of the above is										
	es given by the reporting for d) the value of the goods,				ınan tair market vall	ue in any	transaction or s	naring arrange	ment, snow ii	1	
(a) Line no	(b) Amount involved		noncharitable		t organization	[4	Description of tra	nsfers transaction	one and sharing	arrangem	
(0)20110	(0)////////////////////////////////////	(6)	N/A		1 0 1 gainzaion	1,"	y Description of the	aloro, traiscond	mo, and ontaing	ara gom	
						+					
						<u> </u>					
					<del></del>	<u> </u>					
	<del></del>										
						-			<del></del>		
							<del></del>				
2a Is the fou	ndation directly or indirect	tly affiliated with, or r	related to, one	or mor	e tax-exempt organi	zations d	escribed				
ın section	501(c) (other than sectio	n 501(c)(3)) or ın se	ction 527?						Ye	s 🛚 🛚 X	No
b If "Yes," c	omplete the following sch										
	(a) Name of org	anization		(b) ly	pe of organization	<u> </u>	(c) D	escription of re	elationship		
	N/A					<del> </del>					
				├		-					
				<del> </del>			<del></del>				
	penalties of perjury, I declare								May the IR	S discuss	this
Sign	elief, it is true correct, and con	plete Declaration of pro	eparer (other tha	n taxpaye	er) is based on all inform	nation of w	hich preparer has a	iny knowledge	return with	the prepa	arer
Here	// Conf if	$\omega$			5/23/18	T	rustee		_  🗀 Ye		□No
Sign	nature of officer or trustee				Date	Title		···			
	Print/Type preparer/s na	ıme	Preparer's s	ignature	!	Date	Che		PTIN		
Paid							self-	employed			
Preparer	Cumla name N		L								
Use Only	Firm's name						Fir	m's EIN ►			
222 2,	Firm's address >										
							Ph	one no.			
									Form 9	90-PF	(2017)

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual.	T		
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
	or substituti contributor	Tooipiont	-	
arbor Day Foundation	N/A	501(c)(3)	Fund Charitable	
211 North 12th Street	N/A		Activities	
		Entity	ACCIVICIES	
incoln, NE 68508				5
Alzheimer Resource Center	N/A	501(c)(3)	Fund Charitable	
.506 Lake Highland Drive	N/A	Entity	Activities	
Orlando, FL 32803		Encicy	Activities	2,0
riando, FL 32803		,		
umerican Friends of DVI	N/A	501(c)(3)	Fund Charitable	
P O Box 127	N/ A	Entity	Activities	
Wew York NY 10185		Pilercy	HOCTATOTES.	1,0
audubon Society Birds of Prey	N/A	501(c)(3)	Fund Charitable	
101 Audubon Way		Entity	Activities	
aitland, FL 32751				5
ach Festival	N/A	501(c)(3)	Fund Charitable	
.O. Box 2763		Entity	Activities	
inter Park, FL 32789	<del>-  </del>			7
American Parkinsons Disease	N/A	501(c)(3)	Fund Charitable	
136 Parkinson Ave		Entity	Activities	
taten Island, NY 10305			-	1(
Boy Scouts of America	N/A	501(c)(3)	Fund Charitable	
.951 South Orange Blossum Trail	7,11	Entity	Activities	
popka FL 32703				1.00
oys & Girls Club Central Florida	N/A	501(c)(3)	Fund Charitable	
P.O. Box 2987		Entity	Activities	
rlando FL 32802				2,0
Boys & Girls Club Lake & Sumter	N/A	501(c)(3)	Fund Charitable	
P.O. Box 896179		Entity	Activities	
eesburg FL 34789	+			1,5
anine Companions for Independence	N/A	501(c)(3)	Fund Charitable	
.O. Box 680388		Entity	Activities	
rlando FL 32868  Total from continuation sheets	<del></del>	<del></del>		2,0 70,8

3 Grants and Contributions Paid During the	e Year (Continuation)			
• Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
Catholic Charities of Central FL	N/A	501(c)(3)	Fund Charitable	
1819 N Semoran Blvd	1	Entity	Activities	
Orlando, FL 32807				1,00
Central Care Mission	N/A	501(c)(3)	Fund Charitable	
1022 Teriwood Ave		Entity	Activities	}
orlando, FL 32812				2,00
Impower	N/A	501(c)(3)	Fund Charitable	·
3157 N Alafaya Trail		Entity	Activities	
Orlando, FL 32826				1,00
Chandler's Legacy	N/A	501(c)(3)	Fund Charitable	
.825 Blackfoot Trail		Entity	Activities	
Saint Cloud, FL 34771				4.0
Children's Home Society	N/A	501(c)(3)	Fund Charitable	
1458 S Semoran Blvd Suite 1402		Entity	Activities	
Vinter Park, FL 32792				50
Christian Service Center	N/A	501(c)(3)	Fund Charitable	
808 W Central Blvd		Entity	Activities	
orlando, FL 32805				1,00
Coalition for the Homeless	N/A	501(c)(3)	Fund Charitable	
39 West Central Blvd orlando, FL 32801		Entity	Activities	1,00
Council of 101	N/A	501(c)(3)	Fund Charitable	
2416 North Mills Ave	, , , , , , , , , , , , , , , , , , ,	Entity	Activities	
orlando, FL 32803				2,00
District VIII 4-H Council	N/A	501(c)(3)	Fund Charitable	
021 S Conway Rd		Entity	Activities	
orlando, FL 32812			<del> </del>	1,00
dehab Center	Ņ/A	501(c)(3)	Fund Charitable	
256 Winter Woods Blvd		Entity	Activities	
linter Park, FL 32792		1		3,00

Part XV Supplementary Informat	ee Foundation ion			48803
3 Grants and Contributions Paid During th				
• Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
Thrine Circus Fund	N/A	501(c)(3)	Fund Charitable	
2 O Box 180864	N/A	Entity	Activities	
Casselberry FL 32718		Lincity		3
000000011, 12 00,10				<u>~</u>
1 1		504 ( ) (2)		
dgewood Childrens Ranch	N/A	501(c)(3)	Fund Charitable	
.451 Edgewood Ranch Road Orlando, FL 32835		Entity	Activities	1 0
riando, FL 32835		<del> </del>		1,0
dente Oderle		F01 ( ) (2)		
Clevate Orlando C.O. Box 940633	N/A	501(c)(3)	Fund Charitable	
Aitland FL 32794		Entity	Activities	2,5
MI 38173				
Very Kid Outreach	N/A	501(c)(3)	Fund Charitable	
3 E Kennedy Blvd	M/ A	Entity	Activities	
aitland FL 32751				1.0
irst Baptist Church Food Bank	N/A	501(c)(3)	Fund Charitable	
39 Pond Road		Entity	Activities	
Mount Vernon, ME 04352		ļ		4
ighthouse Centrak Florida	N/A	501(c)(3)	Fund Charitable	•
15 East New Hampshire St		Entity	Activities	
rlando, FL 32804		ļ		1,0
loridas Vision Quest	N/A	501(c)(3)	Fund Charitable	li
.67 N Industrial Dr		Entity	Activities	
rance City, FL 32763				5
lift for Teaching	N/A	501(c)(3)	Fund Charitable	
501 Magic Way Bldg 400C		Entity	Activities	1 0
11anuo, FD 32003	<del>                                     </del>			1,0
aldau Dahaisaa - Daasaa		501(-)(2)	manal other tracks	
colden Retriever Rescue	N/A	501(c)(3)	Fund Charitable	!
0.0. Box 1449 coldenrod FL 32733		Entity	Activities	_ 2.0
<u> </u>				
Tail 6 Paissa Maist		501/->/2>	mana abanda 22	
ood News Jail & Prison Ministry	N/A	501(c)(3)	Fund Charitable	
O Box 300497		Entity	Activities	1 0
ern Park, FL 32730  Total from continuation sheets		<del></del>	_L	1,0

Part XV. Supplementary Informati				<del></del>
3 Grants and Contributions Paid During th		<del></del>		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
- <del></del>	or substantial contributor	recipient		
Guide Dog Foundation	N/A	501(c)(3)	Fund Charitable	
371 East Main St		Entity	Activities	
Smithtown, NY 11787				
			Fund Charitable	50
	}			
Heart of the City	N/A	501(c)(3)	Fund Charitable	}
106 East Church Street		Entity	Activities	
Orlando, FL 32801				500
World Upside Down	N/A	501(c)(3)	Fund Charitable	}
4517 Longworth Dr Orlando, FL 32812		Entity	Activities	500
Hospice of the Comforter	N/A	501(c)(3)	Fund Charitable	
480 W Central Parkway		Entity	Activities	
Altamonte Springs, FL 32714		<u> </u>		20
Junior Achievement	N/A	501(c)(3)	Fund Charitable	
2121 Camden Road		Entity	Activities	2 00
Orlando, FL 32803				2,000
Orlando Health Foundation	N/A	501(c)(3)	Fund Charitable	
3160 Southgate Commerce Blvd		Entity	Activities	
Orlando, FL 32806				500
sish-las Dumaka	1/2	E01/-1/21	Gharitakla	{
Michelee Puppets 4420 Parkway Commerce Blvd Ste A	N/A	501(c)(3) Entity	Fund Charitable Activities	
Orlando, FL 32808		mercy	- Hectvicies	2,000
Moffitt Cancer Center	N/A	501(c)(3)	Fund Charitable	
129 USF Magnolia Dr		Entity	Activities	
Pampa, FL 33612	_			500
Music Mission Kiev	N/A	501(c)(3)	Fund Charitable	
286 Wilshire Blvd		Entity	Activities	
Casselberry, FL 32707				200
Nathaniels Hope	N/A	501(c)(3)	Fund Charitable	
2300 Jetport Drive		Entity	Activities	
Orlando, FL 32809  Total from continuation sheets		I	<del>_</del>	1,00

Part XV Supplementary Information

3 Grants and Contributions Paid During the			<del></del>	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Maine and address (nome of business)	or substantial contributor	recipient		
New Bridge of Hope	N/A	501(c)(3)	Fund Charitable	1
504 S Sanford Ave		Entity	Activities	
Sanford, FL 32771	<del> </del>	<u> </u>	<del>                                     </del>	1,000
Haiti Fund 106 East Church Street	N/A	501(c)(3)	Fund Charitable	
Orlando, FL 32801		Entity	Activities Fund Charitable	
01141140, 11 32001			Activities	
			Fund Charitable	1,000
Edgewater Pop Warner	N/A	501(c)(3)	Fund Charitable	
2295 S Hiawassee Rd		Entity	Activities	1
Orlando, FL 32835				500
Kanakuk Ministries	N/A	501(c)(3)	Fund Charitable	
1353 Lake Shore Dr		Entity	Activities	
Branson, FL 65616		-		500
Orlando Day Nursery	N/A	501(c)(3)	Fund Charitable	
626 Lake Dot Circle		Entity	Activities	
Orlando, FL 32801				2,500
Orlando International Fringe Theater	N/A	501(c)(3)	Fund Charitable	
1605 Alden Road		Entity	Activities	
Orlando, FL 32803		<u> </u>	<del> </del>	1,000
Orlando Museum of Art	N/A	501(c)(3)	Fund Charitable	
Council of 101 Orlando, FL 32803		Entity	Activities	3 500
J. Tando, FL 32003			<del> </del>	2,500
Family Christian School	N/A	501(c)(3)	Fund Charitable	
P O Box 770698 Winter Garden, FL 34777		Entity	Activities	100
THE STILL			<u> </u>	
Orlando (Or. Co. Compact	NI / D	E01/c)/2)	Fund Charitah!	
Orlando/Or. Co. Compact P.O. Box 1073	N/A	501(c)(3) Entity	Fund Charitable Activities	
Orlando FL 32802	<u> </u>	Line Ley	1001410168	500
First United Church of Christ	N/A	501(c)(3)	Fund Charitable	
4605 Curry Ford Rd	}	Entity	Activities	
Orlando, FL 32812				
			Fund Charitable	400
Total from continuation sheets	<del></del>	<del>_</del>	Activities	100

Part XV Supplementary Informat				,
3 Grants and Contributions Paid During th			<del></del>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
Paws for Purple Hearts	N/A	501(c)(3)	Fund Charitable	
5860 Labath Ave Ste A		Entity	Activities	
Rohnert Park, CA 94928				500,
First Christian Church	N/A	501(c)(3)	Fund Charitable	
1401 W New York Ave		Entity	Activities	
Deland, FL 32700		<del> </del>		300.
			}	
Pet Alliance of Greater Orlando	N/A	501(c)(3)	Fund Charitable	
2727 Conroy Road		Entity	Activities	
Orlando, FL 32839		-		1,000.
Rotary Foundation	N/A	501(c)(3)	Fund Charitable	
2100 Alden Road		Entity	Activities	
Orlando, FL 32804			+	200.
American Cancer Society	N/A	501(c)(3)	Fund Charitalbe	
P O Box 22718		Entity	Activities	
Oklahoma City, OK 73123 Ouest	N/A	501(c)(3)	Fund Charitable	211.
PO Box 531125	14,721	Entity	Activities	
Orlando, FL 32853				
			Fund Charitable	2,000.
			ruid Charreadre	2,000.
Daniel Market		501( )(2)		
Rescue Outreach Mission P O Box 412	N/A	501(c)(3) Entity	Fund Charitable Activities	
Sanford, FL 32771		Billity	ACCIVICIES	2,000.
Salvation Army	N/A	501(c)(3)	Fund Charitable	
416 W Colonial Dr		Entity	Activities	
Orlando, FL 32804		<u> </u>	ļ <u>.</u>	2,500.
Second Harvest Food Bank	N/A	501(c)(3)	Fund Charitable	
2008 Brengle Avenue		Entity	Activities	
Orlando, FL 32808				500.
Seniors First	N/A	501(c)(3)	Fund Charitable	
5395 L B McLeod Road		Entity	Activities	
Orlando, FL 32811				1,000.
Total from continuation sheets				<u> </u>

Part XV Supplementary Informat	ee Foundation ion			48803
3 Grants and Contributions Paid During th	ne Year (Continuation)			
• Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
Galapagos Conservancy P O Box 231720	N/A	501(c)(3) Entity	Fund Charitable Activities	
Centreville, VA 20120		Entity	ACCIVICIES	30
Smile Train	N/A	501(c)(3)	Fund Charitable	
P O Box 96246 Washington DC 20090		Entity	Activities	50
St James School	N/A	501(c)(3)	Fund Charitable	<u> </u>
505 E Ridgewood St		Entity	Activities	
Orlando, FL 32803				100
Delaney Street Baptist Church	N/A	501(c)(3)	Fund Charitable	
1919 Delaney Ave		Entity	Activities	
Orlando, FL 32806				100
Femple of Faith Church	N/A	501(c)(3)	Fund Charitable	
1028 S Lake Ave	N/A	Entity	Activities	<u> </u>
Apopka, FL 32703				70
National Park Foundation	N/A	501(c)(3)	Fund Charitable	
P O Box 17394	N/A	Entity	Activities	
Baltimore, MD 21297				20
60				
JCP of Central Florida 1221 W Colonial Dr Ste 300	N/A	501(c)(3) Entity	Fund Charitable Activities	
Orlando, FL 32804		Sherey	RCCIVILIES	2,75
	,			
JM Bascom Palmer Eye Institute	N/A	501(c)(3)	Fund Charitable	
P O Box 25388 Miami, FL 33102		Entity	Activities	200
				200
Valencia College Foundation	W/A	501(c)(3)	Fund Charitable	
PO Box 3028		Entity	Activities	
Orlando, FL 32802		<del> </del>		200
Winter Park Day Nursery	N/A	501(c)(3)	Fund Charitable	
741 S Pennsylvania Ave		Entity	Activities	
Winter Park FL 32789		<u> </u>		2,00

The Lee Foundation

3 Grants and Contributions Paid During the	Year (Continuation)		- <b>-</b>	ļ
Name and address (home as business)	if recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
				1
Youth Conference Ministries	AT / 3	F01/~)/3)	Fund Charitable	1
PO Box 4328	N/A	501(c)(3) Entity	Activities	
Chattanooga, TN 37405		Elicicy	nctivities	1,000
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		1		
Total from continuation sheets		-		

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

Name of the organization

# **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

Employer identification number

Th	ne Lee Foundation	59-6148803	
Filers of:	Section:		
Form 990 or 990-EZ			
illers of:  orm 990 or 990-EZ  check if your organization in lote: Only a section 501(c) literal Rule  X For an organization property) from any sections 509(a)(1) any one contribute or (ii) Form 990-EZ  For an organization year, total contribute the prevention of contributions is checked, enter in purpose Don't contribute or (ii) Form 990-EZ	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation		
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation		
Check if your organization is covered to the control of the contro	4947(a)(1) nonexempt charitable trust treated as a private foundation		
	501(c)(3) taxable private foundation		
General Rule  X For an organization property) from any	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling	g \$5,000 or more (in money or	
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  Pecial 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 contribu	itions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ		
year, contributions is checked, enter h purpose Don't cor	s exclusively for religious, charitable, etc., purposes, but no such contributions totaled mere the total contributions that were received during the year for an exclusively religious implete any of the parts unless the <b>General Rule</b> applies to this organization because it is	ore than \$1,000 If this box , charitable, etc , received <i>nonexclusively</i>	
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	•	

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) (2017)

Name of organization

Employer identification number

# The Lee Foundation

59-6148803 \_

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	ll space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Festival Independencia Dominicana  102 Cherrywood Ct  Kissimmee, FL 34763	\$ 7,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	March of Dimes  405 North Reo St Ste 160  Tampa, FL 33609	\$15,000.	Person X 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
		\$	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 Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )

Name of organization

Employer identification number

### The Lee Foundation

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
(a) No. from	(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	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
   		\$		
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	

Name of organization Employer identification number <u>59-6148803</u> The Lee Foundation Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Part III Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (b) Purpose of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Form. 990-PF Intere	est on Sav	ings and T	Tempor	ary Ca	ash In	vestments	Statem	ent	1
Source			(a) Revenue Per Books		Net In	(b) vestment come	Adju	(c) Adjusted Net Income	
 Famlee Investment ( Seacoast Bank	Company		15,063. 7.		15,063.		15,0		63. 7.
Total to Part I, line 3			15,0	70.		15,070.		15,070.	
Form 990-PF	Dividend	ds and Int	erest	from	Secur	ities	Statem	ent	2
Source	Gross Amount	Capit Gair Divide	ıs	Reve	a) enue Books	(b) Net Inves	st- Ad	(c) justed Incom	
UBS Financial Services	72,575	5. 36,	36,685.		5,890. 35,8		90.	35,890	ο.
To Part I, line 4	72,575	36,	685.	3.5	5,890.	35,89	90.	35,890	) . =
Form 990-PF		Other	Expe	nses			Statem	ent	3
Description		(a) Expenses Per Book		(b) t Inve nt Inc		(c) Adjusted Net Incom	d Cha	(d) ritab] rposes	
Supplies		20	 )2.		202.	20	02. 202		2.
To Form 990-PF, Pg	1, ln 23	20	)2.		202.	20	)2.	202	2.
Form 990-PF		Other I	nvest	ments			Statem	ent	4
Description			Valua Meth		Воо	k Value	Fair Mal		
Brokerage Account Investment Bank Sto	ock		COS		1	,091,585. 200,000.		00,065	
Total to Form 990-F	F, Part I	I, line 13	3		1	,291,585.	1,8	00,065	 5 •

	Concerning Part VII-A,	Line 8b	State	ement .
Explanation				
Not required, per Attorney (	General's office			
Form 990-PF List o	of Substantial Contribu Part VII-A, Line 10	itors	State	ement
Name of Contributor	Address			
Independencia Dominica	102 Cherrywood Kissimmee, FL			
March of Dimes	405 North Reo Tampa, FL 3360		160	
	- List of Officers, Dies and Foundation Manag		State	ement
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Ben Plan	
Name and Address Richard T. Lee P.O. Box 2113 Orlando, FL 32802			Ben Plan	Expense
Richard T. Lee P.O. Box 2113	Avrg Hrs/Wk  Co-Trustee	sation	Ben Plan Contrib	Expense Account
Richard T. Lee P.O. Box 2113 Orlando, FL 32802 Kathleen S. Lee P.O. Box 2113	Avrg Hrs/Wk  Co-Trustee 0.00  Co-Trustee	sation 0.	Ben Plan Contrib	Expense Account 0
Richard T. Lee P.O. Box 2113 Orlando, FL 32802  Kathleen S. Lee P.O. Box 2113 Orlando, FL 32802  Thomas G. Lee II P.O. Box 2113 Orlando, FL 32802  Lorrayne L. Barrow P.O. Box 2113	Avrg Hrs/Wk  Co-Trustee 0.00  Co-Trustee 0.00	sation 0.	Ben Plan Contrib  0.	Expense Account 0
Richard T. Lee P.O. Box 2113 Orlando, FL 32802 Kathleen S. Lee P.O. Box 2113 Orlando, FL 32802 Thomas G. Lee II P.O. Box 2113	Avrg Hrs/Wk  Co-Trustee 0.00  Co-Trustee 0.00  Co-Trustee 0.00	sation 0. 0.	Ben Plan Contrib  0.  0.	Expense Account 0