Form .990-PF

Return of Private Foundation

2949109

OMB No. 1545-0052

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	Internal Revenue Service		orm990PF for instructions			Open to Public Inspection	
_	For calendar year 2018 or tax			2018, and end		, 20	-
•	Name of foundation		A Employer identif				
	DO UNTO OTHERS T	TRUST INC			65-0517915		
	Number and street (or P O box n		street address)	Room/suite	B Telephone number	er (see instructions)	_
	2746 SW 11 ST				(305) 643-09		
	City or town, state or province,	country, and ZIP or foreign	postal code		C If exemption applicat	tion is pending,	_ (
	MIAMI FL 33135	<u> </u>			check here	▶[JΥ
ン	G Check all that apply	Initial return	Initial return of a former	public charity	D 1. Foreign organiz	zations, check here 🕨	_
		Final return	Amended return			ons meeting the 85%	_
	 	Address change	Name change	, 1 t		ind attach computation	
4	H Check type of organization		exempt private foundation	14	E If private foundate terminated under	section r	7
/	Section 4947(a)(1) nonexemp		ther taxable private foundation		507(b)(1)(A), ched	ck here ► [_
	I Fair market value of all assets	_	iting method 🔀 Cash	Accrual	F If the foundation is	s in a 60-month	
	year (from Part II, col (c), line >\$		er (specify) umn (d) must be on cash ba	ncie)	termination under	section	7
	Part Analysis of Revenue	and Francisco		1515 /	507(b)(1)(B), chec	T	┙,
	Analysis of nevertue	and Expenses	Devenine suy		1 7 k 1 k	(d) Disbursements	
		(==					
	▲ 4 ′ 1						
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- 10 m	 -						
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				£			

Ρa	art II	Balance Sheets Attached schedules and amounts in the description column should be for	Beginning of year	End of	year
•		end-of-year amounts only (See inst)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash non-interest-bearing	35,394	8,781	8,781
	2	Savings and temporary cash investments	1,591,075	1,115,894	1,115,894
	3	Accounts receivable ▶			
		Less allowance for doubtful accts. ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accts.			
	5	Grants receivable			
	7	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule) Less allowance for			
	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	-	Investments U S and state govt obligations (attach schedule)			
	l	Investments corporate stock (attach schedule)			
	i	Investments corporate stock (attach schedule)			
	11	Investments — land, buildings, and equipment basis Less accumulated depreciation (attach schedule)			
	12	Investments mortgage loans	200,000	200,000	200,000
	13	Investments other (attach schedule)			
	14	Land, buildings, and equipment basis			<u> </u>
	İ	Less accumulated depreciation (attach schedule)			
	15	Other assets (describe ▶)			<u> </u>
	16	Total assets (to be completed by all filers see the			
		ınstructions. Also, see page 1, item l) .	1,826,469	1,324,675	1,324,675
	17	Accounts payable and accrued expenses			
"	18	Grants payable	`\		
ij	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable (attach schedule)			<u> </u>
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here ►X			ļ
es		and complete lines 24 through 26, and lines 30 and 31.			ļ
lances	24	Unrestricted			
Bal	25	Temporarily restricted			
힏	26	Permanently restricted	1,826,469	1,324,675	<u> </u>
Net Assets or Fund		Foundations that do not follow SFAS 117, check here ▶ ☐	+		
ō		and complete lines 27 through 31.			
ets	27	Capital stock, trust principal, or current funds			<u></u>
Ass	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
e	29	Retained earnings, accumulated income, endowment, or other funds	1,826,469	1,324,675	
2	30	Total net assets or fund balances (see instructions)	1,324,675		
	31	Total liabilities and net assets/fund balances (see instructions)	1,826,469	1,324,675	
Pa	ırt III	Analysis of Changes in Net Assets or Fund Bal	lances	-	. <u></u> .
1	Tota	I net assets or fund balances at beginning of year Part II, columi	n (a), line 30 (must agree v	vith	
		-of-year figure reported on prior year's return)		1	1,826,469
2	Ente	r amount from Part I, line 27a		2	-77,165
3	Othe	er increases not included in line 2 (itemize)		3	
4		lines 1, 2, and 3		4	1,749,304
5		reases not included in line 2 (itemize) \triangleright SEE ATTACHMEN'		5	424,629
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)	Part II, column (b), line 30	6	1,324,675

FDA

·	s and Losses for Tax on In		1		
, ,	the kind(s) of property sold (for example sold)		(b) How acquired P Purchase	(c) Date acquired	(d) Date sold
2-story brick warehouse, or common stock, 200 shs MLC Co) 1a SEE ATTACHMENT #8			D Donation	(mo., day, yr.)	(mo., day, yr.)
b	1 #0		 		
<u> </u>			 	-	.=
d			-		
е					
(a) Cross sales pries	(f) Depreciation allowed	(g) Cost or	other basis	(h) Gair	or (loss)
(e) Gross sales price	(or allowable)	plus exper		, ,	f) minus (g))
a					
b		_			-
C					
d					
<u>e</u>					
Complete only for assets sh	lowing gain in column (h) and owned	d by the foundation o	on 12/31/69		(h) gain minus
(i) FMV as of 12/31/69	(j) Adjusted basis	(k) Excess		, ,,	less than -0-) or
	as of 12/31/69	over col	(j), if any	Losses (fr	om col. (h))
<u>a</u> .					
<u>b</u>					
<u>c</u>					
<u>d</u>		 			
<u>e</u>	Г		_ ¬		
2 Capital gain net income or (also enter in Part I, li , enter -0- in Part I, l		2	17,01
3 Net short-term capital gain	or (loss) as defined in sections 1222				2.702
, -	ine 8, column (c) See instructions If		П		
enter -0- in Part I, line 8		()		3	29:
	Under Section 4940(e) for	Reduced Tax o	n Net Investm	ent Income	
	e section 4942 tax on the distributabl qualify under section 4940(e) Do no	, ,	r in the base perio	d?	Yes No
1 Enter the appropriate amo	unt in each column for each year, se	e the instructions be	fore making any er	ntries.	
(a) Base period years	(b)		(C) Net value of	Dis	(d) tribution ratio
Calendar year (or tax year beginnii	ng in) Adjusted qualifying distribut	ions nonch	naritable-use assets		divided by col (c))
2017					
2016					
2015					
2014					
2013		L			
2 Total of line 1, column (d)	`			2	
* *	or the 5-year base period divide t	he total on line 2 by	5.0. or by the num	<u> </u>	
•	s been in existence if less than 5 year	-	,,	3	
. ,	, , , , , , , , , , , , , , , , , , , ,				
4 Enter the net value of nonc	charitable-use assets for 2018 from F	Part X, line 5		4	
Multiply line 4 by line 3				5	
6 Enter 1% of net investment	t income (1% of Part I, line 27b)			6	
7 Add lines 5 and 6				7	
8 Enter qualifying distribution		•		8	<u>-</u>
	er than line 7, check the box in Part	VI, line 1b, and comp	olete that part using	g a 1% tax rate See	the Part VI
instructions					

Form 990 PF (2018)	DO UNTO	OTHERS	TRUST	INC	65-0517915		Page 4
Part VI Excise	Tax Based or	Investmen	it Income	(Section	4940(a), 4940(b), 4940(e), or 4948 -	see ir	structions)
ta Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1							
Date of ruling or de	etermination letter		(att	ach copy	of letter if necessary see inst.)	l	
b Domantin foundations that most the section 4040/s) requirements in Bort V, shock							l n

	•	
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	990-66	120101

had advisory privileges? If "Yes," attach statement. See instructions Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A The books are in care of ► SEE ATTACHMENT #9 Located at ► ZIP+4 ► 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country. ►	11 12 13	Yes	X X X
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 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N / A The books are in care of ► SEE ATTACHMENT #9 Telephone no ► Located at ► ZIP+4 ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country. ►	12	Yes	X X
had advisory privileges? If "Yes," attach statement. See instructions Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A The books are in care of ► SEE ATTACHMENT #9 Located at ► ZIP+4 ► 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country.	13	Yes	X ► L
Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A The books are in care of ► SEE ATTACHMENT #9 Located at ► ZIP+4 ► 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country.	13	Yes	X ► L
Website address ► N/A The books are in care of ► SEE ATTACHMENT #9 Located at ► ZIP+4 ► 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country.		Yes	► L No
The books are in care of ► SEE ATTACHMENT #9 Located at ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country.	16	Yes	_
Located at ► ZIP+4 ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country.	16	Yes	_
Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country.	16	Yes	_
and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country.	16	Yes	_
At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country.	16	Yes	_
over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country. ▶	16	Yes	_
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country.	16		
the foreign country ▶			X
Dort VIII D. Chatamanta Domandina Activities for Which Form 4700 May De Domained			
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	No
1a During the year, did the foundation (either directly or indirectly)			
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	,		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
disqualified person?	,		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	,		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	,		
(5) Transfer any income or assets to a disqualified person (or make any of either available for			
the benefit or use of a disqualified person)?	,		İ
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			١.
foundation agreed to make a grant to or to employ the official for a period after		-	- Inglitud
termination of government service, if terminating within 90 days)	,		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			.
Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
Organizations relying on a current notice regarding disaster assistance, check here]	Ì	
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
were not corrected before the first day of the tax year beginning in 2018?	10		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			
6e, Part XIII) for tax year(s) beginning before 2018?	'		
If "Yes," list the years ▶ 20 , 20 , 20 , 20	; `.		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	- 		<u> </u>
all years listed, answer "No" and attach statement see instructions.)	2b	1	X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
, 20 , 20 , 20 , 20	•		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
at any time during the year?	'		
b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation			
or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine		- 62 -	1 0 p ⁴) y
if the foundation had excess business holdings in 2018.)	3b	-	X
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable		·	-
purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018? FDA 18 990PF5 BWF 990 Form Software Copyright 1996 – 2019 HRB Tax Group, Inc.	4b Form 99 0	L DE	(2010)

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(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

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Part VIII Information About Officers, Directors, Trustee	es, Foundation Managers, Hig	
and Contractors (continued)		· · · · · · · · · · · · · · · · · · ·
3 Five highest-paid independent contractors for professional services	s. See instructions. If none, enter "NC	NE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
SEE ATTACHMENT #11		
	,	
Total number of others receiving over \$50,000 for professional services	•	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relev of organizations and other beneficiaries served, conferences convened, research papers pro		Expenses
1	. "	
2		
		`
3		
· ·		
4		<u> </u>
		1
Part IX-B Summary of Program-Related Investments (se	ee instructions)	
Describe the two largest program-related investments made by the foundation	during the tax year on lines 1 and 2	Amount
1		
2		

Total. Add lines 1 through 3 18 990PF7 FDA BWF 990 Form Software Copyright 1996 – 2019 HRB Tax Group, Inc

All other program-related investments. See instructions

3

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	Minimum Investment Return (All domestic foundations must complete this part. Foreign	foundations,	
1	see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
•	purposes		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	- -
d	Total (add lines 1a, b, and c)	1d	
е	Reduction claimed for blockage or other factors reported on lines 1a and		•
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	
6	Minimum investment return. Enter 5% of line 5	6	
Pa	Ti XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun	dations	
	and certain foreign organizations, check here ▶ and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	
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.)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	
Pa	t 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	340,06
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	
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	

b Cash distribution test (attach the required schedule)

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

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

Adjusted qualifying distributions. Subtract line 5 from line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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4

5

340,063

340,063

Рa	Undistributed income (se	,		T	1
•		(a)	(b)	(c)	(d)
1	Distributable amount for 2018 from Part XI,	Corpus	Years prior to 2017	2017	2018
	line 7				0
2	Undistributed income, if any, as of the end of 2018				
а	Enter amount for 2017 only				
b	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2018				· · · · · ·
a	From 2013				
ь	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 ▶ \$ 340,063				!
а	Applied to 2017, but not more than line 2a.				<u>.</u>
b	Applied to undistributed income of prior years				
	(Election required see instructions)				
С	Treated as distributions out of corpus				
	(Election required see instructions)				
d	Applied to 2018 distributable amount				
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2018				
_	(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				
U					
_	indicated below:				
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	•				
	line 4b from line 2b		···		
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has				
	been previously assessed				
đ	Subtract line 6c from line 6b. Taxable				
	amount see instructions				
е	Undistributed income for 2017. Subtract				
	line 4a from line 2a. Taxable amount				<u> </u>
	see instructions				
f	Undistributed income for 2018. Subtract				
•	lines 4d and 5 from line 1. This amount				
	must be distributed in 2019				
7	Amounts treated as distributions out of				
•	corpus to satisfy requirements imposed				
	· · · · · · · · · · · · · · · · · · ·				
	by section 170(b)(1)(F) or 4942(g)(3) (Elec-				
_	tion may be requiredsee instructions)			<u> </u>	
8	Excess distributions carryover from 2013				
	not applied on line 5 or line 7 (see				
	instructions)			<u> </u>	• • • • • • •
9	Excess distributions carryover to 2019.				
	Subtract lines 7 and 8 from line 6a		<u> </u>		
0	Analysis of line 9				
а	Excess from 2014				'
b	Excess from 2015				
С	Excess from 2016				
d	Excess from 2017				,
_	Excess from 2018				
				İ	i '

Pai	t XIV Private Operating For	undations (see in	structions and Part \	/II-A, question 9)		7	
1a	If the foundation has received a ruling	or determination lette	er that it is a private of	operating	-		
	foundation, and the ruling is effective for	or 2018, enter the da	te of the ruling	•			
b	Check box to indicate whether the four	ndation is a private o	perating foundation	described in section	4942(j)(3) or	4942(J)(5)	
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years			
	income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total	
	investment return from Part X for each year listed		(5) 25	(0, 2010	,4,20.0	0	
b	85% of line 2a				 	0	
	Qualifying distributions from Part XII,			 		_	
•	line 4 for each year listed					0	
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0	
	Qualifying distributions made directly	, .	/	1		· ·	
·	for active conduct of exempt activities.						
	Subtract line 2d from line 2c					0	
2							
3	Complete 3a, b, or c for the alternative					•	
	test relied upon						
а	"Assets" alternative test enter					0	
	(1) Value of all assets					<u> </u>	
	(2) Value of assets qualifying under						
_	section 4942(j)(3)(B)(i)	/				0	
ь	"Endowment" alternative test enter/ 2/3 of min_investment return shown in					_	
	Part X, line 6 for each year listed	1				0	
C	"Support" alternative test enter						
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)			r			
	(5)), or royalties)					0	
	(2) Support from general public and 5 or more exempt organizations						
	as provided in section 4942(j)(3) (B)(iii)					0	
	(3) Largest amount of support from					_	
	an exempt organization					0	
	(4) Gross investment income					0	
Par	t XV Supplementary Information at any time during the	•	-	y if the foundat	ion had \$5,000 (or more in assets	
1	Information Regarding Foundation N	lanagers:					
а	List any managers of the foundation wh	no have contributed	more than 2% of the	total contributions re	ceived by the founda	ation before the	
	close of any tax year (but only if they ha	ave contributed more	e than \$5,000). (See	section 507(d)(2))			
NON	IE .						
	List any managers of the foundation wh	no own 10% or more	of the stock of a cor	rporation (or an equa	illy large portion of th	e ownership	
	of a partnership or other entity) of which	h the foundation has	a 10% or greater int	terest			
ИОИ	•		Ü				
2							
а	The name, address, and telephone nur	nber or email addres	ss of the person to w	rhom applications sh	ould be addressed		
b	The form in which applications should l	pe submitted and inf	ormation and materi	als they should includ	de		
С	Any submission deadlines						
d	Any restrictions or limitations on awards	s, such as by geogra	phical areas, charita	ble fields, kinds of in	stitutions, or other fac	etors	

DO UNTO OTHERS TRUST INC Form 990-PF (2018) 65-0517915 Page 11 Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of **Amount** contribution any foundation manager recipient Name and address (home or business) or substantial contributor Paid during the year 0 ▶ 3a **Total** Approved for future payment

> **▶** 3b Form **990–PF** (2018) Form Software Copyright 1996 - 2019 HRB Tax Group, Inc

DO UNTO OTHERS TRUST INC 65-0517915 Part XVI-A Analysis of Income-Producing Activities Ehter gross amounts unless otherwise indicated Unrelated business income (e) Excluded by section 512, 513, or 514 Related or exempt (a) (b) (c) (d) function income Business **Amount** Excl. **Amount** (See instructions.) 1 Program service revenue code code **9** Fees & contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a 12 Subtotal. Add columns (b), (d), and (e) Ō 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the Line No. accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions) ▼

1b(3)

1b(4) 1b(5)

1b(6)

Part XVII		Information Regarding Transfers to and Transactions and Relationships With Noncharitable							
		Exempt Organizations							
1	Did the org	anization directly or indirectly engage in any of the following with any other organization described in section		Yes	No				
	501(c) (oth	er than section 501(c)(3) organizations) or in section 527, relating to political organizations?							
а	Transfers f	rom the reporting foundation to a noncharitable exempt organization of							
	(1) Cash		1a(1)		Х				
	(2) Other	assets	1a(2)		Х				
b	Other trans	sactions							
	(1) Sales	of assets to a noncharitable exempt organization	1b(1)		Х				
	(2) Purch	ases of assets from a noncharitable exempt organization	1b(2)		Х				

(2) Purchases of assets from a noncharitable exempt organization

(3) Rental of facilities, equipment, or other assets

(4) Reimbursement arrangements

(5) Loans or loan guarantees

(6) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction

(a) Line no	(b) Amount involved	(c) Name of non	charitable exempt organization	n (d) Desi	cription of transfer	s, transactio	ns, and sharing arran	gements
2a Is th	,	ndirectly affiliated	with, or related to, one or mo					
b If "Y	es," complete the following		(I.) T (1 7-	\ D		
	(a) Name of organizat	NOTE OF THE PROPERTY OF THE PR	(b) Type of organiza	ion .	(6) Descript	ion of relationship	
Sign Here	Under penalties of perjury, belief, it adue, correct, and Signature of officer of	d complete Reclaration	xamined this return, including according for the standard of preglater (other than taxing year of the standard	is based on a	edules and statem ill information of w	nents, and to which prepare	the best of my know er has any knowledge May the IRS discus- with the preparer st See instructions	this return
Paid Prepare Use Onl	Print Type preparer Rob Fint Firm's name > HR	s pame belest	Preparer's signature	1		19 self-e	ik if PTIN employed P000 ▶43187184	

BISCAYNE BLVD

(305)891-5714

Phone no

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

Employer identification number

2018

DO UNTO OTHERS TRUST INC 65-0517915 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules | For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III | For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution: An organization that icn't covered by the General Rule and/or the Special Rules deesn't file Schedule 8 (Form 990,

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its

2018 FORM 990 SCHEDULE OF OTHER INCOME

ATTACHMENT 1: PAGE 1 - 990-PF PAGE 1, PART I, LINE 11

OPEN TO PUBLIC

INSPECTION For calendar year 2018, or tax period beginning , and ending

Name of Organization Employer Identification Number

arne of Organization O <u>UNTO OTHERS TRUST</u> INC		65-0517915		
Description of Other Income	Revenue and Expenses	Net Investment Income	Adjusted Net Income	
IISC		2,886	2,88	
	İ			
•				
			,	
•				
	_			
	otolou	2 007	Ty attenti	
Ţ	otals:	2,886	Ż , 88	

2018 FORM 990 SCHEDULE OF LEGAL FEES

ATTACHMENT 2: PAGE 1 - 990-PF PAGE 1, PART I, LINE 16A OPEN TO PUBLIC INSPECTION , and ending For calendar year 2018, or tax period beginning Employer Identification Number Name of Organization 65-0517915 DO UNTO OTHERS TRUST INC Adjusted Disbursements for Net Investment Legal Description Amount Income Net Income Charity 4,245 4,245 4,245 LEGAL 4,245 4,245 4,245 Total:

2018 FORM 990 SCHEDULE OF ACCOUNTING FEES

ATTACHMENT 3: PAGE 1 - 990-PF PAGE 1, PART I, LINE 16B OPEN TO PUBLIC

INSPECTION , and ending For calendar year 2018, or tax period beginning

me of Organization O UNTO OTHERS TRUST INC			Employer Identi	fication Number
Accounting Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements fo Charity
CCOUNTING	4,550	4,550	4,550	
	'			
,				

2018 FORM 990 SCHEDULE OF OTHER PROFESSIONAL FEES

ATTACHMENT 4: PAGE 1 - 990-PF PAGE 1, PART I, LINE 16C

OPEN TO PUBLIC INSPECTION For calendar year 2018, or tax period beginning , and ending

Name of Organization Employer Identification Number

O UNTO OTHERS TRUST INC		65-0517915			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements fo Charity	
ONTRACT SERVICES	3,025	3,025	3,025		
DVISORY FEES	12,025	12,025	12,025		
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				•	
			į		
Total	: 15,050	15,050	15,050		

2018 FORM 990 SCHEDULE OF TAXES PAID

ATTACHMENT 5: PAGE 1 - 990 - PF PAGE 1, PART I, LINE 18

OPEN TO PUBLIC INSPECTION For calendar year 2018, or tax period beginning , and ending .

Name of Organization Employer Identification Number 65-0517915

me of Organization Employer Identification Number				
O UNTO OTHERS TRUST INC	1		65-05179	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charity
OREIGN TAXES	589	589	589	
	•			
		•		
`				
Total:	589		589	

2018 FORM 990 OTHER EXPENSES SCHEDULE

ATTACHMENT 6: PAGE 1 990-PF PAGE 1, PART I, LINE 23 OPEN TO PUBLIC

INSPECTION , and ending For calendar year 2018, or tax period beginning

Employer Identification Number Name of Organization 65-0517915 DO HINTO OTHERS TRUST INC

DO UNTO OTHERS TRUST INC	O UNTO OTHERS TRUST INC 65-0517915				
Description of Activity	Revenue and Expenses	Net Investment Income	Adjusted Net Income	Disbursements for Charity	
AUTO EXP	8,336	8,336	8,336		
COMPUTER EXP	642	642	642	~	
BANK FEES	163	163	163		
OFFICE EXP	1,878	1,878	1,878		
DUES AND SUBSCRIPTIONS	4,672	4,672	4,672		
POSTAGE	113	113	113		
TELEPHONE	2,960	2,960	2,960		
	2,300	2,300	2,300		
MEETING CONFRENCES AND	31,688	31,688	31,688		
PUBLIC RELATIONS	31,000	31,000	31,000		
			•		
<u> </u>	50 450	EO 450	EO 450		
Total:	50,452	50,452	50,452		

2018 FORM 990 SCHEDULE OF OTHER DECREASES

ATTACHMENT 7: PAGE 1 - 990- PF PAGE 2, PART III, LINE 5 OPEN TO PUBLIC INSPECTION For calendar year 2018, or tax period beginning , and ending Name of Organization Employer Identification Number 65-0517915 DO UNTO OTHERS TRUST INC Description of Decrease Total Amount 340,063 CHARITABLE DISBURSEMENT CHANGE IN FMV 84,566 Total: 424,629

2018 FORM 990 PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

<u>TTA</u>	<u>'ACHMENT 8: PAG</u>	<u> SE 1 - 990-PF PAGE</u>	<u>3, PART IV</u>	LINE 1		
OPEN	N TO PUBLIC					
		alendar year 2018, or tax period begii	nning	, and ending		· · · · · · · · · · · · · · · · · · ·
	of Organization	NICE INC			Employer Identific	
טט	UNTO OTHERS TR	e the Kind(s) of Property Sold (e.g., F	Real Estate	(b) How Acquired	65-051791 (c) Date Acquired	(d) Date Sold
		rehouse, or Common Stock, 200 shs.		P Purchase D Donation	(mo , day, yr)	(mo , day, yr)
1	SCHWAB SHORT T	ERM		B Bonation	01-01-2018	12-31-2018
2	SCHWAB LING TE	RM			01-01-2017	12-31-2018
	,					
i						
_	(e) Gross Sales Price	(f) Depreciation Allowed	(g) Cost or Oth	ner Basis	(h) Gain oi	(loss)
		(or allowable)	Plus Expens		(e) Plus (f)	
1	12,451	1		12,160		291
2	470,331			453,605		16,726
				İ		
			,			
		lowing gain in column (h) and owned			(I) Gains (Col (F	
	(i) F M.V. as of 12/31/69	(j) Adjusted Basis as of 12/31/69	(k) Excess if Over Col (Col. (k), But Not Losses (fro	Less Than -0-) or
1		as 01 12/31/03	Over cor (II, II Ally	20000 (291
1 2						16,726
						•
- 1	1		1	l		

2018 FORM 990 BOOKS ARE IN CARE OF

ATTACHMENT 9 - 990-PF PAGE 5, PART VII-	-A, LINE 14
OPEN TO PUBLIC	
INSPECTION For calendar year 2018, or tax period beginning	
Name of Organization	Employer Identification Number
DO UNTO OTHERS TRUST INC	65-0517915
Part VII-A - Line 14	
Individual Name	ALICIA CELORIO
or	
Business Name	
Street Address	2746 SW 11 ST
U S Address	
Zip code 33135 City MIAMI	State <u>FL</u>
or	
Foreign Address	
City	,
Province or State	
Country	
Postal code	
Phone Number	(305) 643-0966
Fax Number	

The the Thomas District on a

2018 FORM 990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

ATTACHMENT 10: PAGE 1 - 990-PF PAGE 6, PART VIII **OPEN TO PUBLIC** INSPECTION , and ending For calendar year 2018, or tax period beginning Name of Organization **Employer Identification Number** 65-0517915 DO UNTO OTHERS TRUST INC (B) Title and Average (C) Compensation (If (D) Cont. to Employee (E) Expense Account (A) Name and Address not paid, enter 0) Ben. Plans & Def. Comp. & Other Allowances Hrs. per Week FLALICIA CELORIO PRESIDENT 2746 SW 11 ST MIAMI, FL 33135

2018 FORM 990 COMPENSATION OF THE FIVE HIGHEST PAID INDEPENDENT CONTRACTORS FOR PROFESSIONAL SERVICES

OPEN TO PUBLIC	PAGE 1 990-PF PAGE 6, PART V					
INSPECTION	For calendar year 2018, or tax period beginning	, and ending				
Name of Organization			entification Number			
DO UNTO OTHERS TRUST INC 65-0517915						
Part VIII Compensation of the Five Highest Paid Independent Contractors for Professional Services (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation						
NONE	r each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation			
NOME						
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		I				

FDA

2018 DETAIL STATEMENTS

DO UNTO OTHERS TRUST INC 65-0517915

PAGE 1

STATEMENT #1 - DIVIDENDS (990-PF PG 1 LINE 4(B))

SCHWAB DIVIDEND CAPITAL GAIN DIST

TOTAL CARRIED TO 990-PF PG 1 LINE 4(B)