Form. 990-PF Department of the Treasury Internal Revenue Service EXTENDED TO NOVEMBER 15, **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                                    | cale        | ndar year 2018 or tax year                                     | beginning  |  | , and ending  | ·  |  |
|--|-------------|--|--|--|---|--|--|
| Na                                     | ame c       | f foundation   |  |  |   | A Employer identification                              | n number   |
| _I                                     | ROB         | ERT L OARE,  | JR CHARITAB  | LE FOUNDATION  | N   | 35-6724790   | )  |
|  |             | and street (or P O box number if                               |  | •  | Room/suite  | B Telephone number                                     |  |
|  |             | 21 NORTHWEST   |  |  |   | 386-736-92   |  |
|  | -           | town, state or province, cou<br>.CHUA , FL 32                  | untry, and ZIP or foreign p<br>615                 | postal code  |   | C If exemption application is p                        | pending, check here  |
|  | _           | k all that apply:  | Initial return                                     | Initial return of a  | former public charity                                   | D 1 Foreign organization                               | s, check here  |
|  |             | <i></i>  | Final return                                       | Amended return   |   |  |  |
| <u> </u>                               |             |  | Address change                                     | Name change  |   | 2 Foreign organizations me<br>check here and attach co | omputation   |
| H_                                     | Chec        | k type of organization:  | X Section 501(c)(3) e                              | xempt private foundation   | $\cap$ U  | E If private foundation sta                            | atus was terminated  |
|  |             | ection 4947(a)(1) nonexemp                                     |  | Other taxable private found  |   | under section 507(b)(1                                 | )(A), check here $ ightharpoonup$  |
|  |             | arket value of all assets at e                                 | ·   —  | ting method: X Cash  | Accrual   | F If the foundation is in a                            |  |
|  |             | Part II, col. (c), line 16)                                    |  | Other (specify)<br>mn (d) must be on cash bas  | ue )  | under section 507(b)(1                                 | )(B), check here   |
|  | ≻\$<br>art√ |  |  | Y  |   | ( ) A d  | (d) Dishursoments  |
| <u></u>                                | arti        | (The total of amounts in columnecessarily equal the amounts    | nns (b), (c), and (d) may not<br>s in column (a) ) | (a) Revenue and expenses per books   | (b) Net investment income                               | (c) Adjusted net income                                | (d) Disbursements<br>for charitable purposes<br>(cash basis only)  |
|  | 1           | Contributions, gifts, grants                                   | s, etc., received                                  |  | さんだいない  | <del></del>  | ,让我是有哪种物种心理  |
|  | 2           | Check X if the foundation interest on savings and tempor       |  | 八、理论中心等的   | 16位分。广始度"管  | "不够积累"的"公司"。   | <del></del>  |
|  | 3           | cash investments   | ary  | 20 005   | 20.005  |  | 等。 人名英格勒人  |
|  | 4           | Dividends and interest fro                                     | m securities                                       | 32,805.  | 32,805.   | ļ  | STATEMENT: 1   |
|  | 1           | Gross rents  |  | Small at 2 to the first to the letter  | managed toward . The Folge & Michigal Comments          | THE LOCAL PROPERTY OF A PROPERTY OF                    | Mary Mary Court and the state of the state o |
|  | . ]         | Net rental income or (loss)                                    |  |  | ALEXANDE PARTITION                                      |  |  |
| 9                                      | וע          | Net gain or (loss) from sale of a<br>Gross sales price for all | 275,929.   | 57,633.  | (1) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2          |  | VED NO NEW YEAR  |
| D WOO                                  |             | assets on line 6a  Capital gain net income (from P             |  | TYTE TO THE TOTAL OF THE TOTAL  | 57,633.   | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -                |  |
| á                                      | ( g         | Net short-term capital gair                                    |  | Destablished the   | 少年5.00 Att Att Att Att                                  |  | 2019 20 0 30 20  |
|  | ٩           | Income modifications   | 1  | Property States  | <del></del>   | <u> </u>   | SCHOOL SO WELLER   |
|  | 10a         | Gross sales less returns and allowances                        |  | <del></del>  | THE THE THE STATE OF THE PARTY.                         |  | THE PROPERTY.  |
|  | Ι.          | Less Cost of goods sold  |  | <b>数位的是证券的股份的</b>  | WAR WHEN AND BEEN WAR                                   | W SE OGDEN   | TO I HAVE WHEN SEL   |
|  | C           | Gross profit or (loss)   |  |  | <b>深心思。这种证实了在</b>                                       |  | CHAMPINEW'S  |
|  | 11          | Other income   |  | 700.   | 700.  |  | STATEMENT 24   |
|  | 12          | Total Add lines 1 through                                      | 111  | 91,138.  | 91,138.   |  | CHARACTER ST   |
| 2                                      | 13          | Compensation of officers, direct                               | tors, trustees, etc                                | 0.   | 0.  |  | 0.   |
| にせって                                   | 14          | Other employee salaries ai                                     | •  |  |   |  |  |
| ٥ ,                                    |             | Pension plans, employee b                                      |  | 14 204   |   |  | 14 204   |
| 9                                      | 16a         | Legal fees   | STMT 3   | 14,384.  | 0.  | ļ  | 14,384.  |
| CAR.                                   | j b         | Accounting fees  | STMT 4   | 500.   | 0.  | <del> </del>   | 500.   |
| ה ע <u>ו</u>                           | 1 , C       | Other professional fees<br>Interest                            |  |  |   | <del> </del>   | <del> </del>   |
| ֓֞֝֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓ | 17<br>18    | Taxes  | STMT 5   | 2,597.   | 1,561.  | -  | 0.   |
| d Administrative Expensi               | 19          | Depreciation and depletion                                     |  | 2,3576   | 1,301.  | <del>                                     </del>       | PROPERTY PROPERTY.   |
|  | 20          | Occupancy  | 1  |  |   |  | A. N. a. A. C. W. 473 1 M. A.  |
| \ \frac{1}{4}                          | 21          | Travel, conferences, and m                                     | neetinas   |  |   |  |  |
|  |             | Printing and publications                                      |  |  |   |  | ٠.   |
|  |             | Other expenses   | STMT 6   | 8,808.   | 8,808.  |  | 0.   |
| perating                               | 24          | Total operating and admir                                      |  |  |   |  |  |
| Jer.                                   |             | expenses Add lines 13 th                                       |  | 26,289.  | 10,369.   |  | 14,884.  |
| Ō                                      |             | Contributions, gifts, grants                                   | s paid   | 85,500.  | THE THE SPINSHE   | <b>发行的现在分词形式</b>                                       | 85,500.  |
|  | 26          | Total expenses and disbu                                       | rsements   |  |   |  |  |
|  |             | Add lines 24 and 25  |  | 111,789.   | 10,369.   |  | 100,384.   |
|  | 27          | Subtract line 26 from line                                     | 12:  | 00.5=1   | WITH THE PERSON   |  | WATER TO THE   |
|  | Ι.          | Excess of revenue over expense                                 |  |  | Estra destination                                       |  | HET LOST AND THE AND A TO A  |
|  | þ           | Net investment income (if                                      | negative, enter -0-)                               | SAME ASSESSMENT OF A SAME  | 80,769.   | AND                | THE LAND BY AND STATE  |
|  |             | Adjusted not income tit not                                    | coture ontor O '                                   | CHARLES STATE OF THE STATE OF T | (1) 从2006年,2016年12日 12日 12日 12日 12日 12日 12日 12日 12日 12日 | N 7/2  | 14 中国 医内部系统 法政策 人名英贝   |

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions

823511 12-11-18

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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See the Part VI instructions

Form 990-PF (2018)

| OCO DE (OCA) ' DODEDE I ONDE ID QUADITANT  | n morninamion 25 670   | 4700     | D   |
|--|--|----------|---|
| rm 990-PF (2018) ROBERT L OARE, JR CHARITABL   | <u>JE FOUNDATION 35-672</u><br>4940(a), 4940(b), 4940(e), or 4948 - see                  |          | Page<br>ons)                                  |
| 1a Exempt operating foundations described in section 4940(d)(2), check here  | and enter "N/A" on line 1.   | . ,      |   |
| Date of ruling or determination letter: (attach copy of lette  |  |          |   |
| ${f b}$ Domestic foundations that meet the section 4940(e) requirements in Part V, check he  | ere $\triangleright X$ and enter 1%  |          | 808   |
| of Part I, line 27b  |  |          | •   |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, el  |  |          | <u>,                                     </u> |
| Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations of   | only; others, enter -0-)   |          | 0   |
| Add lines 1 and 2  | 3  |          | 808   |
| Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations  |  |          | 0   |
| Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -   | 0-   |          | 808   |
| Credits/Payments:  |  | r        |   |
| a 2018 estimated tax payments and 2017 overpayment credited to 2018  | 6a 800 ·   |          | •   |
| b Exempt foreign organizations - tax withheld at source  | 050  | , , ,    |   |
| c Tax paid with application for extension of time to file (Form 8868)  |  | ,        |   |
| d Backup withholding erroneously withheld  Total credits and payments. Add lines 6a through 6d.  | 6d   0 - 7   | 1        | 650   |
| Total credits and payments. Add lines 6a through 6d  Enter any penalty for underpayment of estimated tax. Check here   |  | <u> </u> | 030   |
| Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed   | 9  |          |   |
| Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount over   |  |          | 842   |
| Enter the amount of line 10 to be Credited to 2019 estimated tax   | 842. Refunded 11   |          | 0 1 0   |
| art VII-A Statements Regarding Activities  | O TE O MICHANGE P 1 TI   |          | <u>_</u>                                      |
| a During the tax year, did the foundation attempt to influence any national, state, or local   | al legislation or did it participate or intervene in                                     | TYe      | s N   |
| any political campaign?  | u. 10g. 0. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.  | 1a       | Х   |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political   | purposes? See the instructions for the definition  | 1b       | X   |
| If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and c  |  | , ,      | <u> </u>                                      |
| distributed by the foundation in connection with the activities  |  |          |   |
| c Did the foundation file Form 1120-POL for this year?   |  | 10       | X   |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed duri   | ing the year:  |          |   |
| (1) On the foundation. $\blacktriangleright$ \$ (2) On foundation ma   | _  |          |   |
| e Enter the reimbursement (if any) paid by the foundation during the year for political e managers. ► \$ 0 •   |  |          | *   |
| Has the foundation engaged in any activities that have not previously been reported to   | o the IRS?   | 2        | Х   |
| If "Yes," attach a detailed description of the activities.   |  |          | -   |
| Has the foundation made any changes, not previously reported to the IRS, in its gove   | rning instrument, articles of incorporation, or  |          |   |
| bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change  |  | 3        | X   |
| a Did the foundation have unrelated business gross income of \$1,000 or more during the  |  | 4a       | X   |
| o If "Yes," has it filed a tax return on Form 990-T for this year?   | N/A  | 4b       |   |
| Was there a liquidation, termination, dissolution, or substantial contraction during the   | e year?  | 5        | X   |
| If "Yes," attach the statement required by General Instruction T   |  |          |   |
| Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfies  | sfied either.  | ,        | f   |
| By language in the governing instrument, or  |  |          |   |
| By state legislation that effectively amends the governing instrument so that no mail  | ndatory directions that conflict with the state law                                      |          |   |
| remain in the governing instrument?  |  | 6 X      |   |
| remain in the governing manarient.   | Paramataka Dankili and Jak and Dank VIII   | 7   X    | :   |
|  | " complete Part II, col. (c), and Part XV  |          |   |
|  | complete Part II, col. (c), and Part XV  |          |   |
| Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," Enter the states to which the foundation reports or with which it is registered. See ins   |  |          | ,   |
| Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes,"  Enter the states to which the foundation reports or with which it is registered. See ins  IN  | structions.  |          | 1.  |
| Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes,"  a Enter the states to which the foundation reports or with which it is registered. See ins  IN  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to   | structions.  |          | · .   |
| Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes,"  a Enter the states to which the foundation reports or with which it is registered. See ins  IN  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to of each state as required by General Instruction G? If "No," attach explanation | o the Attorney General (or designate)  | 8b X     |   |
| Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes,"  a Enter the states to which the foundation reports or with which it is registered. See ins  IN  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to   | o the Attorney General (or designate) g of section 4942(j)(3) or 4942(j)(5) for calendar |          | · .   |

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had not been removed from jeopardy before the first day of the tax year beginning in 2018?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

| Form 990-PF (2018) ROBERT L OARE, JR CHARIT  |  |                             | 35-6724  | 790          |          | Page 6        |
|--|--|-----------------------------|--|--------------|----------|---------------|
| Part VII-B   Statements Regarding Activities for Which F   | orm 4720 May Be R                        | equired <sub>(contin</sub>  | ued)   |              |          |               |
| 5a During the year, did the foundation pay or incur any amount to:   |  |                             |  |              | Yes      | No            |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section                                      |  |                             | es 🗓 No  | ·            |          | , 1           |
| (2) Influence the outcome of any specific public election (see section 4955); of                                     | or to carry on, directly or indire       |                             | <b>□</b> ▼□  |              |          |               |
| any voter registration drive?  | •  | ==                          | es X No  | ١. ١         |          |               |
| (3) Provide a grant to an individual for travel, study, or other similar purposes                                    |  | Y                           | es X No  |              | <i>:</i> | ,             |
| (4) Provide a grant to an organization other than a charitable, etc., organizatio<br>4945(d)(4)(A)? See instructions | n described in section                   |                             | es X No  | - 1          |          | ١ ،           |
| (5) Provide for any purpose other than religious, charitable, scientific, literary,                                  | or adjugational nurnages or f            | <del></del>                 | es A NO  | 1            |          |               |
| the prevention of cruelty to children or animals?  | , or educational purposes, or r          |                             | es X No  | ł            | -        |               |
| b if any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un                                | der the exceptions described i           | <del></del> _               | Co (==) 140  |              | _        |               |
| section 53.4945 or in a current notice regarding disaster assistance? See instri                                     |  |                             | N/A  | 5b           |          |               |
| Organizations relying on a current notice regarding disaster assistance, check l                                     |  |                             | ▶□   | ,            |          |               |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f                                    |  | ned                         |  | . [          |          | , [           |
| expenditure responsibility for the grant?  |  |                             | es 🔲 No  | ٠,,          | - 4      |               |
| If "Yes," attach the statement required by Regulations section 53.4945-5(d).   |  |                             |  |              | 1        |               |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to                                | pay premiums on                          | _                           | _ 1  | 1            |          | •             |
| a personal benefit contract?   |  | Y                           | es 🗓 No  | ,            |          |               |
| <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p                           | ersonal benefit contract?                |                             | L  | 6b           |          | <u>X</u>      |
| If "Yes" to 6b, file Form 8870   |  |                             |  | ļ            |          |               |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s                                 |  | Yo                          | es X No  |              |          |               |
| <b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu                            |  |                             | N/A  | 7b           |          | <del></del> - |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$                                    | 1,000,000 in remuneration or             | <u></u>                     | _ <del></del>  | ĺ            | •        | ٠, (          |
| excess parachute payment(s) during the year?  Part VIII Information About Officers, Directors, Truste                | es Foundation Man                        |                             | es X No  |              |          |               |
| Paid Employees, and Contractors  | ees, i oundation mai                     | lagers, riigiliy            |  |              |          |               |
| 1 List all officers, directors, trustees, and foundation managers and the  | neir compensation.                       |                             |  |              |          |               |
|  | (b) Title, and average                   | (c) Compensation            | (d) Contributions to<br>employee benefit plans<br>and deferred | (            | e) Expi  | ense          |
| (a) Name and address   | hours per week devoted to position       | (If not paid,<br>enter -0-) | and deferred compensation                                      | au           | allowar  | nces          |
| ELIZABETH OARE NEALE   | TRUSTEE/DIREC                            | TOR                         |  |              | _        |               |
| 9006 DAYFLOWER STREET  |  |                             | _  |              |          |               |
| PROSPECT, KY 40059   | 0.00                                     | 0.                          | 0.   | 4            |          | 0.            |
| ROBERT L OARE III  | TRUSTEE/DIREC                            | ror                         |  |              |          |               |
| 13621 NW 112 AVENUE  | 0 00                                     |                             |  |              |          | ^             |
| ALACHUA, FL 32615  | 0.00                                     | 0.                          | 0.   | +            |          | 0.            |
|  |  |                             |  |              |          |               |
|  |  |                             |  | 1            |          |               |
|  |  |                             |  | ╆            |          |               |
|  | 1  | 1                           |  |              |          |               |
|  |  |                             |  | ļ            |          |               |
| 2 Compensation of five highest-paid employees (other than those inc  |  | enter "NONE."               | (4)  |              |          |               |
| (a) Name and address of each employee paid more than \$50,000  | (b) Title, and average<br>hours per week | (c) Compensation            | (d) Contributions to<br>employee benefit plans<br>and deferred | ac (         | e) Expe  | ense<br>other |
| <del></del>  | devoted to position                      | (c) compensation            | compensation   |              | illowan  |               |
| NONE   |  |                             |  |              |          |               |
|  |  |                             |  |              |          |               |
|  |  |                             |  | 1            |          |               |
|  |  |                             | <u> </u>   | ┼            |          |               |
|  |  |                             | li   |              |          |               |
|  |  |                             |  | <del> </del> |          |               |
|  |  |                             |  |              |          |               |
|  |  |                             |  |              | _        |               |
|  |  |                             |  |              |          |               |
| Total number of other employees paid over \$50,000   |  | <del></del>                 |  | 000          | -PF/     | 0             |
|  |  |                             | Farm   | , uui ì      | -PF/     | 201Q\         |

| Part V(II Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)  3 Five highest-paid independent contractors for professional services. If none, enter "NONE."  (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Co NONE | empensation |
|--|-------------|
| 3 Five highest-paid independent contractors for professional services. If none, enter "NONE."  (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Co  | impensation |
|  | mpensation  |
| NONE   |             |
|  |             |
|  |             |
|  |             |
|  |             |
|  |             |
|  |             |
|  |             |
|  |             |
|  |             |
| Total number of others receiving over \$50,000 for professional services    Part IX-A   Summary of Direct Charitable Activities  | 0           |
|  |             |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  Expensi  | es          |
| 1 N/A  |             |
|  |             |
|  |             |
| 2  |             |
|  |             |
| 3  |             |
| ·  |             |
|  |             |
| 4  |             |
|  |             |
| Part IX-B Summary of Program-Related Investments   |             |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount   |             |
| 1 N/A  |             |
|  |             |
|  |             |
| 2  |             |
|  |             |
| All other program-related investments. See instructions  |             |
| 3  |             |
|  |             |
|  |             |
|  |             |
|  |             |
| Total Add lines 1 through 3  | 0.          |
| Total. Add lines 1 through 3  Form 990-  |             |

| E  | Part X: Minimum Investment Return (All domestic foundations must complete this part. Foreign four   | ndations,    | see instructions) |
|----|---|--------------|-------------------|
| i  | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:   |              |                   |
| а  |   | 1a           | 1,861,896.        |
| b  |   | 1b           | 62,736.           |
| C  |   | 1c           |                   |
| d  |   | 1d           | 1,924,632.        |
| е  | Reduction claimed for blockage or other factors reported on lines 1a and  | · ·          |                   |
|    | 1c (attach detailed explanation) 1e 0.  | }            |                   |
| 2  | Acquisition indebtedness applicable to line 1 assets  | 2            | 0.                |
| 3  | Subtract line 2 from line 1d  | 3            | 1,924,632.        |
| 4  | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)   | 4            | 28,869.           |
| 5  | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.   | 5            | 1,895,763.        |
| 6  | Minimum investment return Enter 5% of line 5  | 6            | 94,788.           |
| P  | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an  | d certain    |                   |
|    | foreign organizations, check here  and do not complete this part.)  |              |                   |
| 1  | Minimum investment return from Part X, line 6   | 1            | 94,788.           |
| 2a | Tax on investment income for 2018 from Part VI, line 5  |              |                   |
| b  | Income tax for 2018. (This does not include the tax from Part VI.)  |              |                   |
| C  | Add lines 2a and 2b   | 2c           | 808.              |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1   | 3            | 93,980.           |
| 4  | Recoveries of amounts treated as qualifying distributions   | 4            | 0.                |
| 5  | Add lines 3 and 4   | 5            | 93,980.           |
| 6  | Deduction from distributable amount (see instructions)  | 6            | 0.                |
| 7  | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1  | 7            | 93,980.           |
| P  | art XII Qualifying Distributions (see instructions)   |              |                   |
| 1  | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:  |              |                   |
| а  | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26  | 1a           | 100,384.          |
| þ  | Program-related investments - total from Part IX-B  | 1b           | 0.                |
| 2  | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes   | 2            |                   |
| 3  | Amounts set aside for specific charitable projects that satisfy the:  |              |                   |
| а  | Suitability test (prior IRS approval required)  | 3a           |                   |
| b  | Cash distribution test (attach the required schedule)   | 3b           | 100 001           |
| 4  | Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4   | 4            | 100,384.          |
| 5  | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment  |              | 000               |
|    | income Enter 1% of Part I, line 27b   | 5            | 808.              |
| 6  | Adjusted qualifying distributions. Subtract line 5 from line 4  | 6            | 99,576.           |
|    | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years. | ualifies for | the section       |

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Page 9

| Part XIII Undistributed Income (se   | e instructions) |                            |             |             |
|--|-----------------|----------------------------|-------------|-------------|
| •  | (a)<br>Corpus   | (b)<br>Years prior to 2017 | (c)<br>2017 | (d)<br>2018 |
| 1 Distributable amount for 2018 from Part XI, line 7   |                 |                            |             | 93,980.     |
| 2 Undistributed income, if any, as of the end of 2018  |                 |                            |             |             |
| a Enter amount for 2017 only   |                 |                            | 20,967.     |             |
| b Total for prior years:   |                 |                            |             |             |
| ,,   |                 | 0.                         |             |             |
| 3 Excess distributions carryover, if any, to 2018:   |                 |                            |             |             |
| a From 2013  |                 |                            |             |             |
| <b>b</b> From 2014   |                 |                            |             |             |
| c From 2015  |                 |                            |             |             |
| d From 2016  |                 |                            | }           |             |
| e From 2017  |                 |                            |             |             |
| f Total of lines 3a through e  | 0.              |                            |             |             |
| 4 Qualifying distributions for 2018 from   |                 |                            |             |             |
| Part XII, line 4: ► \$ 100,384.  |                 |                            |             |             |
| a Applied to 2017, but not more than line 2a   |                 |                            | 20,967.     |             |
| <b>b</b> Applied to undistributed income of prior  |                 |                            |             |             |
| years (Election required - see instructions)   |                 | 0.                         |             |             |
| c Treated as distributions out of corpus   |                 |                            |             |             |
| (Election required - see instructions)   | 0.              |                            |             |             |
| d Applied to 2018 distributable amount   |                 |                            |             | 79,417.     |
| e Remaining amount distributed out of corpus   | 0.              |                            |             |             |
| 5 Excess distributions carryover applied to 2018   | 0.              |                            |             | 0.          |
| (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  | 0.              |                            |             |             |
| <b>b</b> Prior years' undistributed income. Subtract   |                 |                            |             |             |
| line 4b from line 2b   |                 | 0.                         |             |             |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed |                 | 0.                         |             |             |
| d Subtract line 6c from line 6b. Taxable   |                 |                            |             |             |
| amount - see instructions  |                 | 0.                         |             |             |
| e Undistributed income for 2017. Subtract line   |                 |                            |             |             |
| 4a from line 2a. Taxable amount - see instr.   |                 |                            | 0.          |             |
| f Undistributed income for 2018. Subtract  |                 |                            |             |             |
| lines 4d and 5 from line 1. This amount must   |                 |                            |             |             |
| be distributed in 2019   |                 |                            |             | 14,563.     |
| 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)  | 0.              |                            |             |             |
| 8 Excess distributions carryover from 2013   |                 |                            |             |             |
| not applied on line 5 or line 7  | 0.1             |                            |             |             |
| 9 Excess distributions carryover to 2019   |                 |                            |             | <del></del> |
| Subtract lines 7 and 8 from line 6a  | 0.              |                            | L           |             |
| 10 Analysis of line 9;   |                 |                            |             |             |
| a Excess from 2014   |                 | J                          |             | •           |
| <b>b</b> Excess from 2015  |                 |                            |             |             |
| c Excess from 2016   |                 |                            |             |             |
| d Excess from 2017   |                 |                            | ţ           |             |
| e Excess from 2018   |                 |                            |             |             |

| Form 990-PF (2018) ROBERT L<br>Part:XIV Private Operating For  | OARE, JR                | CHARITABLE               | FOUNDATION                | 35-672<br>N/A                                     | 24790 Page                            |
|--|-------------------------|--------------------------|---------------------------|---|---------------------------------------|
| 1 a If the foundation has received a ruling or o   |                         |                          | 1-A, question 3)          | N/A   | /                                     |
| foundation, and the ruling is effective for 2  |                         |                          | •                         |   |                                       |
| <b>b</b> Check box to indicate whether the foundat   |                         | •                        | in section                | 4942(J)(3) or 494                                 | 12(1)(5)                              |
| 2 a Enter the lesser of the adjusted net   | Tax year                |                          | Prior 3 years             | 7   | <del></del>                           |
| income from Part I or the minimum  | (a) 2018                | (b) 2017                 | (c) 2016                  | (d) 2015  | (e) Total                             |
| investment return from Part X for  |                         |                          | T                         |   |                                       |
| 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  |                         |                          |                           | 1   |                                       |
| exempt activities  |                         |                          | <del>  / </del>           | _ <del> </del>                                    | <del></del>                           |
| e Qualifying distributions made directly   |                         |                          |                           | i   |                                       |
| for active conduct of exempt activities.   |                         |                          |                           |   |                                       |
| Subtract line 2d from line 2c 3 Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter:                  |                         |                          |                           |   |                                       |
| (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i)  |                         | <del>/</del>             |                           |   |                                       |
| b "Endowment" alternative test - enter<br>2/3 of minimum investment return<br>shown in Part X, line 6 for each year<br>listed                    |                         |                          |                           |   |                                       |
| 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) |                         |                          |                           |   |                                       |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)                                     |                         |                          |                           |   |                                       |
| (3) Largest amount of support from   |                         |                          |                           |   |                                       |
| an exempt organization   | <del></del>             |                          | <del> </del>              | · <del>                                    </del> | · · · · · · · · · · · · · · · · · · · |
| Part:XV3 Supplementary Inform  | ation (Complet          | e this part only i       | f the foundation          | had \$5 000 or more                               | in accete                             |
| at any time during the   |                         |                          | i dic roundadion          | 1100 00,000 01 111010                             |                                       |
| 1 Information Regarding Foundation I   | <del></del>             | <del></del>              |                           | <del></del>                                       | · · · · · · · · · · · · · · · · · · · |
| a List any managers of the foundation who h  | _                       | han 2% of the total cont | ributions received by the | e foundation before the close                     | of any tay                            |
| year (but only if they have contributed mor  |                         |                          | ibutions received by the  | c roundation before the crose                     | or any tax                            |
| NONE   |                         |                          |                           |   |                                       |
| b List any managers of the foundation who o other entity) of which the foundation has a  |                         |                          | or an equally large port  | ion of the ownership of a parti                   | nership or                            |
| NONE   |                         | •                        |                           |   |                                       |
| 2 Information Regarding Contribution   | Grant Gift Loan         | Scholarship etc. Dr.     | ograms:                   |   |                                       |
| Check here ► X if the foundation only the foundation makes gifts, grants, etc., to   | makes contributions to  | preselected charitable   | organizations and does    |   | ts for funds. If                      |
| ${f a}$ The name, address, and telephone number ${f N/A}$  | or email address of the | person to whom applic    | ations should be addres   | ssed:   |                                       |
| b The form in which applications should be s   | ubmitted and informati  | on and materials they sh | iould include:            | <del></del>                                       | <del></del>                           |
| c Any submission deadlines:  |                         |                          |                           |   |                                       |
| N/A  | ush no hu gang-anhi     | arana abaritahla fialda  | kinds of institutions or  | other factors:                                    |                                       |
| <b>d</b> Any restrictions or limitations on awards, s $N/A$  | uch as by geographical  | areas, charitable helds, | KINOS OF INSTITUTIONS, OF | omer factors.                                     |                                       |
| 323601 12-11-18  | <del></del>             |                          | <del></del>               |   | orm <b>990-PF</b> (2018               |

Part XV | Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year CHILDREN'S BURN CAMP OF NORTH FLORIDA PC GENERAL SUPPORT P.O. BOX 368 TALLAHASSEE, FL 32302 8,000. CHILDREN'S HOME SOCIETY OF ÞС GENERAL SUPPORT GAINESVILLE FLORIDA 5950 NORTHWEST 1ST PLACE 5,000. GAINESVILLE, FL 32607 LIFEHOUSE INC. þс GENERAL SUPPORT 2710 RIEDLING DRIVE LOUISVILLE, KY 40206 10,000. MIRIAM'S HOUSE - THE PROMISES GENERAL SUPPORT FOUNDATION 4419 INGLEWOOD BLVD LOS ANGELES, CA 90066 5,000. NORTHEAST CHRISTIAN CHURCH OF ÞС GENERAL SUPPORT JEFFERSON COUNTY, INC. 9900 BROWNSBORO RD LOUISVILLE, KY 40241-1128 5,000. SEE CONTINUATION SHEET(S) 85,500. **▶** 3a Total b Approved for future payment NONE 0. ▶ 3b Total Form 990-PF (2018)

| orm 990-PF (2018) ROBERT L OARE Part XVI-A Analysis of Income-Proc                      |  |                    | NDATION                       |                            | 724790 Pag                                  |
|---|--|--------------------|-------------------------------|----------------------------|---|
| nter gross amounts unless otherwise indicated.  |  | usiness income     | Excluded b                    | y section 512, 513, or 514 | (0)   |
| Program service revenue:  | (a)<br>Business<br>code                          | (b)<br>Amount      | (C)<br>Exclu-<br>sion<br>code | (d)<br>Amount              | (e)<br>Related or exempt<br>function income |
| a   |  |                    |                               |                            |   |
| b   |  |                    |                               |                            |   |
| c   |  |                    |                               |                            |   |
| d   | _  |                    |                               |                            |   |
| e   | _  | <u>-</u>           | _  _                          |                            |   |
| f   | _  |                    |                               |                            |   |
| g Fees and contracts from government agencies   |  |                    |                               |                            |   |
| Membership dues and assessments   |  |                    |                               |                            |   |
| Interest on savings and temporary cash investments                                      |  |                    |                               |                            |   |
| Dividends and interest from securities  |  | ··                 | 14                            | 32,805.                    |   |
| Net rental income or (loss) from real estate:   |  |                    |                               |                            |   |
| a Debt-financed property  |  |                    |                               |                            |   |
| b Not debt-financed property  |  |                    |                               |                            |   |
| Net rental income or (loss) from personal   |  |                    |                               |                            |   |
| property  | <u> </u>   |                    |                               | 700                        |   |
| Other investment income   | <del></del>                                      |                    | 14                            | 700.                       | <del></del>                                 |
| Gain or (loss) from sales of assets other   | 1  |                    | 18                            | 57 622                     |   |
| than inventory  |  |                    | 10-                           | 57,633.                    |   |
| Net income or (loss) from special events Gross profit or (loss) from sales of inventory | <del>                                     </del> | <del></del>        |                               |                            |   |
| Other revenue:  | <del>                                     </del> |                    | <del>-  -</del>               |                            | <del></del>                                 |
| _   |  |                    |                               |                            |   |
| a   | _  | <del></del>        |                               |                            | <del></del>                                 |
| С   |  | <del></del>        | ·   -                         |                            | <del> </del>                                |
| d   |  |                    |                               |                            |   |
| e   |  |                    |                               |                            |   |
| Subtotal. Add columns (b), (d), and (e)   |  | 0                  |                               | 91,138.                    |   |
| Total Add line 12, columns (b), (d), and (e)  |  |                    |                               | 13                         | 91,13                                       |
| ee worksheet in line 13 instructions to verify calculations                             | <u> </u>   |                    |                               |                            |   |
| Part XVI-B Relationship of Activities   | to the Accomp                                    | lishment of E      | xempt Pur                     | poses                      |   |
|   |  |                    |                               | ·                          |   |
| ine No Explain below how each activity for which in                                     |  |                    | I-A contributed               | importantly to the accompl | ishment of                                  |
| ▼ the foundation's exempt purposes (other th  | an by providing tunds                            | or such purposes). |                               |                            | - · <del></del> ·                           |
|   |  |                    |                               |                            |   |
|   |  |                    |                               |                            |   |
|   |  |                    | <del></del>                   | <del></del>                | <del></del>                                 |
|   |  |                    |                               | <del></del>                | <del>"</del>                                |
|   |  |                    |                               |                            |   |

Form **990-PF** (2018)

823621 12-11-18

## Form 990-PF (2018) ROBERT L OARE, JR CHARITABLE FOUNDATION 35-6724790 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations**

| 1     | Did the o   | roanization directly or indir         | rectly engage in any     | of the following  | ng with any other organization        | on described in secti                   | on 501(c)                          | T            | Yes      | No       |
|-------|-------------|---------------------------------------|--------------------------|-------------------|---------------------------------------|---|------------------------------------|--------------|----------|----------|
| •     |             |                                       |                          |                   | g to political organizations?         | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | o oo .(o,                          |              |          |          |
| а     |             | s from the reporting founda           |                          |                   | •                                     |   |                                    | 1 1          | Ì        | ĺ        |
| •     | (1) Cash    |                                       | 2                        | or on one or      | garricanori on                        |   |                                    | 1a(1)        |          | X        |
|       | (2) Othe    |                                       |                          |                   |                                       |   |                                    | 1a(2)        |          | <u>x</u> |
| h     | • •         | nsactions.                            |                          |                   |                                       |   |                                    | 1.5/5/       |          |          |
| ٠     |             | s of assets to a noncharitat          | hle evemnt organiza      | tion              |                                       |   |                                    | 1b(1)        |          | X        |
|       |             | hases of assets from a nor            | · -                      |                   |                                       |   |                                    | 15(2)        |          | <u>x</u> |
|       |             | al of facilities, equipment,          |                          | n garrization     |                                       |   |                                    | 1b(3)        | $\dashv$ | <u>x</u> |
|       |             | nbursement arrangements               |                          |                   |                                       |   |                                    | 1b(4)        |          | <u>x</u> |
|       |             |                                       |                          |                   |                                       |   |                                    |              |          | X        |
|       |             | is or loan guarantees                 | mbarahin ay fijadira.    |                   |                                       |   |                                    | 1b(5)        |          | X        |
|       |             | ormance of services or mer            |                          |                   |                                       |   |                                    | 1b(6)        |          | <u>X</u> |
|       |             | of facilities, equipment, mai         | -                        |                   | · -                                   |   |                                    | 1c           |          |          |
|       |             | · · · · · · · · · · · · · · · · · · · |                          | -                 | dule. Column (b) should alv           |   |                                    |              | īs,      |          |
|       |             |                                       |                          |                   | ed less than fair market valui        | e in any transaction                    | or snaring arrangement, sn         | nı wc        |          |          |
|       |             | d) the value of the goods, o          |                          |                   |                                       | T (1)                                   |                                    |              |          |          |
| (a) L | ne no       | (b) Amount involved                   | (c) Name of              |                   | e exempt organization                 | (d) Description                         | of transfers, transactions, and sh | aring arrai  | ngemen   | is       |
|       |             |                                       | <u> </u>                 | N/A               |                                       | <del></del>                             |                                    |              |          |          |
|       |             |                                       |                          |                   |                                       |   |                                    |              |          |          |
|       |             |                                       |                          |                   |                                       | <u> </u>                                |                                    |              |          |          |
|       |             |                                       |                          |                   | · · · · · · · · · · · · · · · · · · · |   |                                    |              |          |          |
|       |             | ·                                     |                          |                   | <del></del>                           | <u> </u>                                |                                    |              |          |          |
|       |             |                                       |                          |                   |                                       |   |                                    |              |          |          |
|       |             |                                       |                          |                   |                                       |   |                                    |              |          |          |
|       |             |                                       |                          |                   |                                       | 1                                       |                                    |              |          |          |
|       |             |                                       |                          |                   |                                       |   |                                    |              |          |          |
|       |             |                                       |                          |                   |                                       |   |                                    |              |          |          |
|       |             |                                       |                          |                   |                                       | I                                       |                                    |              |          |          |
|       |             |                                       |                          |                   |                                       |   |                                    |              |          |          |
|       |             |                                       |                          |                   |                                       |   |                                    |              |          |          |
|       |             |                                       |                          |                   | <u> </u>                              |   | <del></del>                        |              |          |          |
|       |             |                                       |                          |                   |                                       | Ţ                                       |                                    |              |          |          |
|       |             |                                       |                          |                   |                                       |   |                                    |              |          |          |
| 2a    | Is the four | ndation directly or indirect          | ly affiliated with, or i | related to, one   | or more tax-exempt organiz            | rations described                       |                                    |              |          |          |
|       |             | 501(c) (other than section            |                          |                   | or more tax exempt or game            |   |                                    | Yes          | X        | l No     |
|       |             | omplete the following sche            |                          | GHOH OZY          |                                       |   | <u> </u>                           | 00           |          | ,        |
|       | 163, 6      | (a) Name of orga                      |                          |                   | (b) Type of organization              |   | c) Description of relationsh       | in           |          |          |
|       |             | N/A                                   | armeditori               |                   | (b) Typo of organization              |   | <u> </u>                           | Р            |          |          |
|       | <del></del> | N/A                                   |                          |                   |                                       |   |                                    |              |          |          |
|       |             |                                       |                          | <del></del>       | <del></del>                           |   |                                    |              |          |          |
|       |             |                                       |                          |                   |                                       |   | <del></del>                        | <del></del>  |          |          |
|       |             |                                       |                          |                   |                                       |   |                                    |              |          |          |
|       | Under       | penalties of periury. I declare th    | nat I have examined this | return, including | accompanying schedules and sta        | tements, and to the bes                 | t of my knowledge                  |              |          |          |
| Sig   |             |                                       |                          |                   | taxpayer) is based on all informati   |   | May                                | the IRS dis  | cuss th  | ıs       |
| Her   |             |                                       | سلمك                     | •                 | 11114/2019                            | Tracker                                 | show                               | n below?     |          | r<br>i - |
|       |             | natura of officer or tructor          | <u> </u>                 | <del></del>       | <del></del>                           | Truster                                 |                                    | Yes          | لـــا    | No       |
|       | Sigi        | nature of officer or trustee          |                          | I D               | Date                                  | Title                                   | Chook Total                        |              |          |          |
|       |             | Print/Type preparer's nar             | me                       | Preparer's su     | gnature                               | Date                                    | Check if PTIN                      |              |          |          |
| Pai   | 4           |                                       | ~~ <                     |                   |                                       | 11/2                                    | self- employed                     | 4404         | 2 -      |          |
|       |             | STEVEN JANS                           |                          | De 1              | guss                                  | 11/4/19                                 |                                    | 4494         |          |          |
|       | parer       | Firm's name ► CBI2                    | Z MHM, LL                | C                 |                                       | ,                                       | Firm's EIN ► 27-36                 | U596         | 9        |          |
| USE   | Only        |                                       |                          |                   |                                       |   |                                    |              |          |          |
|       |             | Firm's address ► 135                  |                          |                   |                                       | 400                                     |                                    |              |          |          |
|       |             | CLIC                                  | EARWATER,                | FL 337            | 762-5539                              |   | Phone no 727-57                    |              |          |          |
|       |             |                                       |                          |                   |                                       |   | For                                | m <b>990</b> | ·PF (    | 2018)    |
|       |             |                                       |                          |                   |                                       |   |                                    |              |          |          |

| ROBERT     | L | OARE, | JR          | CHARITABLE | FOUNDATION | 35-6724790 |
|------------|---|-------|-------------|------------|------------|------------|
| Informatio | n | _     | •           |            |            |            |
|            |   |       | <del></del> |            |            |            |

| Part XV Supplementary Information                                   | OARE, JR CHAR  |  | <u> </u>                         | 24790   |
|---|--|--|----------------------------------|---------|
| 3 Grants and Contributions Paid During the Yo                       |  |  |                                  |         |
| 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  |
| Maine and address (nome of business)                                | or substantial contributor   | recipient  | <del> </del>                     |         |
| •   |  |  |                                  |         |
| RETIREMENT HOME FOR HORSES INC.<br>P.O. BOX 2100                    |  | PC   | GENERAL SUPPORT                  |         |
| ALACHUA, FL 32616-2100  |  |  |                                  | 5,000   |
|   |  |  |                                  |         |
| SALVATION ARMY OF GAINESVILLE FLORIDA                               |  | PC   | GENERAL SUPPORT                  |         |
| 639 E UNIVERSITY AVE<br>GAINESVILLE, FL 32607                       |  |  |                                  | 5,000   |
| ontred vide , The Second  |  |  |                                  |         |
| SANTA FE BABE RUTH CAL RIPKEN INC.                                  |  | PC   | GENERAL SUPPORT                  |         |
| 14300 NW 146TH TERRACE  |  |  |                                  |         |
| ALACHUA, FL 32615   |  |  |                                  | 11,000. |
|   |  |  |                                  |         |
| SANTA FE HIGH SCHOOL TIP-OFF CLUB<br>16213 NORTHWEST US HIGHWAY 441 |  | PC   | GENERAL SUPPORT                  |         |
| ALACHUA, FL 32615   |  |  |                                  | 3,000   |
|   |  |  |                                  |         |
| STEEL TECHNOLOGIES FOUNDATION, INC.                                 |  | ₽C   | GENERAL SUPPORT                  |         |
| 700 NORTH HURSTBOURN PARKWAY, SUITE<br>400 LOUISVILLE, KY 40222     |  |  |                                  | 10,000. |
|   |  |  |                                  |         |
| UNIVERSITY OF FLORIDA FOUNDATION, INC WARRINGTON EXCELLENCE FUND    |  | PC   | GENERAL SUPPORT                  |         |
| P.O. BOX 14425  |  | le .   |                                  |         |
| GAINESVILLE, FL 32604   |  |  | <del> </del>                     | 500.    |
|   |  |  |                                  |         |
| W. W. IRBY ELEMENTARY PTA<br>13505 NORTHWEST 140TH ST.              |  | PC   | GENERAL SUPPORT                  |         |
| ALACHUA, FL 32615   |  | <del>                                     </del> |                                  | 8,000.  |
| WALDEN FUND - WALDEN SCHOOL   |  | PC   | GENERAL SUPPORT                  |         |
| CORPORATION   |  | }  |                                  |         |
| 4238 WESTPORT RD<br>LOUISVILLE KY 40207                             |  |  |                                  | 10,000. |
| · · · · · · · · · · · · · · · · · · ·                               |  |  |                                  | _       |
|   |  |  |                                  |         |
|   |  |  |                                  |         |
|   |  |  |                                  |         |
|   |  |  |                                  |         |
|   |  |  |                                  |         |
|   |  | <u> </u>   |                                  |         |
| Total from continuation sheets                                      |  | <del></del>                                      |                                  | 52,500. |

| Recipient   If recipient is an individual show any relationship to any foundation manager or substantial contributor of recipient   Purpose of grant or contribution of recipient   Purpose of grant or contribution of recipient   Purpose of grant or contribution   | 3 Grants and Contributions Paid During the Yo | ear (Continuation)                                   |    |                     |        |
|--|---|--|----|---------------------|--------|
| Name and address (home of business)  all y boundariest recipient  recipient | Recipient                                     | show any relationship to                             |    | Purpose of grant or | Amount |
| P.O. BOX 2100 ALACHUA, FL 32616-2100  SALVATION ARMY OF GAINESVILLE FLORIDA 639 E UNIVERSITY AVE GAINESVILLE, FL 32607  SANTA FE BABE RUTH CAL RIPKEN INC. 14300 NN 146TH TERRACE ALACHUA, FL 32615  SANTA FE HIGH SCHOOL TIP-OFF CLUB 16213 NORTHWEST US HIGHWAY 441 ALACHUA, FL 32615  STEEL TECHNOLOGIES FOUNDATION, INC. 700 NORTH HURSTBOURN PARKWAY, SUITE 400 LOUISVILLE, KY 40222  INIVERSITY OF FLORIDA FOUNDATION, INC WARRINGTON EXCELLENCE FUND P.O. BOX 14425 SAINESVILLE, FL 32604  W. W. IRBY ELEMENTARY PTA 13505 NORTHWEST 140TH ST. ALACHUA, FL 32615  8, ANALDEN FUND - WALDEN SCHOOL 200 RORGRATION  PC SENERAL SUPPORT  SENERAL SUPPORT  PC SENERAL SUPPORT  SENERAL SUPPORT  PC SENERAL SUPPORT   | Name and address (home or business)           | any foundation manager<br>or substantial contributor |    | contribution        | Amount |
| ALACHUA, FL 32616-2100   | RETIREMENT HOME FOR HORSES INC.               |  | ₽C | GENERAL SUPPORT     |        |
| SALVATION ARMY OF GAINESVILLE FLORIDA 639 E UNIVERSITY AVE GAINESVILLE, FL 32607  SANTA FE BABE RUTH CAL RIPKEN INC. 14300 NW 146TH TERRACE ALACHUA, FL 32615  PC SENERAL SUPPORT  11,  SANTA FE HIGH SCHOOL TIP-OFF CLUB 16213 NORTHWEST US HIGHWAY 441 ALACHUA, FL 32615  STEEL TECHNOLOGIES FOUNDATION, INC. 700 NORTH HURSTBOURN PARKWAY, SUITE 400 LOUISVILLE, KY 40222  UNIVERSITY OF FLORIDA FOUNDATION, INC WARRINGTON EXCELLENCE FUND PC SENERAL SUPPORT  UNIVERSITY OF FLORIDA FOUNDATION, INC WARRINGTON EXCELLENCE FUND P.O. BOX 14425 GAINESVILLE, FL 32604  W. W. IRBY ELEMENTARY PTA 13505 NORTHWEST 140TH ST. ALACHUA, FL 32615  8,4  MALDEN FUND - WALDEN SCHOOL CORPORATION 4238 WESTPORT RD   | P.O. BOX 2100                                 |  |    |                     |        |
| 639 E UNIVERSITY AVE GAINESVILLE, FL 32607  SANTA FE BABE RUTH CAL RIPKEN INC.  14300 NW 146TH TERRACE ALACHUA, FL 32615  11,  SANTA FE HIGH SCHOOL TIP-OFF CLUB 16213 NORTHWEST US HIGHWAY 441 ALACHUA, FL 32615  STEEL TECHNOLOGIES FOUNDATION, INC.  700 NORTH HURSTBOURN PARKWAY, SUITE 400 LOUISVILLE, KY 40222  10,  UNIVERSITY OF FLORIDA FOUNDATION, INC WARRINGTON EXCELLENCE FUND P.O. BOX 14425 GAINESVILLE, FL 32604  W. W. IRBY ELEMENTARY PTA 13505 NORTHWEST 140TH ST. ALACHUA, FL 32615  WALDEN FUND - WALDEN SCHOOL CORPORATION 4238 WESTPORT RD  | ALACHUA, FL 32616-2100                        | <u>-</u>   |    |                     | 5,000  |
| SANTA FE BABE RUTH CAL RIPKEN INC.  14300 NW 146TH TERRACE ALACHUA, FL 32615  SANTA FE HIGH SCHOOL TIP-OFF CLUB 16213 NORTHWEST US HIGHWAY 441 ALACHUA, FL 32615  STEEL TECHNOLOGIES FOUNDATION, INC. 700 NORTH HURSTBOURN PARKWAY, SUITE 400 LOUISVILLE, KY 40222  UNIVERSITY OF PLORIDA FOUNDATION, INC WARRINGTON EXCELLENCE FUND P.O. BOX 14425 GAINESVILLE, FL 32604  W. W. IRBY ELEMENTARY PTA 13505 NORTHWEST 140TH ST. ALACHUA, FL 32615  WALDEN FUND - WALDEN SCHOOL CORPORATION 4238 WESTPORT RD   | SALVATION ARMY OF GAINESVILLE FLORIDA         |  | PC | GENERAL SUPPORT     |        |
| 14300 NW 146TH TERRACE ALACHUA, FL 32615  SANTA FE HIGH SCHOOL TIP-OFF CLUB 16213 NORTHWEST US HIGHWAY 441 ALACHUA, FL 32615  STEEL TECHNOLOGIES FOUNDATION, INC. 700 NORTH HURSTBOURN PARKWAY, SUITE 400 LOUISVILLE, KY 40222  UNIVERSITY OF FLORIDA FOUNDATION, INC WARRINGTON EXCELLENCE FUND P.O. BOX 14425 GAINESVILLE, FL 32604  W. W. IRBY ELEMENTARY PTA 13505 NORTHWEST 140TH ST. ALACHUA, FL 32615  WALDEN FUND - WALDEN SCHOOL CORPORATION 4238 WESTPORT RD   |   |  |    | ,                   | 5,000  |
| 14300 NW 146TH TERRACE ALACHUA, FL 32615  SANTA FE HIGH SCHOOL TIP-OFF CLUB 16213 NORTHWEST US HIGHWAY 441 ALACHUA, FL 32615  STEEL TECHNOLOGIES FOUNDATION, INC. 700 NORTH HURSTBOURN PARKWAY, SUITE 400 LOUISVILLE, KY 40222  UNIVERSITY OF FLORIDA FOUNDATION, INC WARRINGTON EXCELLENCE FUND P.O. BOX 14425 GAINESVILLE, FL 32604  W. W. IRBY ELEMENTARY PTA 13505 NORTHWEST 140TH ST. ALACHUA, FL 32615  WALDEN FUND - WALDEN SCHOOL CORPORATION 4238 WESTPORT RD   |   |  |    |                     |        |
| SANTA FE HIGH SCHOOL TIP-OFF CLUB  16213 NORTHWEST US HIGHWAY 441  ALACHUA, FL 32615  STEEL TECHNOLOGIES FOUNDATION, INC.  700 NORTH HURSTBOURN PARKWAY, SUITE  400 LOUISVILLE, KY 40222  UNIVERSITY OF FLORIDA FOUNDATION, INC WARRINGTON EXCELLENCE FUND P.O. BOX 14425  GAINESVILLE, FL 32604  W. W. IRBY ELEMENTARY PTA 13505 NORTHWEST 140TH ST. ALACHUA, FL 32615  WALDEN FUND - WALDEN SCHOOL CORPORATION 4238 WESTPORT RD  | 14300 NW 146TH TERRACE                        |  | PC | GENERAL SUPPORT     | 11 000 |
| 16213 NORTHWEST US HIGHWAY 441 ALACHUA, FL 32615  STEEL TECHNOLOGIES FOUNDATION, INC. 700 NORTH HURSTBOURN PARKWAY, SUITE 400 LOUISVILLE, KY 40222  UNIVERSITY OF FLORIDA FOUNDATION, INC WARRINGTON EXCELLENCE FUND P.O. BOX 14425 GAINESVILLE, FL 32604  W. W. IRBY ELEMENTARY PTA 13505 NORTHWEST 140TH ST. ALACHUA, FL 32615  WALDEN FUND - WALDEN SCHOOL CORPORATION 4238 WESTPORT RD   | ADACTOR, FD 32013                             |  |    |                     | 11,000 |
| STEEL TECHNOLOGIES FOUNDATION, INC.  700 NORTH HURSTBOURN PARKWAY, SUITE 400 LOUISVILLE, KY 40222  10,  UNIVERSITY OF FLORIDA FOUNDATION, INC WARRINGTON EXCELLENCE FUND P.O. BOX 14425  GAINESVILLE, FL 32604  W. W. IRBY ELEMENTARY PTA 13505 NORTHWEST 140TH ST. ALACHUA, FL 32615  WALDEN FUND - WALDEN SCHOOL CORPORATION 4238 WESTPORT RD  |   |  | PC | GENERAL SUPPORT     |        |
| 700 NORTH HURSTBOURN PARKWAY, SUITE 400 LOUISVILLE, KY 40222  UNIVERSITY OF FLORIDA FOUNDATION, INC WARRINGTON EXCELLENCE FUND P.O. BOX 14425  GAINESVILLE, FL 32604  W. W. IRBY ELEMENTARY PTA 13505 NORTHWEST 140TH ST. ALACHUA, FL 32615  WALDEN FUND - WALDEN SCHOOL CORPORATION 4238 WESTPORT RD  |   |  |    |                     | 3,000  |
| 400 LOUISVILLE, KY 40222  UNIVERSITY OF FLORIDA FOUNDATION, INC WARRINGTON EXCELLENCE FUND P.O. BOX 14425  GAINESVILLE, FL 32604  W. W. IRBY ELEMENTARY PTA 13505 NORTHWEST 140TH ST. ALACHUA, FL 32615  WALDEN FUND - WALDEN SCHOOL CORPORATION 4238 WESTPORT RD  | STEEL TECHNOLOGIES FOUNDATION, INC.           |  | ₽C | GENERAL SUPPORT     |        |
| INC WARRINGTON EXCELLENCE FUND  P.O. BOX 14425  GAINESVILLE, FL 32604  W. W. IRBY ELEMENTARY PTA  13505 NORTHWEST 140TH ST.  ALACHUA, FL 32615  WALDEN FUND - WALDEN SCHOOL  CORPORATION  4238 WESTPORT RD   | ·   |  |    |                     | 10,000 |
| GAINESVILLE, FL 32604  W. W. IRBY ELEMENTARY PTA  13505 NORTHWEST 140TH ST.  ALACHUA, FL 32615  WALDEN FUND - WALDEN SCHOOL  CORPORATION  4238 WESTPORT RD   | •   |  | PC | GENERAL SUPPORT     |        |
| 13505 NORTHWEST 140TH ST.  ALACHUA, FL 32615  WALDEN FUND - WALDEN SCHOOL  CORPORATION 4238 WESTPORT RD  |   |  |    |                     | 500    |
| 13505 NORTHWEST 140TH ST.  ALACHUA, FL 32615  WALDEN FUND - WALDEN SCHOOL  CORPORATION 4238 WESTPORT RD  | W. W. IDDV BI PMDNMADV DMA                    |  | ng | CENERAL GUIDORE     |        |
| WALDEN FUND - WALDEN SCHOOL  CORPORATION 4238 WESTPORT RD  | 13505 NORTHWEST 140TH ST.                     |  |    | GENERAL SUFFORT     | 8,000  |
| 4238 WESTPORT RD   | WALDEN FUND - WALDEN SCHOOL                   |  | PC | GENERAL SUPPORT     |        |
|  | 4238 WESTPORT RD                              |  |    |                     | 10,000 |
|  |   |  |    |                     |        |
|  |   |  |    |                     |        |
|  |   |  |    |                     |        |
|  |   |  |    |                     |        |
| Total from continuation sheets 52,5  |   |  |    | 1                   | 52,500 |

|   | OTATDENDS       | AND INTE   | EREST      | FROM SECT  | JRITIES S  | STATEMENT 1  |
|---|-----------------|--|------------|--|--|--|
|   | GROSS<br>AMOUNT | CAPITA<br>GAINS<br>DIVIDEN                                   | 5          | (A)<br>REVENUE<br>PER BOOKS                          | (B)<br>NET INVEST-<br>MENT INCOME                |  |
| CHARLES SCHWAB                                | 61,540.         | 28,7   | 735.       | 32,80  | 32,805   | ,  |
| TO PART I, LINE 4                             | 61,540.         | 28,7   | 735.       | 32,80  | 32,805.  |  |
| FORM 990-PF                                   |                 | OTHER  | INCO       | ME   |  | STATEMENT 2  |
| DESCRIPTION                                   |                 |  | RE         | (A)<br>VENUE<br>BOOKS                                | (B)<br>NET INVEST-<br>MENT INCOME                | (C)<br>ADJUSTED<br>NET INCOME  |
| NON-DIVIDEND DISTRIBUT                        | CIONS           | _  |            | 700.   | 700.   |  |
| TOTAL TO FORM 990-PF,                         | PART I, I       | LINE 11  |            | 700.   | 700.   |  |
| FORM 990-PF                                   | <del></del>     |  |            | ~ <del></del>  |  |  |
| <del></del>                                   | <del></del>     | LEGA   | L FE       | ES<br>   | 2  | STATEMENT 3  |
| DESCRIPTION                                   |                 | (A) EXPENSES PER BOOKS                                       | NE         | (B)<br>I INVEST-<br>NT INCOME                        | (C)<br>ADJUSTED<br>NET INCOME                    | (D)  |
| DESCRIPTION  LEGAL FEES                       |                 | (A)<br>EXPENSES  | NE'        | (B)<br>I INVEST-                                     | (C)<br>ADJUSTED<br>NET INCOME                    | (D)<br>CHARITABLE<br>PURPOSES  |
|   |                 | (A)<br>EXPENSES<br>PER BOOKS                                 | NE:<br>MEI | (B)<br>F INVEST-<br>NT INCOME                        | (C)<br>ADJUSTED<br>NET INCOME                    | (D)<br>CHARITABLE  |
| LEGAL FEES                                    |                 | (A)<br>EXPENSES<br>PER BOOKS                                 | NE'        | (B)<br>F INVEST-<br>NT INCOME<br>0.                  | (C) ADJUSTED NET INCOME                          | (D)<br>CHARITABLE<br>PURPOSES  |
| LEGAL FEES TO FM 990-PF, PG 1, LN             | 1 16A           | (A) EXPENSES PER BOOKS 14,384                                | NE'S MEI   | (B)<br>F INVEST-<br>NT INCOME<br>0.                  | (C) ADJUSTED NET INCOME                          | (D) CHARITABLE PURPOSES  14,384.  14,384.                              |
| LEGAL FEES TO FM 990-PF, PG 1, LN FORM 990-PF | 1 16A           | (A) EXPENSES PER BOOKS 14,384  14,384  ACCOUNT  (A) EXPENSES | NE'S MEI   | (B) I INVEST- NT INCOME  0.  0.  FEES  (B) I INVEST- | (C) ADJUSTED NET INCOME  (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES  14,384.  14,384.  STATEMENT 4  (D) CHARITABLE |

| ROBERT L OARE, JR CHARITABLE     | FOUNDATION                   |                                   |             | 35-6724790                    |
|----------------------------------|------------------------------|-----------------------------------|-------------|-------------------------------|
| FORM 990-PF                      | TAXES                        |                                   | S           | STATEMENT 5                   |
| DESCRIPTION                      | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME |             | (D)<br>CHARITABLE<br>PURPOSES |
| FOREIGN TAX WITHHELD TAXES PAID  | 1,561.<br>1,036.             |                                   |             | 0.                            |
| TO FORM 990-PF, PG 1, LN 18      | 2,597.                       | 1,561.                            |             | 0.                            |
| FORM 990-PF                      | OTHER EXPENSES               |                                   | STATEMENT 6 |                               |
| DESCRIPTION                      | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME |             | (D)<br>CHARITABLE<br>PURPOSES |
| CHARLES SCHWAB - ADVISOR<br>FEES | 8,808.                       | 8,808.                            |             | 0.                            |
| TO FORM 990-PF, PG 1, LN 23      | 8,808.                       | 8,808.                            | <del></del> | 0.                            |

| FORM 990-PF CORPORATE S                 | STOCK      | STATEMENT 7          |
|---|------------|----------------------|
| DESCRIPTION                             | BOOK VALUE | FAIR MARKET<br>VALUE |
| CHARLES SCHWAB - EQUITIES               | 1,515,746. | 1,596,006.           |
| TOTAL TO FORM 990-PF, PART II, LINE 10B | 1,515,746. | 1,596,006.           |