Form 990-PF

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.

Department of the Treasury

► Go to www.irs.gov/Form990PFfor instructions and the latest information.

				gers resimble or right injure		·				
			endar year 2017 or tax year beginning	12/	01 , 2017,	and ending	1		<u> 11/3</u>	30,2018
	١	Name (of foundation				Α	Employer identifi	cation numb	er
	G ROXY AND ELIZABETH C MARTIN							59-	6920693	}
		Vumbe	er and street (or P O box number if mail is not delivered	to street address)		Room/suite	В	Telephone numbe	r (see instruct	tions)
	_		BOX 1908					40	7-237-5	5986
		Jity or	town, state or province, country, and ZIP or foreign pos	tal code			С	If exemption applicat		□
<u>ഇ</u>	_		ANDO, FL 32802-1908					pending, check here		(
70	G	Che	ck all that apply: Initial return	Initial return	of a former p	ublic charity	/ D	1 Foreign organizati	ons, check here	,▶∟_
ຼາງ ີ	_			Amended ret				2 Foreign organizati 85% test, check he		•
•		Cha	ck type of organization: X Section 501(Name change		711		computation .		▶[]
PR	ï	\neg	ection 4947(a)(1) nonexempt charitable trust	Other taxable pri			E	If private foundation under section 507(b)		- I I
₩ -	ī			unting method. X Ca			F	If the foundation is in		
=		end	of year (from Part II, col (c), line O	ther (specify)			_ `	under section 507(b)		
	_			column (d) must be on ca	sh basis)					
POSTMARK DAIL APR 0'3, 2019	P	art l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net inve	I .		Adjusted net income	for cha	ursements aritable poses asis only)
2		1	Contributions, gifts, grants, etc., received (attach schedule) .							
		2	Check ► X if the foundation is not required to attach Sch B							
2		3	Interest on savings and temporary cash investments.	06.653	•	C (F2)				C/DM/III
2		4	Dividends and interest from securities	96,653.	9	6,653.				STMT 1
11			Gross rents	<u> </u>	-					<u> </u>
4.	d)	6.	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10	141,882.						
	Revenue	ď	Gross sales price for all 1,601,120.	211,002				DEOE	1.472.00	,
	eve	7	Capital gain net income (from Part IV, line 2) .		14	1,882.	<u>L</u>	REUEI	VED	
	æ	8	Net short-term capital gain							18
		9 10a	Income modifications				857	<u> APR 0 8</u>	2019	
			and allowances		******		l			8
			Less Cost of goods sold Gross profit or (loss) (attach schedule)					OGDEN	IIIT	=
		11	Other income (attach schedule)				<u> </u>	OOOLI	, U 	
		12	Total Add lines 1 through 11 · · · · · · ·	238,535.	23	8,535.				
	_	13	Compensation of officers, directors, trustees, etc	41,555.		0,778.				20,778
	nses	14	Other employee salaries and wages	_		NONE		NONE		
	ŝuŝ	15	Pension plans, employee benefits			NONE		NONE		
	ă	16a b c 17 18 19	Legal fees (attach schedule)							
	H)	ь	Accounting fees (attach schedule) STMT. 2.	2,500.		NONE		NONE		<u>2,500</u> .
න	Ξį	С	Other professional fees (attach schedule)						ļ	
2019	tra	17	Interest	–						
2	nisi	18	Taxes (attach schedule) (see instructions, 3.	3,889.		1,260.			ļ	
MAY 0 8	Ē	19	Depreciation (attach schedule) and depletion.							
_	Ad	20	Occupancy			170175		170772		
₹	ק	21 22 ·	Travel, conferences, and meetings			NONE		NONE		
2	a	22 •	Printing and publications			NONE		NONE		
Ω	ing	23 24	Other expenses (attach schedule)							
벨	rat	24	Total operating and administrative expenses	47 044	_	2 22		37037	I	22 272
SCANNED	per		Add lines 13 through 23	47,944.	2	2,038.		NONE		23,278
Ķ	0	25	Contributions, gifts, grants paid	186,500.		2 020		NICATE		186,500
\mathcal{S}	_	26	Total expenses and disbursements Add lines 24 and 25	234,444.		<u>2,038.</u>		NONE		209,778
		27	Subtract line 26 from line 12	4 001	,					j
		l	Excess of revenue over expenses and disbursements	4,091.	21	6,497.				
		D	Net investment income (if negative, enter -0-)		41	U, 371.				

c Adjusted net income (if negative, enter -0-). . JSA For Paperwork Reduction Act Notice, see instructions 7E1410 1 000 HKP493 V17W 03/21/2019 09:03:13

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n -		_	2
гa	а	е	~

Da	rt II	Balance Sheets description column should be for end-of-year	Beginning of year	End of	year
TE CI		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing			
	2	Savings and temporary cash investments	70,883.	69,162.	69,162
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
		Grants receivable			
-		Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
- 1		Other notes and loans receivable (attach schedule)		1	1
		Less allowance for doubtful accounts ► NONE		**************************************	
S		Inventories for sale or use			
ssets		Prepaid expenses and deferred charges			
		Investments - U.S. and state government obligations (attach schedule).		*****	
ן'		Investments - corporate stock (attach schedule)			
1	1 C	Investments - corporate bonds (attach schedule)		1	
		and equipment basis Less accumulated depreciation	a mil-duminidus, idas etti killetinna tutti turttuuttuunin 1884 ka		
		(attach schedule)			
- 1	2 3	Investments - mortgage loans	3 408 191	3 413 815	3,630,518
	4	Land, buildings, and	3,400,131.	3,413,013.	J,030,310
		equipment basis Less accumulated depreciation			
١.		(attach schedule)			
		Other assets (describe >)			
ין		Total assets (to be completed by all filers - see the		2 402 077	2 (00 (00
+		instructions Also, see page 1, item I)		3,402,977.	3,699,680
- 1		Accounts payable and accrued expenses			
- 1		Grants payable			;
		Deferred revenue			į
<u>≣</u> 2		Loans from officers, directors, trustees, and other disqualified persons			l t
e s		Mortgages and other notes payable (attach schedule)			
၂2	2	Other liabilities (describe			
				77077	l i
$-\frac{1}{2}$		Total liabilities (add lines 17 through 22)		NONE	Ì
		Foundations that follow SFAS 117, check here ▶			
ĕ		and complete lines 24 through 26, and lines 30 and 31.			}
	4	Unrestricted			· i
Balances	5	Temporarily restricted			
		Permanently restricted			
		Foundations that do not follow SFAS 117, check here $\blacktriangleright X$			1
"		and complete lines 27 through 31			ļ
<u>ှို</u> 2	27	Capital stock, trust principal, or current funds	3,479,074.	3,482,977.	i
뜅 2	8	Paid-in or capital surplus, or land, bldg, and equipment fund			1
SSI	9	Retained earnings, accumulated income, endowment, or other funds			
Net Assets or Fund	10	Total net assets or fund balances (see instructions)	3,479,074.	3,482,977.	.
ᆌ	1	Total liabilities and net assets/fund balances (see			į
		instructions)	3,479,074.	3,482,977.	
Pa	rt III	Analysis of Changes in Net Assets or Fund Bala	nces		
		I net assets or fund balances at beginning of year - Part		nust agree with	
		of-year figure reported on prior year's return)			3,479,074.
		r amount from Part I, line 27a		1 1	4,091.
		er increases not included in line 2 (itemize)			
4	Add	lines 1, 2, and 3		4	3,483,165.
		eases not included in line 2 (itemize) MUTUAL FUND TIMING		5	188.
		I net assets or fund balances at end of year (line 4 minus I			3,482,977.
			, , , , , , , , , , , , , , , , , , , ,		Form 990-PF (2017)

Par	t IV Capital Gains	and Losses for Tax on Inve	stment Income					
		cribe the kind(s) of property sold (for exick warehouse, or common stock, 200	• •	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1 a	PUBLICLY TRADED	SECURITIES						
<u>b</u>								
c								
<u>d</u>			······································					
<u>e</u>	····-		(10)			<u> </u>		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))				
a	1,601,120.		1,459,238.			141,882.		
b								
<u>c</u>								
d						· · · · - ·		
е				<u> </u>				
	Complete only for assets sno	owing gain in column (h) and owned by			Gains (Col (h) ga			
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	COI	(k), but not less t Losses (from co			
a						141,882.		
<u>b</u>								
<u>C</u>								
d				ļ				
е								
2	Capital gain net income	or (net canital loss)	on, also enter in Part I, line 7 sss), enter -0- in Part I, line 7	2		141,882.		
3		ain or (loss) as defined in sections 1						
	-	art I, line 8, column (c). See ins	i					
				3	 			
Par		nder Section 4940(e) for Redu private foundations subject to the						
Was		leave this part blank. the section 4942 tax on the distrib t qualify under section 4940(e). Do		ase perio	d?	Yes X No		
1	Enter the appropriate an	nount in each column for each year	r; see the instructions before makir	ng any en	tries.			
Cate	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution ra (col. (b) divided by	tio col (c))		
	2016	260,090.	3,751,422.		······································	0.069331		
	2015	224,259.	3,576,301.			0.062707		
-	2014	211,274.	3,879,734.			0.054456		
	2013	113,518.	4,056,290.			0.027986		
	2012	221,937.	3,877,124.			0.057243		
						0 071700		
2		d)		2		0.271723		
3	•	o for the 5-year base period - divid	· · · · · · · · · · · · · · · · · · ·			0 054345		
	the number of years the	foundation has been in existence i	f less than 5 years	3		0.054345		
4	Enter the net value of no	oncharitable-use assets for 2017 fr	om Part X, line 5	4	3,	882,843.		
5	Multiply line 4 by line 3.			5		211,013.		
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		2,165.		
7	Add lines 5 and 6			7		213,178.		
8	Enter qualifying distribut	tions from Part XII, line 4	Down VII has 45 and asset to	8	10/	209,778.		
	If line 8 is equal to or general Part VI instructions.	greater than line 7, check the box	in rart vi, line ib, and complete	inat part	using a 1% ta	ix rate. See the		

Pari	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	uction	s)		
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			- 1		
	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		4,3	<u>330.</u>		
	here and enter 1% of Part I, line 27b			- 1		
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J					
	Part I, line 12, col. (b)		_			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			ONE		
3	Add lines 1 and 2	4,330.				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			<u>NONE</u>		
5	5 Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0					
6	Credits/Payments		٠.	1		
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 1,748.			1		
b	Exempt foreign organizations - tax withheld at source					
С	Tax paid with application for extension of time to file (Form 8868) 6c NONE					
d	Backup withholding erroneously withheld		1 7	748.		
7						
8	Enter any penalty for underpayment or estimated tax officer field		2 [582.		
9	Tax dae. If the total of thice of the original mile 7, ones amount of the		۷, .	702.		
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					
	VII-A Statements Regarding Activities					
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	T	Yes	No		
10	participate or intervene in any political campaign?	1a	1	X		
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the		1			
	instructions for the definition	1b		Х		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			- 15		
	published or distributed by the foundation in connection with the activities					
С	Did the foundation file Form 1120-POL for this year?	1c		<u>X</u>		
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			l		
	(1) On the foundation > \$(2) On foundation managers > \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
	on foundation managers > \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	ļ	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	<u> </u>	X		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	1	^		
Ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	-	X		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	+			
_	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 					
	e 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			
7 8a	Enter the states to which the foundation reports or with which it is registered. See instructions.					
oa	FL					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
~	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
-	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes,"					
	complete Part XIV	9		<u>X</u>		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
_	names and addresses	10		X		
		orm 95	90-PF	(2017)		

Par	t 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		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement See instructions	12) }
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	CIDIMPLIAN DANK			
	Located at ▶ P.O. BOX 1908, ORLANDO, FL ZIP+4 ▶ 32802-	1908	-	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			
13	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
10	over a bank, securities, or other financial account in a foreign country?	16		7
			Щ	
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
Dor	the foreign country ► t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	il		L
Ear			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		163	140
1a	During the year, did the foundation (either directly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	ı		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	ŀ		
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	ľ		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	ĺ		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	ľ		1
	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	ľ		1
	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	<u> </u>		ļ
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
	Organizations relying on a current notice regarding disaster assistance, check here			1
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	<u> </u>		
	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)):			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	ĺ		1
	6e, Part XIII) for tax year(s) beginning before 2017?			
	If "Yes," list the years 🕨			1
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	l		1
	(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		
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		·	
•	•	ŀ		
20	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	ĺ		
Ja	at any time during the year?	1		
	olf "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or	1		
	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	24		ļ
	foundation had excess business holdings in 2017)	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	41.		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	0.05	(201

	VII-3 Statements Regarding Activities for	or Which Form		uired (continued)			age U
			1/20 May be ned	uirea (continuea)		T	г
5a	During the year, did the foundation pay or incur any amo					Yes	No
	(1) Carry on propaganda, or otherwise attempt to influer	•		- —	•	, ']
	(2) Influence the outcome of any specific public ele						. 4
	directly or indirectly, any voter registration drive?				,		1
	(3) Provide a grant to an individual for travel, study, or of	ther similar purposes	?	. Yes X No	•		, ,
	(4) Provide a grant to an organization other than a	charitable, etc., org	janization described i			.	
	section 4945(d)(4)(A)? See instructions				· '	1	
	(5) Provide for any purpose other than religious, ch	iaritable, scientific,	literary, or educationa	ıl <u>— </u>			,
	purposes, or for the prevention of cruelty to children	or animals?		. Yes X No	, ,	٠	
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions described in	۱ <u></u>		احتا
	Regulations section 53 4945 or in a current notice regard	ding disaster assistan	ice? See instructions.		<u>5b</u>		<u> </u>
	Organizations relying on a current notice regarding disas	ter assistance, check	here			-	
С	If the answer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the t	ax			ĺ
	because it maintained expenditure responsibility for the	grant?		. Yes No	,		1
	If "Yes," attach the statement required by Regulations set	•					
6a	Did the foundation, during the year, receive any fun	ids, directly or indir	ectly, to pay premiur	ns	l;		- 1
	on a personal benefit contract?			Yes X No	, <u> </u>		
b	Did the foundation, during the year, pay premiums, direct				. 6b		Х
	If "Yes" to 6b, file Form 8870	•					
7a	At any time during the tax year, was the foundation a pai	rty to a prohibited tax	shelter transaction?	. Yes X No	,]
ь	If "Yes," did the foundation receive any proceeds or have				. 7b		
Pari	Information About Officers, Director	rs, Trustees, Fou	ındation Manager	s, Highly Paid Em	ployees,		
1	and Contractors List all officers, directors, trustees, foundation ma	nagers and their	compensation See	instructions			
		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expen	20001	
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other al		
SUNTR	UST BANK	CO-TRUSTEE		-			
	BOX 1908 ORLANDO, FL 32802-190, ORLANDO, FL 328	1	35,555.	-0-			-0-
	D C. HALIDAY JR	CO-TRUSTEE					
	ORANGE AVE STE 1600, ORLANDO, FL 32801	1	2,000.	-0-			-0-
	L. WEISS	CO-TRUSTEE					
	ORANGE AVE STE 1600, ORLANDO, FL 32801	1	2,000.	-0-			-0-
	EPHEN PULLIUM	CO-TRUSTEE	· · · · · · · · · · · · · · · · · · ·				
	ORANGE AVE STE 1600, ORLANDO, FL 32801	1	2,000.	-0- [-0-
	Compensation of five highest-paid employees	(other than thos	e included on line	e 1 · see instruction	ons). If n	one,	enter
	"NONE."		· · - · · · · · · · · · · · · · · · · ·	(d) Contributions to			
(0)	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit	(e) Expen		
(4)	Marie and Baaroos of Saan Employee para more man 455/555	devoted to position	(c) component	plans and deferred compensation	other al	owance	,:S
NON	E		NONE	NONE	N	ONE	
							· <u>—</u>
Total	number of other employees paid over \$50,000		 			ONE	
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Pane .	ı

	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
ON:		NONE
	number of others receiving over \$50,000 for professional services	NONI
an	IX-A Summary of Direct Charitable Activities	·-··
	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of inizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N	DNE	
_		
_		
2_		
_		
3 _		
_		
4_		
_		
art	IX-B Summary of Program-Related Investments (see instructions)	
De	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 <u>N</u>	NE	
_		
,-		
-		
	other program-related investments. See instructions	
3 N	ONE	
_		

Form 990-PF (2017) 59-6920693 Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1a 3,859,572. 1b 82,401. 1c NONE 3,941,973. 1d e Reduction claimed for blockage or other factors reported on lines 1a and 2 NONE 3 3,941,973. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see 4 59,130. 5 3.882.843. Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 194.142 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ▶ and do not complete this part.)

1	Minimum investment return from Part X, line 6		194,142.
2 a	Tax on investment income for 2017 from Part VI, line 5 2a 4,330.		
b	Income tax for 2017. (This does not include the tax from Part VI) 2b		
	Add lines 2a and 2b	2c	4,330.
3	Distributable amount before adjustments Subtract line 2c from line 1		189,812.
4	Recoveries of amounts treated as qualifying distributions		NONE
5	Add lines 3 and 4	I I	189,812.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	1 1	
	line 1	7	189,812.
Pai	rt XII Qualifying Distributions (see instructions)		•

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes,

•	Amounts paid (meldaling daministrative expenses) to decomplish chartesis, see / parposses	~	!
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	209,778.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	209,778.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	209,778.
	Many The annual on long C will be used in Don't V column (b) un subsequent vecto when as	laula	ing whathar the foundation

Note: 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 4940(e) reduction of tax in those years.

Form 990-PF (2017)

Pa	rt XIII Undistributed Income (see instr	uctions)	· · · · · · · · · · · · · · · · · · ·		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7				189,812.
2	Undistributed income, if any, as of the end of 2017				
	Enter amount for 2016 only			NONE	
	Total for prior years 20,20,20		NONE		
	Excess distributions carryover, if any, to 2017				
	From 2012				
	From 2013 NONE 22,303.				
_	40 100				
	From 2015				
_	Total of lines 3a through e	181,513.			
	Qualifying distributions for 2017 from Part XII,	202/0201			
•	line 4 ▶ \$ 209,778.				
а	Applied to 2016, but not more than line 2a			NONE	
ь	Applied to undistributed income of prior years				
	(Election required - see instructions)		NONE		
c	Treated as distributions out of corpus (Election				
	required - see instructions)	NONB			100 010
	Applied to 2017 distributable amount	10.000		-	189,812.
	Remaining amount distributed out of corpus.	19,966. NONB			NONE
5	Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same	NONS			NONE
	amount must be shown in column (a))				
0	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	201,479.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b		NONE_		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)		NONE		
	tax has been previously assessed		14014		
d	Subtract line 6c from line 6b Taxable amount - see instructions		NONE		
е	Undistributed income for 2016. Subtract line				
	4a from line 2a Taxable amount - see instructions			NONE	
	Undistributed income for 2017 Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2018				NONE
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	NONE			
	required - see instructions)	NONE			
•	applied on line 5 or line 7 (see instructions)	36,017.			
9	Excess distributions carryover to 2018.	-			
	Subtract lines 7 and 8 from line 6a	165,462.			
	Analysis of line 9				
	Excess from 2013 NONE				
	Excess from 2014				
	Excess from 2015				
	Excess from 2016				
	<u> </u>				- 000 PE (0047)

	990-PF (2017)				6920693		Page 10
Pai	t XIV Private Ope	erating Foundations	(see instructions	and Part VII-A, quest	tion 9)	NOT	<u>APPLICABL</u>
1 a	If the foundation has	received a ruling or di	etermination letter th	at it is a private ope	rating		_
	foundation, and the ruling	is effective for 2017, ent	er the date of the ruling	3	▶[
b	Check box to indicate v	whether the foundation	is a private operating	foundation described	in section	4942(j)(3) or	4942(j)(5)
2 2	Enter the lesser of the ad-	Tax year		Prior 3 years			(e) Total
2 a	justed net income from Part	(a) 2017	(b) 2016	(c) 2015	(d) 20	14	(c) rotal
	I or the minimum investment return from Part X for each						
	year listed						
b	85% of line 2a						
C	Qualifying distributions from Part						
	XII, line 4 for each year listed .				_/		
d	Amounts included in line 2c not used directly for active conduct						
	of exempt activities				<u> </u>		
е	Qualifying distributions made						
	directly for active conduct of exempt activities Subtract line						
_	2d from line 2c			/			
3	Complete 3a, b, or c for the alternative test relied upon						
а	"Assets" alternative test - enter						
	(1) Value of all assets		···		 		
	(2) Value of assets qualifying under section						
	4942(j)(3)(B)(i)				+		
b	"Endowment" alternative test- enter 2/3 of minimum invest-						
	ment return shown in Part X,						
	line 6 for each year listed						
¢	"Support" alternative test - enter						
	(1) Total support other than gross investment income	J.					
	(interest, dividends, rents, payments on securities			+			
	loans (section 512(a)(5)),						
	or royalties)				+		
	public and 5 or more						
	exempt organizations as provided in section 4942						
	(j)(3)(B)(iii)	<i></i>					
	port from an exempt						
	organization	-					
Pai		tary Information (C	omplete this par	only if the found	ation had \$5	5.000 or more	in assets at
		iring the year - see				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1	Information Regarding				 		
а	List any managers of	the foundation who h	ave contributed mo	re than 2% of the to	tal contributio	ns received by t	he foundation
	before the close of any	tax year (but only if th	ey have contributed	more than \$5,000). (See section 50)7(d)(2).)	
	NONE						
b	List any managers of	the foundation who	own 10% or more	of the stock of a cor	poration (or a	n equally large (portion of the
	ownership of a partner	ship or other entity) of	which the foundation	n has a 10% or greate	r interest.		
	NONE						
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsl	nip, etc , Programs:			
	Check here ► X if t	he foundation only i	nakes contributions	to preselected cha	ritable organi	zations and doe	s not accept
	unsolicited requests for						
	complete items 2a, b,						
а	The name, address, an	d telephone number o	r email address of th	e person to whom app	olications shou	ıld be addressed:	
b	The form in which app	lications should be sub	mitted and informat	ion and materials they	should includ	e:	
C	Any submission deadli	nes:					
- 7	Any restrictions or li	mitations on awards,	such as by geog	raphical areas, chari	table fields, l	kinds of institution	ons, or other

Page **11**

Part XV Supplementary Information (a 3 Grants and Contributions Paid Durin	continued)	oved for F	inture Payment	
Recipient	If recipient is an individual,	Foundation		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a raid during the year				
SEE STATEMENT 25				186,500.
OBE STRIBMENT 25				100,500.
			·	
		İ		
		1		
				,
		ł		
		}		
	<u> </u>			106 500
Total			▶ 3a	186,500.
b Approved for future payment				
				1
			1	
Total			▶ 3b	

er gross amounts unless otherwise indicated	<u> </u>	ted business income	<u> </u>	v section 512, 513, or 514	(e) Related or exemp
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
					(See instructions
· · · · · · · · · · · · · · · · · · ·					
				-	
					-
Fees and contracts from government agencies					
lembership dues and assessments			.		
iterest on savings and temporary cash investments -			1.4	06 652	
ividends and interest from securities			14	96,653.	
let rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property			-		
et rental income or (loss) from personal property					<u>-</u>
ther investment income			18	141,882.	
ain or (loss) from sales of assets other than inventory	1		1 10	111,002.	
let income or (loss) from special events · · · · iross profit or (loss) from sales of inventory . · ·					
or (loss) from sales of inventory			1	-	
uner revenue a					
					-
ubtotal. Add columns (b), (d), and (e)				238,535.	
worksheet in line 13 instructions to verify calcit XVI-B Relationship of Activities	ulations) s to the A	ccomplishment of E	xempt Pur	poses	
t XVI-B Relationship of Activities e No. Explain below how each activity	ulations) s to the Act ty for which	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	ted importantly to
t XVI-B Relationship of Activities e No. Explain below how each activity to the formulation of the formula	ulations) s to the Act ty for which	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	ted importantly to
t XVI-B Relationship of Activities e No. Explain below how each activity	ulations) s to the Act ty for which	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	ted importantly to
t XVI-B Relationship of Activities e No. Explain below how each activity to the formulation of the formula	ulations) s to the Act ty for which	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	ted importantly to
e No. Explain below how each activit	ulations) s to the Act ty for which	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	
worksheet in line 13 instructions to verify calcit XVI-B Relationship of Activities e No. Explain below how each activity	ulations) s to the Act ty for which	ccomplishment of E	xempt Pur	poses e) of Part XVI-A contribu	ted importantly to
t XVI-B Relationship of Activities e No. Explain below how each activity	ulations) s to the Act ty for which	ccomplishment of E	in column (e	poses e) of Part XVI-A contribu	ted importantly to
Relationship of Activities No. Explain below how each activit	ulations) s to the Act ty for which	ccomplishment of E	in column (e	poses e) of Part XVI-A contribu	ted importantly to
worksheet in line 13 instructions to verify calci XVI-B Relationship of Activities No. Explain below how each activity	ulations) s to the Act ty for which	ccomplishment of E	in column (e	poses e) of Part XVI-A contribu	ted importantly to
Worksheet in line 13 instructions to verify calciliated XVI-B Relationship of Activities No. Explain below how each activity to the foundations of the foundations o	ulations) s to the Act ty for which	ccomplishment of E	in column (e	poses e) of Part XVI-A contribu	ted importantly to
xorksheet in line 13 instructions to verify calci XVI-B Relationship of Activities No. Explain below how each activity	ulations) s to the Act ty for which	ccomplishment of E	in column (e	poses e) of Part XVI-A contribu	ted importantly to
Relationship of Activities No. Explain below how each activit	ulations) s to the Act ty for which	ccomplishment of E	in column (e	poses e) of Part XVI-A contribu	ted importantly to
Relationship of Activities No. Explain below how each activit	ulations) s to the Act ty for which	ccomplishment of E	in column (e	poses e) of Part XVI-A contribu	ted importantly to
t XVI-B Relationship of Activities e No. Explain below how each activity	ulations) s to the Act ty for which	ccomplishment of E	in column (e	poses e) of Part XVI-A contribu	ted importantly to

Part	XVII	Information R Exempt Orga		ansfers to and	ransactio	ns an	d Relationships With	Nonch	aritab	le
1 [old the	organization direct	ly or indirectly	engage in any of th	ne following	with a	ny other organization descr	ribed	Y	es No
			than section	501(c)(3) organiz	ations) or	ın secti	ion 527, relating to pol	litical		
	•	ganizations?								
	a Transfers from the reporting foundation to a noncharitable exempt organization of. (1) Cash							./1\	Х	
										X
	•	ransactions:							~-/	
(1) Sale	es of assets to a non	icharitable exer	npt organization				1	ɔ(1)	X
										X
										X
										X
										X
										$\frac{\Lambda}{X}$
	_		_				Column (b) should always			
							If the foundation received			
	alue ii	n any transaction of	r sharing arran	gement, show in co	lumn (d) th	e value	of the goods, other assets	s, or ser	/ices r	eceived.
(a) Line	е по	(b) Amount involved	(c) Name of	noncharitable exempt org	anization	(d) Des	scription of transfers, transactions, a	and sharing	arrange	ments
				<u> </u>	-					
							·····			
				•						
		•	•	· ·			re tax-exempt organization:		- 1	
				ction 501(c)(3)) or i	n section 52	77		٠. ــــــــــــــــــــــــــــــــــــ	」Yes ∣	_X No
<u> </u>	f "Yes,	complete the follow (a) Name of organization		(b) Type of o	rganization		(c) Description of	relationshi		
	_	(a) Name of organization		(6) 1990 01 0	- I gamzation		(e) Description of	Telationsiii	'	
				-						
					•					
	•									
										
	Correct			nined this return, including a taxpayer) is based on all infor			d statements, and to the best of my lany knowledge	knowledge	ind belief	, it is true
Sign	14	Willed on U	14	1 02 /21 /2	ا مرم	mpric	ממשמ	the IRS		
Here	Sign	lature of officer or trustee	<u>~~</u>	03/21/2019 TRI				the prepa nstructions	rer show	
	1 5	NTRUST BANK		Date		11116	366 11	instructions	_A_''	3
	1 30	Print/Type preparer's na	ame	Preparer's sygnature	1311	—	Date Check 2	X rf PTI	V	
Paid		SHAWN P. HAN	ILON			<u></u>	23/21/2019 self-emple	oyed P(<u> 0965</u>	923
Prepa	arer			OUSECOOPERS		1	Firm's EIN	13-40		
Use Only Firm's address ▶ 600 GRANT STREET										

15219

Phone no

PITTSBURGH,

PΑ

59-6920693

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
USGI REPORTED AS NONQUALIFIED DIVIDENDS FOREIGN DIVIDENDS DOMESTIC DIVIDENDS US GOVERNMENT INTEREST REPORTED AS QUALI NONQUALIFIED FOREIGN DIVIDENDS NONQUALIFIED DOMESTIC DIVIDENDS	5,141. 13,017. 19,916. 25. 5,282. 53,272.	5,141. 13,017. 19,916. 25. 5,282. 53,272.
TOTAL	96,653.	96,653.

59-6920693

FORM 990PF, PART I - ACCOUNTING FEES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES	
TAX PREPARATION FEE (NON-ALLOC	2,500.			2,500.	
TOTALS	2,500.	NONE	NONE	2,500.	

59-6920693

FORM 990PF, PART I - TAXES

AND EXPENSES	NET INVESTMENT INCOME
1,015. 881. 1,748.	1,015.
245.	245.
3,889.	1,260.
	EXPENSES PER BOOKS 1,015. 881. 1,748. 245.

59-6920693

FORM 990PF, PART II - OTHER INVESTMENTS

COST/ FMV C OR F

ENDING ENDING BOOK VALUE -----

FMV

DESCRIPTION -----SEE ATTACHED

С

TOTALS

3,413,815. 3,630,518. 3,413,815. 3,630,518. --------

G ROXY AND ELIZABETH C MARTIN 59-6920693 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CHRISTIAN HOME AND BIBLE SCHOOL ADDRESS: 2235 W OLD US HWY 441 MT DORA, FL 32757 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT GRANT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: SCARC INC. ADDRESS: 1050 SW 66TH PL BUSHNELL, FL 33513 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT GRANT FOUNDATION STATUS OF RECIPIENT: PC 5,000. AMOUNT OF GRANT PAID

AMOUNT OF GRANT PAID

STATEMENT

RECIPIENT NAME:

RELATIONSHIP:

PURPOSE OF GRANT: SCHOLARSHIP

NONE

UNIVERSITY OF FLORIDA SCHOLARSHIP RECIPIENT

FOUNDATION STATUS OF RECIPIENT:

1,500.

G ROXY AND ELIZABETH C MARTIN 59-6920693 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: UNIVERSITY OF FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Т AMOUNT OF GRANT PAID 1,500. RECIPIENT NAME: JOHNS HOPKINS UNIVERSITY SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: 2,500. AMOUNT OF GRANT PAID RECIPIENT NAME: UNIVERSITY OF SOUTH FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP RECIPIENT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 750. RECIPIENT NAME: FLORIDA STATE UNIVERSITY SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: 1,750. AMOUNT OF GRANT PAID

G ROXY AND ELIZABETH C MARTIN 59-6920693 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: UNIVERSITY OF CENTRAL FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 750. RECIPIENT NAME: UNIVERSITY OF SOUTH FLORIDA SCHOLARSHIP RECIPIENT **RELATIONSHIP:** NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 750. RECIPIENT NAME: HARDING UNIVERSITY SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Т AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: SANTA FE COMMUNITY COLLEGE SCHOLARSHIP RECIPIENT **RELATIONSHIP:** NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

750.

G ROXY AND ELIZABETH C MARTIN 59-6920693 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: FLORIDA STATE UNIVERSITY SCHOLARSHIP RECIPIENT **RELATIONSHIP:** NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι AMOUNT OF GRANT PAID 750. RECIPIENT NAME: UNIVERSITY OF CENTRAL FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: UNIVERSITY OF FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Т AMOUNT OF GRANT PAID 1,750. RECIPIENT NAME: STETSON UNIVERSITY SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 1,750.

59-6920693 G ROXY AND ELIZABETH C MARTIN FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: UNIVERSITY OF FLORIDA SCHOLARSHIP RECIPIENT **RELATIONSHIP:** NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι AMOUNT OF GRANT PAID 750. RECIPIENT NAME: UNIVERSITY OF CENTRAL FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 750. RECIPIENT NAME: UNIVERSITY OF FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Τ 2,500. AMOUNT OF GRANT PAID RECIPIENT NAME: UNIVERSITY OF NORTH FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: 750. AMOUNT OF GRANT PAID

G ROXY AND ELIZABETH C MARTIN 59-6920693 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ------RECIPIENT NAME: UNIVERSITY OF FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 750. RECIPIENT NAME: UNIVERSITY OF CENTRAL FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 750. RECIPIENT NAME: NORTH GREENVILLE UNIVERSITY SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι AMOUNT OF GRANT PAID 750. RECIPIENT NAME: HARDING UNIVERSITY SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID

2,500.

G ROXY AND ELIZABETH C MARTIN 59-6920693 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: SOUTHEASTERN UNIVERSITY SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Т AMOUNT OF GRANT PAID 1,750. RECIPIENT NAME: FREED-HARDEMAN UNIVERSITY SCHOLARSHIP RECIPIENT **RELATIONSHIP:** NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: 2,500. AMOUNT OF GRANT PAID RECIPIENT NAME: UNIVERSITY OF SOUTH FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι 2,500. AMOUNT OF GRANT PAID RECIPIENT NAME: UNIVERSITY OF SOUTH FLORIDA SCHOLARSHIP RECIPIENT **RELATIONSHIP:** NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

750.

AMOUNT OF GRANT PAID

750.

G ROXY AND ELIZABETH C MARTIN FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAI	
RECIPIENT NAME: UNIVERSITY OF SOUTH FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: I AMOUNT OF GRANT PAID	1,750.
RECIPIENT NAME: NORTH GREENVILLE UNIVERSITY SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT:	
SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT:	
I	750
AMOUNT OF GRANT PAID	750.
RECIPIENT NAME: FLORIDA SOUTHERN COLLEGE SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE	
PURPOSE OF GRANT: SCHOLARSHIP	
FOUNDATION STATUS OF RECIPIENT:	
AMOUNT OF GRANT PAID	750.
RECIPIENT NAME: OGLETHROPE UNIVERSITY SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT:	
SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT:	
I	7.5
AMOUNT OF GRANT PAID	750.

G ROXY AND ELIZABETH C MARTIN 59-6920693 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: FLORIDA STATE UNIVERSITY SCHOLARSHIP RECIPIENT **RELATIONSHIP:** NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Τ AMOUNT OF GRANT PAID 750. RECIPIENT NAME: UNIVERSITY OF CENTRAL FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 750. RECIPIENT NAME: ROLLINS COLLEGE SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι AMOUNT OF GRANT PAID RECIPIENT NAME: UNIVERSITY OF CENTRAL FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 750.

G ROXY AND ELIZABETH C MARTIN 59-6920693 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: LAKE SUMTER STATE COLLETE SCHOLARSHIP RECIPIENTS RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Т 1,000. AMOUNT OF GRANT PAID RECIPIENT NAME: UNIVERSITY OF FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: SCHOLARSHIP PURPOSE OF GRANT: AMOUNT OF GRANT PAID 1,750. RECIPIENT NAME: UNIVERSITY OF CENTRAL FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι AMOUNT OF GRANT PAID 750. RECIPIENT NAME: STETSON UNIVERSITY SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

1,750.

G ROXY AND ELIZABETH C MARTIN 59-6920693 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: FLORIDA STATE UNIVERSITY SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Т RECIPIENT NAME: FLORIDA STATE UNIVERSITY SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 1,250. RECIPIENT NAME: UNIVERSITY OF FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: UNIVERSITY OF FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

2,500.

AMOUNT OF GRANT PAID

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

1,750.

G ROXY AND ELIZABETH C MARTIN 59-6920693 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: UNIVERSITY OF SOUTH FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 750. RECIPIENT NAME: SANTA FE COMMUNITY COLLEGE SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: 750. AMOUNT OF GRANT PAID RECIPIENT NAME: UNIVERSITY OF FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι 750. AMOUNT OF GRANT PAID RECIPIENT NAME: FLORIDA STATE UNIVERSITY SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: 750. AMOUNT OF GRANT PAID

AMOUNT OF GRANT PAID

750.

UNIVERSITY OF FLORIDA SCHOLARSHIP RECIPIENT

FOUNDATION STATUS OF RECIPIENT:

RELATIONSHIP:

PURPOSE OF GRANT: SCHOLARSHIP

NONE

G ROXY AND ELIZABETH C MARTIN 59-6920693 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

ARC SUNRISE OF CENTRAL FLORIDA

SCHOLARSHIP RECIPIENT

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

Ι

RECIPIENT NAME:

CHRISTIAN CARE CENTER

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT GRANT

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

FORWARD PATHS FOUNDATION INC

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT GRANT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:

DOMESTIC & SEXUAL VOILENCE PROGRAM

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT GRANT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 5,000.

59-6920693 G ROXY AND ELIZABETH C MARTIN FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: LIBERTY COUNSEL **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT GRANT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: NEW BEGINNINGS OF LAKE COUNTY **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT GRANT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: NEW VISION FOR INDEPENDENCE INC RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT GRANT FOUNDATION STATUS OF RECIPIENT: 5,000. AMOUNT OF GRANT PAID RECIPIENT NAME: BOYS & GIRLS CLUBS OF CENTRAL FLORIDA RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT GRANT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

5,000.

G ROXY AND ELIZABETH C MARTIN 59-6920693 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: LIVING MESSAGE CHURCH RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT GRANT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: LAKE SUMTER STATE COLLEGE SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Τ AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: UNIVERSITY OF CENTRAL FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: 750. AMOUNT OF GRANT PAID RECIPIENT NAME: UNIVERSITY OF CENTRAL FLORIDA SCHOLARSHIP RECIPIENT **RELATIONSHIP:** NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Т _____

RECIPIENT NAME: UNIVERSITY OF CENTRAL FLORIDA SCHOLARSHIP RECIPIENT **RELATIONSHIP:** NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι AMOUNT OF GRANT PAID 1,500. RECIPIENT NAME: UNIVERSITY OF CENTRAL FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 750. RECIPIENT NAME: UNIVERSITY OF SOUTH FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Τ 2,500. AMOUNT OF GRANT PAID RECIPIENT NAME: UNIVERSITY OF SOUTH FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 1,750.

RECIPIENT NAME: FREED-HARDEMAN UNIVERSITY SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι AMOUNT OF GRANT PAID RECIPIENT NAME: SOUTHEASTERN UNIVERSITY SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 1,750. RECIPIENT NAME: FLORIDA STATE UNIVERSITY SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 1,750. RECIPIENT NAME: FLORIDA STATE UNIVERSITY SCHOLARSHIP RECIPIENT **RELATIONSHIP:** NONE PURPOSE OF GRANT:

AMOUNT OF GRANT PAID

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

2,500.

G ROXY AND ELIZABETH C MARTIN 59-6920693 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: UNIVERSITY OF FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Т RECIPIENT NAME: UNIVERSITY OF FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: 2,500. AMOUNT OF GRANT PAID RECIPIENT NAME: UNIVERSITY OF SOUTH FLORIDA SCHOLARSHIP RECIPIENT RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι AMOUNT OF GRANT PAID 750.

TOTAL GRANTS PAID: 186,500.

25