Department of the Treasury Internal Revenue Service

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.

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	For	caler	ndar year 2018 or tax year beginning	DEC	13,	2018	, and e	nding	DEC 31,	201	8
	Nar	ne of	foundation						A Employer id	entificatio	on number
			FOUNDATION INC.		·		<u> </u>		83-28	5281	9
			and street (or P O box number if mail is not de	livered to street	address)			Room/suite	B Telephone n		
			NE 2ND AVENUE						561-9		/
	_		own, state or province, country, and Zi RAY <u>BEACH, FL</u> 33	P or foreign p 444	ostal code	9			C If exemption ap	plication is	pending, check here
	G (heck	call that apply: X Initial return	1	_	Initial return of a fo Amended return	ormer public o	charity	D 1. Foreign or	ganızatıoı	ns, check here
			Address ch			Name change			2 Foreign orgi check here	anızatıons n and attach (neeting the 85% test, computation
	H	_	type of organization: X Section section 4947(a)(1) nonexempt charitable			ate foundation able private founda	ation	00			tatus was terminated 1)(A), check here
		ur ma	arket value of all assets at end of year	J Account			Accr	ual	F If the founda	tion is in a	a 60-month termination
	(fr		Part II, col. (c), line 16) 2 , 124 , 315 .		ther (spec nn (d) mu		s.)	· · · · · · · · · · · · · · · · · · ·	under section	n 507(b)(1)(B), check here
	Pa	ırt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), an necessarily equal the amounts in column (a	d (d) may not	(a)	Revenue and nses per books	(b) Net in	vestment	(c) Adjust		(d) Disbursements for charitable purposes (cash basis only)
		1	Contributions, gifts, grants, etc., recei	ved	2,	134,390.			N/A		
00		2	Check if the foundation is not required to interest on savings and temporary cash investments	attach Sch B							
00		4	Dividends and interest from securities								
		5a	Gross rents								
			Net rental income or (loss)								
	ine	6a	Net gain or (loss) from sale of assets not on I Gross sales price for all	ine 10							
	Revenu	7	assets on line 6a Capital gain net income (from Part IV, line 2)					0.	-		•
8	æ	8	Net short-term capital gain								£.4
20		9	Income modifications					-			
ري د		10a	Gross sales less returns and allowances				•				
			Less Cost of goods sold								
		C	Gross profit or (loss)								
Ŋ		11	Other income								*
		12	Total. Add lines 1 through 11		2,	<u>134,390.</u>		0.			
قيقا		13	Compensation of officers, directors, trustees	, etc		0.		0.			0.
2		14	Other employee salaries and wages			-			<u></u>		
Z,	Ś	1	Pension plans, employee benefits							-	
			Legal fees						-		_
9	x be		Accounting fees Other professional fees								
	E E	17	Interest								RECEIVED
	Administrative Expense		Taxes							1 -	
	istr	19	Depreciation and depletion							181	HIN 0 1 2020
	ij		Occupancy				•			5	1014 A 1 5050 S
	Ad		Travel, conferences, and meetings								
	and	22	Printing and publications								ΨGDEN, UT
	ğ	23	Other expenses			·-· · ·					
	aţį	24	Total operating and administrative								
	Operating		expenses Add lines 13 through 23		<u></u>	0.		0.	ļ		0.
	O	25	Contributions, gifts, grants paid			0.			<u> </u>	-	0.
		26	Total expenses and disbursements.			^		0			
			Add lines 24 and 25			0.		0.			0.
			Subtract line 26 from line 12:		۰ ء	134,390.			}		
			Excess of revenue over expenses and disbur			104,J7U <u>0</u>		0.			-
			Net investment income (if negative, enter - Adjusted net income (if negative, enter -		<u> </u>	-			N/A		
		Ü	Aujusteu net income (ir negative, enter -	·- <i>j</i>	<u> </u>	·			14/12		5 000 DE (0040)

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

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Part III Analysis of Changes in Net Assets or Fund Balances

_				
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30			
	(must agree with end-of-year figure reported on prior year's return)	1	L	0.
2	Enter amount from Part I, line 27a	2		2,134,390.
3	Other increases not included in line 2 (itemize)	3		0.
4	Add lines 1, 2, and 3	4		2,134,390.
5	Decreases not included in line 2 (itemize) SEE STATEMENT 1	5		1,990,842.
-	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6		143,548.

8 Enter qualifying distributions from Part XII, line 4
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

Form **990-PF** (2018)

See the Part VI instructions.

7 Add lines 5 and 6

823521 12-11-18

	n 990-PF (2018) CAR FOUNDATION INC. 8 3 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494		852819		Page 4
		10 - 3		uctio	115)
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 letter if necessary-see instructions)	<u></u>			
Þ		1			0.
	of Part I, line 27b				į .
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).	_ -			1
		3			0.
-		4			0.
		5			0.
		3			<u> </u>
	Credits/Payments: 2018 estimated tax payments and 2017 overpayment credited to 2018 6a 0 •				į
					-
					1
		7 -			0.
	· · · · · · · · · · · · · · · · · · ·	8			0.
	. —	9			0.
	·	10			<u> </u>
		11			
	art VII-A Statements Regarding Activities				
_	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
10	any political campaign?		1a	+	Χ.
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	n	1b	 	X
ŭ	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		"	†	 ,
	distributed by the foundation in connection with the activities			١.	:
c	Did the foundation file Form 1120-POL for this year?		1c		\mathbf{x}^{-}
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			1	1
٠	(1) On the foundation. ► \$ 0 • (2) On foundation managers ► \$ 0 •				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
٠	managers. ►\$ 0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities.				•
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or]
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	A 4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				1
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	٧			
	remain in the governing instrument?		6	X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	X	
	`				
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.				}
	FL				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendary	ir			117
	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV		9		X Z
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STM	<u>4T 3</u>		X	<u></u>
			Form 99	0-PF	(2018)

823531 12-11-18

Pa	art VII-A Statements Regarding Activities (continued)	,									
			Yes	No							
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of										
	section 512(b)(13)? If "Yes," attach schedule See instructions	_ 11		X							
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?										
	If "Yes," attach statement. See instructions	12		X							
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х								
	Website address ► N/A										
14	The books are in care of ► CAR FOUNDATION INC. Telephone no. ► 561-95	1-8	703								
	Located at ▶115 NE 2ND AVENUE, DELRAY BEACH, FL ZIP+4 ▶334										
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	N	/A								
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No							
	securities, or other financial account in a foreign country?	16		X							
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			,							
	foreign country			ı							
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	•									
_	File Form 4720 of any item is checked in the "Yes" column, unless an exception applies.		Yes	No							
1:	a 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)			ı							
	a disqualified person?										
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			1							
	(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			Ę							
	for the benefit or use of a disqualified person)?			:							
	(6) Agree to pay money or property to a government official? (Exception Check "No"			;							
	if the foundation agreed to make a grant to or to employ the official for a period after										
	termination of government service, if terminating within 90 days.)			1							
ı	of 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 N/A	1b									
	Organizations relying on a current notice regarding disaster assistance, check here										
(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?	1c		X							
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation										
	defined in section 4942(j)(3) or 4942(j)(5)):										
	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 >										
ı	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect										
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach										
	statement - see instructions) N/A	2b									
(the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.										
				i							
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			,							
	during the year?										
ı	olf "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			1							
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			. '							
	Form 4720, to determine if the foundation had excess business holdings in 2018.) N/A	3b									
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>							
١	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	<u>-</u> -									
	had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b rm 990	L DE	X (2019)							

2	Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."										
	(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, othe allowances						
	NONE										
_											
_											
_											
To	otal number of other employees paid over \$50,000										

Form 990-PF (2018) CAR FOUNDATION INC.	83-2852	1819 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	у	
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 serv	rice	(c) Compensation
NONE		
	-	
		0
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.		Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	<u> </u>	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. 1 N/A		Amount
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·	Average monthly fair market value of securities	1a	2,087,610.
ь		1b	0.
_	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,087,610.
e	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	2,087,610.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	31,314.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,056,296.
6_	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	5,353.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	5,353.
2a			
b	Income tax for 2018. (This does not include the tax from Part VI)]	
C	Add lines 2a and 2b	_2c_	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	5,353.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	5,353.
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	5,353.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		•
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	<u> </u>
	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:	-	
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8; and Part XIII, line 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	^
_	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualities for	the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,		· · · · · · · · · · · · · · · · · · ·		_
line 7			. <u> </u>	5,353.
2 Undistributed income, if any, as of the end of 2018				, .
a Enter amount for 2017 only			0.	
b Total for prior years:				
,,,,,,,,,		0.		
3 Excess distributions carryover, if any, to 2018:				;
a From 2013				
b From 2014				, ,
c From 2015				
d From 2016				ı
e From 2017				
f Total of lines 3a through e	0.			· · · · · · · · · · · · · · · · · · ·
4 Qualifying distributions for 2018 from Part XII, line 4: ►\$ 0.				ì
			0.	
a Applied to 2017, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		,
years (Election required - see instructions)		U •		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				0.
d Applied to 2018 distributable amount	0.			<u></u>
e Remaining amount distributed out of corpus	0.			0.
Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
6 Enter the net total of each column as indicated below:		•	•	. *
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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				ŀ
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				E 2E2
be distributed in 2019	·· <u></u>			5,353.
7 Amounts treated as distributions out of				Ţ
corpus to satisfy requirements imposed by				'
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)			-	-
8 Excess distributions carryover from 2013	0.			;
not applied on line 5 or line 7				
9 Excess distributions carryover to 2019 Subtract lines 7 and 8 from line 6a	0.			ı J
10 Analysis of line 9:	0.			
a Excess from 2014			•	, ,
b Excess from 2015				!
c Excess from 2016		<u> </u>		1
d Excess from 2017				}
e Excess from 2018				i
J 2555551 25 10				Form 990-PF (2018)

	NDATION INC			83-285	2819 Page 10
Part XIV Private Operating F	oundations (see in	nstructions and Part \	/II-A, question 9)	N/A	
1 a If the foundation has received a ruling of			1		
foundation, and the ruling is effective fo	or 2018, enter the date of	f the ruling	▶ └		
b Check box to indicate whether the foun	dation is a private operat	ing foundation described		4942(j)(3) or 494	24)(5)
2 a 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			<u> </u>		
b 85% of line 2a			<u> </u>		
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly		İ			
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)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,	1				
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					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	ete this part only	if the foundation	n had \$5,000 or mor	e in assets
at any time during t	he year-see inst	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh		than 2% of the total cor	ntributions received by the	e foundation before the close	of any tax
year (but only if they have contributed r	nore than \$5,000). (See	section 507(d)(2).)			
NONE					
b List any managers of the foundation wh			(or an equally large port	on of the ownership of a part	nership or
other entity) of which the foundation ha	s a 10% or greater intere	est.			
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan	, Scholarship, etc., F	Programs:		
Check here X if the foundation of	only makes contributions	to preselected charitable	e organizations and does		its for funds. If
the foundation makes gifts, grants, etc.,	to individuals or organiz	ations under other cond	itions, complete items 2a	, b, c, and d.	
a The name, address, and telephone num	ber or email address of t	he person to whom appl	ications should be addres	ssed:	
b The form in which applications should be	e submitted and informa	ation and materials they	should include:		
c Any submission deadlines:			<u>.</u>		

d Any restrictions or limitations on award	s, such as by geographic	cal areas, charitable fields	s, kinds of institutions, or	other factors:	

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

Enter gross amounts unless otherwise indicated	Unrelated business income			ided by section 512, 513, or 514	(e)		
	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt		
1 Program service revenue:	code	Amount	sion	Amount	function income		
a							
b							
c							
d							
e							
•							
g Fees and contracts from government agencies							
2 Membership dues and assessments				-			
3 Interest on savings and temporary cash							
investments							
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		·			<u> </u>		
11 Other revenue:							
a							
b							
<u> </u>							
d							
E		0.	_				
12 Subtotal. Add columns (b), (d), and (e)		U•			0.		
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)				13 _	0.		
1							
Part XVI-B Relationship of Activities to	the Acco	omplishment of Ex	emp	t Purposes			
Line No Explain below how each activity for which incom	e is reported i	in column (e) of Part XVI-A	contrit	outed importantly to the accor	nplishment of		
▼ the foundation's exempt purposes (other than by					•		
	•						
							
823621 12-11-18		-			Form 990-PF (2018)		

Part AVI	Exempt Organ		and Transactions ar	nd Relationships with Nonch	aritable		
1 Did the			owing with any other organization	n described in section 501(c)		Yes	No
	-	nizations) or in section 527, rela	-	in described in section of i(e)			
•	, , , ,	ation to a noncharitable exemp	• ,				ĺ
(1) Cas	, •	anon to a nononanable exemp	t organization or,		1a(1)		x
• •	er assets				1a(2)		X
b Other tra					133.37		 -
-	es of assets to a noncharita	ble exempt organization			16(1)		X
• •		incharitable exempt organization	n		1b(2)		Х
	ntal of facilities, equipment,				1b(3)		X
(4) Rei	mbursement arrangements	j			1b(4)		X
(5) Loa	ins or loan guarantees				1b(5)		X
(6) Per	formance of services or me	embership or fundraising solicit	ations		1b(6)		X
c Sharing	of facilities, equipment, ma	aling lists, other assets, or paid	employees		1c		X
	-		• •	ays show the fair market value of the goods		ets,	
				e in any transaction or sharing arrangement	, show in		
 	'.'	other assets, or services receiv	·	Т. 40		-	
(a) Line no	(b) Amount involved	<u> </u>	able exempt organization	(d) Description of transfers, transactions, an	d sharing arr	angeme	nts
		N/A	A	 			
				-			
					 		
	*						
			-				
				<u> </u>			
	-		one or more tax-exempt organiza	ations described		77]
		n 501(c)(3)) or in section 527?	•		Yes	LA	No
D II TES,	complete the following sche (a) Name of org		(b) Type of organization	(c) Description of relation		_	
	N/A		(b) Typo of organization	(e) Bassi pusi el relation	СПР		
•	N/A						
	· · · · · · · · · · · · · · · · · · ·	-					
				statements, and to the best of my knowledge	lay the IRS d	iscuss t	his
Sign L	belief, it is true, correct, and con	notete Declaration of preparer (other		ation of which preparer has any knowledge	eturn with the hown below?	prepare	er
Here	100	# 2	3/18/2020		X Yes		No
Sı	gnature of officer or trustee		Date	Title			
	Print/Type preparer's na	ime Preparer	s signatura	Date Check If PTIN	·		
Doid	W. HOWARD		. / / / / / / /	self- employed	20000	0.4.0	
Paid Preparer	ELLINGSWOR				0968		
Use Only		TH, GRAHAM & E	ELLINGSWORTH, E	P.A. Firm's EIN ► 59-1	.4701)	7 0	
200 01113		N.E. FOURTH A	VENUE V				
		LRAY BEACH, FI		Phone no (561)	276	-74	68
	<u>, DD</u>				Form 990		

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

2018

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

83-2852819 CAR FOUNDATION INC. Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** 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 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total 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 isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Employer identification number

|--|

83-2852819

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	al space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	CLARAJOHN H. FREEMOND C/O RICH WILSON, 115 NE 2ND AVENUE DELRAY BEACH, FL 33444	\$ 2,134,390.	Person Payroll Noncash X (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Occupate Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Oncash Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Oncash Complete Part II for noncash contributions)	

Name of organization

Employer identification number

CAR FOUNDATION INC.

83-2852819

irt II N	Ioncash Property (see instructions) Use duplicate copies of Pa	rt II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1 2:	3,990 SHS HILL ROM HLDGS, INC.		
		\$ 2,134,390.	12/26/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_ _		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	

ganizątion	Employer identification number				
NINDATION INC.		83-2852819			
Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, or) through (e) and the following line ent charitable, etc., contributions of \$1,000 or	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the year			
(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held			
	(e) Transfer of gift	t			
Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift				
Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
(e) Transfer of gift					
Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee			
	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift	Exclusively religious, charitable, etc., contributions to organizations described in sitrom any one contributor. Complete columns (a) through (e) and the following line en completing start III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or Use duplicate copies of Part III if additional space is needed (b) Purpose of gift (c) Use of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (c) Use of gift (c) Use of gift			

FORM 990-PF	OTHER	DECREASES	IN NET	ASSETS	OR	FUND	BALANCES	STATEMENT	1
DESCRIPTION								AMOUNT	
DIFFERENCE BE	rween fi	N OF GIFT	AND DO	NOR'S CO	ST	BASI	S	1,990,842.	
TOTAL TO FORM 990-PF, PART III, LINE 5					1,990,842.				
FORM 990-PF CORPORATE STOCK				STATEMENT	2				
DESCRIPTION						В	OOK VALUE	FAIR MARKE VALUE	т
CORPORATE STO	CK						143,548.	2,124,3	15.
TOTAL TO FORM	990-PF,	PART II,	LINE 1	0B			143,548.	2,124,3	15.
FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10			STATEMENT	3					
NAME OF CONTR	BUTOR		A	DDRESS					
CLARAJOHN H. I	FREEMOND C/O RICH WILSON, 115 NE 2ND AVE DELRAY BEACH, FL 33444			AVENUE					