

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation THE RUSSELL & RONALEE GALBUT FAMILY FOUN FOUNDATION		A Employer identification number 20-5918650	
Number and street (or P.O. box number if mail is not delivered to street address) 2200 BISCAYNE BLVD		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code MIAMI, FL 33137		B Telephone number (see instructions) (305) 374-5700	
G Check all that apply: <div><input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change</div>		C If exemption application is pending, check here <input type="checkbox"/> D 1. Foreign organizations, check here..... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶\$ 771,967			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	755,092			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	755,092	0	0	
	13 Compensation of officers, directors, trustees, etc.	0	0	0	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	491	0	0	0
	24 Total operating and administrative expenses. Add lines 13 through 23	491	0	0	0
	25 Contributions, gifts, grants paid	605,152			605,152
	26 Total expenses and disbursements. Add lines 24 and 25	605,643	0	0	605,152
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	149,449			
	b Net investment income (if negative, enter -0-)		0		
	c Adjusted net income (if negative, enter -0-)			0	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	597,735	754,325	754,325
	2 Savings and temporary cash investments	14,343	11,642	11,642
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	6,000	6,000	6,000
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	618,078	771,967	771,967	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	618,078	771,967	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	0	0	
29 Total net assets or fund balances (see instructions)	618,078	771,967		
30 Total liabilities and net assets/fund balances (see instructions) .	618,078	771,967		

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 29 (must agree with end-of-year figure reported on prior year's return)	1	618,078
2 Enter amount from Part I, line 27a	2	149,449
3 Other increases not included in line 2 (itemize) ▶ _____	3	4,440
4 Add lines 1, 2, and 3	4	771,967
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	771,967

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	
<div style="display: flex; align-items: center;"> <div style="flex: 1;"> { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 } </div> </div>		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	472,232	18,739	25.200491
2017	456,520	241,984	1.886571
2016	510,441	14,215	35.908618
2015	549,575	256,224	2.144901
2014	242,833	123,221	1.970711

2 Total of line 1, column (d)	2	67.111292
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	13.422258
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	394,104
5 Multiply line 4 by line 3	5	5,289,766
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	0
7 Add lines 5 and 6	7	5,289,766
8 Enter qualifying distributions from Part XII, line 4	8	605,152

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. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	0
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	0
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	0
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	0
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>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.</i>		No
c Did the foundation file Form 1120-POL for this year?		No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ _____ (2) On foundation managers. ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		No
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? <i>If "Yes," attach a conformed copy of the changes</i>		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		No
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	Yes	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	Yes	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ DE, 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? <i>If "No," attach explanation .</i>	Yes	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>		No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>		No

Part VII-A Statements Regarding Activities (continued)

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	13		No
14	The books are in care of ▶ <u>RUSSELL GALBUT TREASURER</u> Telephone no. ▶ <u>(305) 374-5700</u>			

Located at ▶ 2200 BISCAYNE BLVD MIAMI FLZIP+4 ▶ 33137

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2019, 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?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

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.**

		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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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 <input type="checkbox"/>	1b	
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 2019?	1c	No
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 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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 all years listed, answer "No" and attach statement—see instructions.)	2b	
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2019 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 if the foundation had excess business holdings in 2019.)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
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 2019?	4b	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

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 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d).	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). 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, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ▶		0

Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 GRANTS/CONTRIBUTIONS TO PUBLIC CHARITIES SUPPORTING SOCIAL WELFARE, HUMANITARIAN AID TO FAMILIES AND CHILDREN IN NEED	0
2 GRANTS/CONTRIBUTIONS TO PUBLIC CHARITIES SUPPORTING EDUCATIONAL AND RELIGIOUS PROGRAMS	0
3 GRANTS/CONTRIBUTIONS TO PUBLIC CHARITIES SUPPORTING ARTS, CULTURAL AND HISTORIC PROGRAMS	0
4 GRANTS/CONTRIBUTIONS TO PUBLIC CHARITIES SUPPORTING MEDICAL RESEARCH AND PUBLIC HEALTHCARE AWARENESS PROGRAMS	0

Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	6,000
b	Average of monthly cash balances.	1b	394,106
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	400,106
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	400,106
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	6,002
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	394,104
6	Minimum investment return. Enter 5% of line 5.	6	19,705

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	19,705
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	19,705
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	19,705
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	19,705

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	605,152
b	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:		
a	Suitability test (prior IRS approval required).	3a	
b	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	605,152
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	605,152

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.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				19,705
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			0	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014.	236,672			
b From 2015.	536,764			
c From 2016.	509,732			
d From 2017.	444,428			
e From 2018.	471,299			
f Total of lines 3a through e.	2,198,895			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ 605,152				
a Applied to 2018, but not more than line 2a			0	
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 2019 distributable amount.				19,705
e Remaining amount distributed out of corpus	585,447			
5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,784,342			
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 2018. Subtract line 4a from line 2a. Taxable amount—see instructions.			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				0
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 2014 not applied on line 5 or line 7 (see instructions).	236,672			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.	2,547,670			
10 Analysis of line 9:				
a Excess from 2015.	536,764			
b Excess from 2016.	509,732			
c Excess from 2017.	444,428			
d Excess from 2018.	471,299			
e Excess from 2019.	585,447			

Part XIV

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling.

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

		Prior 3 years				(e) Total
		(a) 2019	(b) 2018	(c) 2017	(d) 2016	
2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b	85% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
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, 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

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

RUSSELL GALBUT

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	605,152
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue:					
	a _____					
	b _____					
	c _____					
	d _____					
	e _____					
	f _____					
	g Fees and 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 _____					
	b _____					
	c _____					
	d _____					
	e _____					
12	Subtotal. Add columns (b), (d), and (e). . .		0		0	0
13	Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)			13		0

[illegible]

Part XVII

- | | | | |
|--|--|-----|----|
| | | Yes | No |
|--|--|-----|----|

--	--	--

- | | | |
|-------|--|----|
| 1a(1) | | No |
| 1a(2) | | No |

--	--	--

- | | | |
|--------------|--|-----------|
| 1b(1) | | No |
| 1b(2) | | No |
| 1b(3) | | No |
| 1b(4) | | No |
| 1b(5) | | No |
| 1b(6) | | No |

1c		No
----	--	----

value
ue

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

<p>Sign Here</p> <p>*****</p> <p>_____</p> <p>Signature of officer or trustee</p>	<p>2020-10-14</p> <p>_____</p> <p>Date</p>	<p>*****</p> <p>_____</p> <p>Title</p>
--	--	--

May the IRS discuss this return with the preparer shown below (see instr.) ☐ **Yes** ☐ **No**

Paid Preparer Use Only					
	Firm's name ▶				Firm's EIN ▶
	Firm's address ▶				Phone no.

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
RONALEE GALBUT	PRESIDENT & DIRECTOR 0.00	0	0	0
2200 BISCAYNE BLVD MIAMI, FL 33137				
RUSSELL GALBUT	TREASURER & DIRECTOR 0.00	0	0	0
2200 BISCAYNE BLVD MIAMI, FL 33137				
MARISA GALBUT	SECRETARY & DIRECTOR 0.00	0	0	0
2200 BISCAYNE BLVD MIAMI, FL 33137				
ROBERT GALBUT	DIRECTOR 0.00	0	0	0
2200 BISCAYNE BLVD MIAMI, FL 33137				
DAVID GALBUT	DIRECTOR 0.00	0	0	0
2200 BISCAYNE BLVD MIAMI, FL 33137				
ABRAHAM GALBUT	DIRECTOR 0.00	0	0	0
2200 BISCAYNE BLVD MIAMI, FL 33137				
KEITH MENIN	DIRECTOR 0.00	0	0	0
2200 BISCAYNE BLVD MIAMI, FL 33137				
JENNA BETH GALBUT	DIRECTOR 0.00	0	0	0
2200 BISCAYNE BLVD MIAMI, FL 33137				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AIPAC251 H ST NY WASHINGTON DC, DC 20001	NONE	PUBLIC CHARITY	ASSISTANCE FOR PROMOTION OF RELATIONSHIP BETWEEN ISRAEL AND USA	10,000
AMERICAN FRIENDS OF BEIT ISSIE SHAPIRO 767 3RD AVE 3RD FLOOR NEW YORK, NY 10017	NONE	PUBLIC CHARITY	SOCIAL WELFARE SUPPORT PROGRAMS FOR DISABLED CHILDREN AND ADULTS	5,000
AMERICAN FRIENDS OF MAGEN DAVID ADOM 3300 PGA BLVD ST 970 PALM BEACH GARDENS, FL 33410	NONE	PUBLIC CHARITY	RELIGIOUS AND EDUCATIONAL SERVICES	5,000
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN HERITAGE SCHOOL 12200 W BROWARD BLVD PLANTATION, FL 33325	NONE	PUBLIC CHARITY	EDUCATION PROGRAM SUPPORT	2,000
AMERICAN JEWISH COMMITTEE 9200 S DADELAND BLVD MIAMI, FL 33156	NONE	PUBLIC CHARITY	SOCIAL WELFARE AND HUMANITARIAN PROGRAM SUPPORT-HUMAN RIGHTS	5,000
BET ELAZRAKI CHILDRENS HOME 4244807 RABBI TARFON ST NETANYA IS	NONE	PUBLIC CHARITY	RELIGIOUS AND SOCIAL SERVICES	1,000
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BETH ISRAEL CONGREGATION 770 W 40TH STREET MIAMI BEACH, FL 33140	NONE	PUBLIC CHARITY	RELIGIOUS AND EDUCATIONAL PROGRAM SUPPORT	1,800
BIKUR CHOLIM OF MIAMI BEACH 651 W 47TH ST MIAMI BEACH, FL 33140	NONE	PUBLIC CHARITY	SOCIAL SERVICES	360
BOCA RATON SYNAGOGUE 7900 MONTOYA CIR N BOCA RATON, FL 33433	NONE	PUBLIC CHARITY	RELIGIOUS SUPPORT PROGRAMS	360
Total ► 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BOYS AND GIRLS CLUBS OF MIAMI DADE PO BOX 330219 MIAMI, FL 33233	NONE	PUBLIC CHARITY	SOCIAL SERVICES	5,000
CAMILLUS HOUSE336 NW 5TH STREET MIAMI, FL 33128	NONE	PUBLIC CHARITY	SOCIAL WELFARE AND HUMANITARIAN PROGRAM SUPPORT	10,000
CAPT HYMAN P GALBUT JLC - OHR MENACHEM MENDEL INC 411 WEST 41ST STREET MIAMI BEACH, FL 33140	NONE	PUBLIC CHARITY	RELIGIOUS SERVICES PROGRAM SUPPORT	16,800
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHABAD UNIVERSITY OF MIAMI 1251 HARDEE ROAD CORAL GABLES, FL 33146	NONE	PUBLIC CHARITY	RELIGIOUS AND EDUCATIONAL PROGRAM SUPPORT	360
CHABAD HOUSE ON WHEELS 699 LINCOLN LANE NORTH MIAMI BEACH, FL 33139	NONE	PUBLIC CHARITY	RELIGIOUS AND EDUCATION PROGRAM SUPPORT	3,600
CHABAD JEWISH CENTER OF SOUTH DAKOTA 2900 W OLD YANKTON RD SIOUX FALLS, SD 57108	NONE	PUBLIC CHARITY	RELIGIOUS AND EDUCATIONAL PROGRAM SUPPORT	180
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHABAD LUBAVITCH OF MAINE INC 11 POMEROY ST PORTLAND, ME 04102	NONE	PUBLIC CHARITY	RELIGIOUS AND EDUCATIONAL PROGRAM SUPPORT	1,800
CHABAD OF MID MIAMI BEACH INC 5401 COLLINS AVENUE MIAMI BEACH, FL 33140	NONE	PUBLIC CHARITY	RELIGIOUS AND EDUCATION PROGRAM SUPPORT	3,600
CHABAD OF SOUTH BEACH INC 747 4TH STREET STE 100 MIAMI BEACH, FL 33139	NONE	PUBLIC CHARITY	PAYMENT TO SUPPORT RELIGIOUS AND SPIRITUAL DEVELOPME	7,000
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHABAD OF SOUTH BROWARD 1295 EAST HALLANDALE BEACH BLVD HALLANDALE, FL 33009	NONE	PUBLIC CHARITY	RELIGIOUS AND EDUCATIONAL PROGRAM SUPPORT	73,500
CHAI LIFELINE151 WEST 36TH STREET NEW YORK, NY 10001	NONE	PUBLIC CHARITY	PAYMENT TO SUPPORT CANCER STRICKEN CHILDREN AND THEI	6,800
CHILDREN IN ACTION INC 1049 E 23RD ST HIALEAH, FL 33013	NONE	PUBLIC CHARITY	SOCIAL SERVICES	100
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COLEL CHABAD806 EASTERN PARKWAY BROOKLYN, NY 11213	NONE	PUBLIC CHARITY	PAYMENT TO SUPPORT SOCIAL/HUMAN SERVICES TO PEOPLE I	33,000
COMMON THREADSPO BOX 163930 AUSTIN, TX 78716	NONE	PUBLIC CHARITY	SOCIAL SERVICES	180
CONGREGATION BETH-EL OF MIAMI BEACH PO BOX 398930 MIAMI BEACH, FL 33139	NONE	PUBLIC CHARITY	PAYMENT FOR ASSISTANCE IN RELIGIOUS STUDIES	1,360
Total ► 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CONGREGATION FOREST GLEN 27 GRASSMERE ST LAKEWWOD, NJ 08701	NONE	PUBLIC CHARITY	RELIGIOUS AND EDUCATIONAL PROGRAM SUPPORT	1,800
CONGREGATION KEHILATH JESHURUN 125 EAST 85TH STREET NEW YORK, NY 10028	NONE	PUBLIC CHARITY	PAYMENT FOR ASSISTANCE TO JEWISH FAMILIES IN NEED	7,422
CONGREGATION YESHIVAS MEON HATORAH INC PO BOX 428 MONSEY, NY 10952	NONE	PUBLIC CHARITY	RELGIOUS EDUCATION PROGRAM SUPPORT	1,800
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DATA FOUNDATION5840 FOREST LANE DALLAS, TX 75230	NONE	PUBLIC CHARITY	SOCIAL WELFARE PROGRAM	500
DOLPHINS CYCLING CHALLENGE INC 347 DON SHULA DRIVE MIAMI GARDENS, FL 33056	NONE	PUBLIC CHARITY	SUPPORT FOR CANCER RESEARCH TREATMENT CENTERS	360
EZRAT ISRAEL INC 806 EASTERN PARKWAY BROOKLYN, FL 11213	NONE	PUBLIC CHARITY	INTERNATIONAL RELIEF SERVICES PROGRAMS	31,600
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FEDERAL DRUG AGENTS FOUNDATION INC 50 JERICHO TURNPIKE JERICHO, NY 11753	NONE	PUBLIC CHARITY	SOCIAL WELFARE AND FINANCIAL SUPPORT PROGRAM FOR FEDERAL LAW ENFORCEMENT AGENTS	15,000
FIU FOUNDATION 11200 SW 8TH ST - 5TH FL MIAMI, FL 33199	NONE	PUBLIC CHARITY	EDUCATIONAL AND RESEARCH PROGRAMS	1,750
FRIENDSHIP CIRCLE OF GREATER MIAMI INC PO BOX 402113 MIAMI BEACH, FL 33140	NONE	PUBLIC CHARITY	SOCIAL WELFARE PROGRAM-YOUTH DEVELOPMENT SERVICES	7,200
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FUENTE LATINA INC 1125 NE 125TH ST STE 300-3 NORTH MIAMI, FL 33161	NONE	PUBLIC CHARITY	EDUCATION PROGRAM SUPPORT	500
GIFT OF LIFE BONE MARROW FOUNDATION 800 YAMATO ROAD - STE 101 BOCA RATON, FL 33431	NONE	PUBLIC CHARITY	SOCIAL WELFARE PROGRAMS	500
GIRLS TOWN OR CHADASH 1431 CONEY ISLAND AVENUE BROOKLYN, NY 11230	NONE	PUBLIC CHARITY	RAISES FUNDS FOR FOREIGN AFFAIRS AND NATIONAL SECURI	2,500
Total ► 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GLOBAL ARTS INC 720 MASSACHUSETTS AVE CAMBRIDGE, MA 02139	NONE	PUBLIC CHARITY	SOCIAL SERVICES	1,000
HACHNOSSOS KALLAH OF GREATER MIAMI 1400 LENOX AVENUE MIAMI BEACH, FL 33139	NONE	PUBLIC CHARITY	SOCIAL WELFARE PROGRAMS SUPPORT	1,800
HAFTR389 CENTRAL AVENUE LAWRENCE, NY 11559	NONE	PUBLIC CHARITY	SOCIAL SERVICES	5,000
Total ► 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JUINTI KOSKI CORP 30725 US HIGHWAY 1 PALM HARBOR, FL 34684	NONE	PUBLIC CHARITY	SOCIAL SERVICES	1,000
KEREN ACHIEZER INC 6300 WILSHIRE BLVD LOS ANGELES, CA 90048	NONE	PUBLIC CHARITY	SOCIAL SERVICES	1,800
KETER ABRAHAM OF CHABAD INC 2200 BISCAYNE BLVD MIAMI, FL 33137	NONE	PUBLIC CHARITY	PAYMENT FOR ASSISTANCE TO INDIGENT FAMILIES	191,000
Total ► 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LEHRMAN COMMUNITY DAY SCHOOL 727 LEHRMAN DRIVE MIAMI BEACH, FL 33141	NONE	PUBLIC CHARITY	RELIGIOUS AND EDUCATIONAL PROGRAM SUPPORT	3,600
LUBAVITCH EDUCATION CENTER 17330 NW 7TH AVENUE MIAMI, FL 33169	NONE	PUBLIC CHARITY	RELIGIOUS EDUCATION PROGRAMS SUPPORT	500
LUBAVITCH YESHIVA ACADEMY 1148 CONVERSE STREET LONGMEADOW, MA 01106	NONE	PUBLIC CHARITY	RELIGIOUS AND EDUCATIONAL PROGRAM SUPPORT	1,000
Total ► 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MAGNET EDUCATIONAL CHOICE ASSOC 1450 NE 2ND AVE MIAMI, FL 33132	NONE	PUBLIC CHARITY	EDUCATIONAL SERVICES	6,000
MAKE A WISH FOUNDATION OF SOUTH FLORIDA INC 4491 S STATE ROAD 7 FORT LAUDERDALE, FL 33314	NONE	PUBLIC CHARITY	SOCIAL WELFARE AND HUMANITARIAN PROGRAM SUPPORT	360
MIAMI BEACH JEWISH COMMUNITY CENTER INC 4221 PINE TREE DRIVE MIAMI BEACH, FL 33140	NONE	PUBLIC CHARITY	SOCIAL PROGRAM SUPPORT- NEIGHBORHOOD CENTERS	30,000
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MIAMI BEACH SENIOR HIGH PTSA 13110 NE 8TH AVE NORTH MIAMI BEACH, FL 33161	NONE	PUBLIC CHARITY	EDUCATIONAL SERVICES	500
MIAMI CHILDRENS HOSPITAL 3300 SW 62ND AVE MIAMI, FL 33155	NONE	PUBLIC CHARITY	SOCIAL AND MEDICAL SERVICES	1,800
MIAMI CHILDRENS MUSEUM INC 980 MCARTHUR CSWY MIAMI, FL 33132	NONE	PUBLIC CHARITY	PAYMENT TO SUPPORT EDUCATIONAL ACTIVITIES FOR CHILDR	3,600
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MIAMI NEW DRAMA 1040 LINCOLN ROAD MIAMI BEACH, FL 33139	NONE	PUBLIC CHARITY	SOCIAL SERVICES	5,000
NER ISRAEL RABBINICAL COLLEGE 400 MT WILSON LANE BALTIMORE, MD 21208	NONE	PUBLIC CHARITY	PAYMENT TO PROMOTE RELIGIOUS EDUCATION	500
NYCCAL780 KIMBALL AVE 3B YONKERS, NY 10704	NONE	PUBLIC CHARITY	SOCIAL SERVICES	1,800
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
OHEL CHILDRENS HOME AND FAMILY SERVICES 54510 16TH AVENUE BROOKLYN, NY 11204	NONE	PUBLIC CHARITY	PAYMENT FOR SUPPORT OF PATIENTS WITH PSYCHIATRIC DIS	360
OHEV SHALOM CONGREGATION 7055 BONITA DRIVE MIAMI BEACH, FL 33141	NONE	PUBLIC CHARITY	RELIGIOUS AND EDUCATIONAL PROGRAMS	1,000
SABRINA COHEN FOUNDATION 1800 SUNSET HARBOR DR MIAMI BEACH, FL 33139	NONE	PUBLIC CHARITY	SOCIAL SERVICES	1,800
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SHARSHERET 1086 TEANECK ROAD SUITE 2G TEANECK, NJ 07666	NONE	PUBLIC CHARITY	MEDICAL RESEARCH PROGRAMS	1,800
SIMON WEISENTHAL CENTER 16735 NE 18TH AVENUE N MIAMI BEACH, FL 33162	NONE	PUBLIC CHARITY	SUPPORT FOR THE ARTS, CULTURAL AND HISTORIC PROGRAMS	40,000
SPECIAL OLYMPICS FLORIDA INC 1915 DON WICKHAM DRIVE CLERMONT, FL 34711	NONE	PUBLIC CHARITY	SOCIAL WELFARE AND YOUTH DEVELOPMENT PROGRAM SUPPORT	1,800
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ST JUDE CHILDRENS RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MAIL MEMPHIS, TN 38105	NONE	PUBLIC CHARITY	SOCIAL AND MEDICAL SERVICES	1,800
TEMPLE MENORAH620 75TH ST MIAMI BEACH, FL 33141	NONE	PUBLIC CHARITY	RELIGIOUS AND EDUCATIONAL SERVICES	1,000
THE ALEPH INSTITUTE INC 9540 COLLINS AVENUE SURFSIDE, FL 33154	NONE	PUBLIC CHARITY	SOCIAL WELFARE AND HUMANITARIAN PROGRAM SUPPORT	500
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE CHILDRENS INTIATIVE 3625 RUFFIN ROAD STE 100 SAN DIEGO, CA 92123	NONE	PUBLIC CHARITY	EDUCATIONAL AND HUMANITARIAN OUTREACH PROGRAMS	1,000
THE IMPOSSIBLE DREAM50 W 47TH ST NEW YORK, NY 10036	NONE	PUBLIC CHARITY	SOCIAL SERVICES	1,800
TORAH ACADEMY OF BOCA RATON INC 7202 PALMETTO CIRCLE NORTH BOCA RATON, FL 33433	NONE	PUBLIC CHARITY	PAYMENT FOR ASSISTANCE IN RELIGIOUS STUDIES	1,800
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TORAH HANACHAL303 PARK AVENUE ELBERON, NJ 07740	NONE	PUBLIC CHARITY	ASSISTANCE TO INDIGENT JEWISH FAMILIES	8,600
TORAS CHAIM TORAS EMES 1025 NE MIAMI GARDENS DRIVE MIAMI, FL 33179	NONE	PUBLIC CHARITY	RELIGIOUS AND EDUCATIONAL SERVICES	1,000
UNIDAD OF MIAMI BEACH INC 1701 NORMANDY DRIVD MIAMI BEACH, FL 33141	NONE	PUBLIC CHARITY	SOCIAL WELFARE AND HUMANITARIAN PROGRAM SUPPORT	1,000
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UNIVERSITY OF MIAMI SCHOOL OF LAW 1311 MILLER DRIVE CORAL GABLES, FL 33146	NONE	PUBLIC CHARITY	PAYMENT FOR SUPPORT TO THE COLLEGE OF ARTS AND SCIEN	5,000
VOICES FOR CHILDREN FOUNDATION INC 601 NW 1ST COURT MIAMI, FL 33136	NONE	PUBLIC CHARITY	CHILDREN AND YOUTH SERVICES-CHILD ABUSE PREVENTION	2,000
YEHUDI INC4585 N MICHIGAN AVE MIAMI BEACH, FL 33140	NONE	PUBLIC CHARITY	RELIGIOUS SUPPORT PROGRAMS	1,900
Total ▶ 3a				605,152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
YOUNG ISRAEL CONGREGATION 9580 ABBOTT AVENUE SURFSIDE, FL 33154	NONE	PUBLIC CHARITY	RELIGIOUS AND EDUCATIONAL SERVICES	5,000
YOUNG MUSICIANS UNITE INC PO BOX 371021 MIAMI, FL 33137	NONE	PUBLIC CHARITY	SOCIAL SERVICES	5,000
Total ▶ 3a				605,152

TY 2019 Investments - Other Schedule

Name: THE RUSSELL & RONALEE GALBUT FAMILY FOUN
FOUNDATION

EIN: 20-5918650

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ISRAELI BONDS	AT COST	6,000	6,000

TY 2019 Other Expenses Schedule

Name: THE RUSSELL & RONALEE GALBUT FAMILY FOUN
FOUNDATION

EIN: 20-5918650

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ANNUAL REPORT	190	0	0	0
BANK FEES	301	0	0	0

TY 2019 Other Increases Schedule

Name: THE RUSSELL & RONALEE GALBUT FAMILY FOUN
FOUNDATION

EIN: 20-5918650

Description	Amount
PREVIOUS YEARS CONTRIBUTIONS VOIDED	4,440

Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to <u>www.irs.gov/Form990</u> for the latest information.	OMB No. 1545-0047 2019
Name of the organization THE RUSSELL & RONALEE GALBUT FAMILY FOUN FOUNDATION		Employer identification number 20-5918650

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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 other 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, 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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
THE RUSSELL & RONALEE GALBUT FAMILY FOUN
FOUNDATION

Employer identification number
20-5918650

Part I

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GALBUT 2006 CHARITABLE LEAD ANNUITY TRUST 2200 BISCAYNE BLVD MIAMI, FL 33137	\$ 347,546	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
2	RONALEE GALBUT 2006 CHARITABLE LEAD ANNUITY TRUST 2200 BISCAYNE BLVD MIAMI, FL 33137	\$ 347,546	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
3	HOWARD FIRST LLC 2200 BISCAYNE BLVD MIAMI, FL 33137	\$ 60,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization THE RUSSELL & RONALEE GALBUT FAMILY FOUN FOUNDATION	Employer identification number 20-5918650
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions). Use duplicate copies of Part II if additional space is needed.</small>	(c) FMV (or estimate) (See instructions)	(d) Date received
-	<hr/> <hr/> <hr/>	<hr/> \$	<hr/>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	<hr/> <hr/> <hr/>	<hr/> \$	<hr/>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	<hr/> <hr/> <hr/>	<hr/> \$	<hr/>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	<hr/> <hr/> <hr/>	<hr/> \$	<hr/>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	<hr/> <hr/> <hr/>	<hr/> \$	<hr/>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	<hr/> <hr/> <hr/>	<hr/> \$	<hr/>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	<hr/> <hr/> <hr/>	<hr/> \$	<hr/>

20-5918650

Part III *Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)* ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)