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. | 9|12 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047 2019

Open to Public Inspection

For	calen	dar year 2019 or tax year beginning	, 2019	, and ending		, 20
Nam	e of four	ndation		A En	ployer identification numb	per
Flo	gadon F	Foundation			33-0640460	<u> </u>
Num	ber and	street (or P.O box number if mail is not delivered to street address)	Room	/suite B Tel	lephone number (see instruc	tions)
402	North	Division Street	(310) 459-474	16		
Crty	or town,	state or province, country, and ZIP or foreign postal code		C If e	xemption application is pen	dıng, check here ▶ 🔲
Car	son Ci	ty, NV 89703				
G	Check	all that apply: 🔲 Initial return 🔲 Initial return	of a former public	charity D 1.1	Foreign organizations, checl	k here ▶
		☐ Final return ☐ Amended r		2.1	Foreign organizations meetii	ng the 85% test,
		Address change Name char			check here and attach comp	outation · · •
		type of organization: Section 501(c)(3) exempt p			rivate foundation status was stion 507(b)(1)(A), check here	
		n 4947(a)(1) nonexempt charitable trust Other tax		ation	אנטוז טטיוטן זיןטן זער מופנא וופוזג	▶∐
-		narket value of all assets at J Accounting method	: 🗹 Casn 📋 Ad	je nu	he foundation is in a 60-mor	
	ine 16	f year (from Part II, col. (c), ☐ Other (specify)) ► \$ 176,657 ☐ (Part I, column (d), must be	on cash basis)		der section 507(b)(1)(B), che	ck here . ► [_]
						(d) Disbursements
	ar t r	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net investr	nent (c) Adjusted net	for charitable purposes
		the amounts in column (a) (see instructions).)	books	ıncome	liicome	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	200,000			
	2	Check ► ☐ if the foundation is not required to attach Sch. B	,	1		,
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	90		90	
	5a	Gross rents				
	b	Net rental income or (loss)				
Ë	6a	Net gain or (loss) from sale of assets not on line 10				
Revenue	Ь	Gross sales price for all assets on line 6a				
ě	7	Capital gain net income (from Part IV, line 2)				
Œ	8	Net short-term capital gain				
	9	Income modifications				+
	10a	Gross sales less returns and allowances				-
	b	Less: Cost of goods sold				
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	200,090		90	
	13	Compensation of officers, directors, trustees, etc.				
šes	14	Other employee salaries and wages				
ű	15	Pension plans, employee benefits				
Expenses	16a	Legal fees (attach schedule)				
	ь	Accounting fees (attach schedule)				1
Ę	C	Other professional fees (attach schedule)				
tra	17	Interest RECEIVED				-
nis	18	Taxes (attach schedule) (see instructions)				,
Ē	19	Depreciation (attags schedule) and depletion . Occupancy	·			!
Ad	20					+
פַ	21 22	ravel, conferences and meetings				+
jai	23	Printing and publications GDEN, UT Other expenses (attach schedule).	262			262
Operating and Administrative	24	Total operating and administrative expenses.				1
rat		Add lines 13 through 23	262			262
σ	25	Contributions, gifts, grants paid	21,750			21,750
0	26	Total expenses and disbursements. Add lines 24 and 25	22,012		0	22,012
_	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	178,078	•		
	ь	Net investment income (if negative, enter -0-)			90	1
_	С	Adjusted net income (if negative, enter -0-)			N/A	
For	Paper	work Reduction Act Notice, see instructions.	Cat. N	lo. 11289X		orm 990-PF (2019)

Pa	irt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	1,641	79,719	79,719
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶	and the second of the second	an in the growth of the response.	in the few comments
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
1	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 ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)		100,000	96,938
	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)			,
	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 l)	1,641	179,719	176,657
	17	Accounts payable and accrued expenses			
S	18	Grants payable			1
ž	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable (attach schedule)			-
	22	Other liabilities (describe > 17 through 22)	0	0	
	23	Total liabilities (add lines 17 through 22)	- 0		<u> </u>
Balances	ŀ	Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30.			ł
ä	24	Net assets without donor restrictions			
ā	25	Net assets with donor restrictions			
	23	Foundations that do not follow FASB ASC 958, check here ▶			
Fund	1	and complete lines 26 through 30.			1
Ē	26	Capital stock, trust principal, or current funds			
9	27	Paid-in or capital surplus, or land, bldg., and equipment fund			1
ets	28	Retained earnings, accumulated income, endowment, or other funds	1,641	179,719	1
SS	29	Total net assets or fund balances (see instructions)	1,641	`, 179,719	
Net Assets	30	Total liabilities and net assets/fund balances (see			
ž		instructions)	1,641	179,719	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
	Tota	al net assets or fund balances at beginning of year-Part II, colu	ımn (a), line 29 (mus	st agree with	
	end-	-of-year figure reported on prior year's return)		1	1,641
2		er amount from Part I, line 27a			178,078
3	Othe	er ıncreases not ıncluded ın line 2 (ıtemize) ▶		3	
4	Add	l lines 1, 2, and 3		4	179,719
5	Dec	reases not included in line 2 (itemize) ▶	D-411 -21 43 "	5	
6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)—	ran II, column (b), li	ne 29 6	179,719

Part	V Capital Gains and	d Losses for Tax on Investn	nent Income			
				(c) Date acquired (mo., day, yr)	(d) Date sold (mo., day, yr.)	
1a				i		
b						
<u>c</u>						
<u>d</u>						
<u>e</u>						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		in or (loss) (f) minus (g))
<u>a</u>						
<u> </u>						
<u>c</u>						
<u>d</u>						
<u>е</u>				40/04/00		
	Complete only for assets she	owing gain in column (h) and owned				(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col. (i) (j), if any		t less than -0-) or from col (h))
a						
<u> </u>					·	
<u> </u>						
<u>d</u>						
<u>е</u>						
2	Capital gain net income of	r mercannariossi / • ·	also enter in Pa , enter -0- in Pai		2	
3	If gain, also enter in Part	in or (loss) as defined in sections 1, line 8, column (c). See instru	ctions. If (loss)	: , enter -0- in }	3	
Part		ler Section 4940(e) for Redu		et Investment		
		vate foundations subject to the				
ט יט ין	ptional use by domestic pr	ivate foundations subject to the	30011011 4340(a)	tax on het invest	mont moone.	
If sect	tion 4940(d)(2) applies, leav	e this part blank.				
		section 4942 tax on the distribu			pase period?	☐ Yes ☐ No
1		ount in each column for each ye			aking any entries	
<u> </u>	(a)		<u> </u>			(d)
Cale	Base period years endar year (or tax year beginning in	(b) Adjusted qualifying distribution	s Net value of	(c) f nonchantable-use a		tribution ratio divided by col (c))
	2018					
	2017					
	2016					
	2015			·		
	2014	<u> </u>				
_						
2	Total of line 1, column (d)				. 2	
3		for the 5-year base period—divoundation has been in existence			. 3	
4	Enter the net value of nor	charitable-use assets for 2019 f	rom Part X, line	5	. 4	
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)		. 6	
7	Add lines 5 and 6				. 7	
8		ons from Part XII, line 4			. 8	10/ 11 2
	If line 8 is equal to or great Part VI instructions.	ater than line 7, check the box ii	n raπ vi, iine 1b	, and complete	ınat paπ using a 1	70 tax rate. See the

Part		see	instru	ictio	<u>15)</u>
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)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			2
	here ► ☐ and enter 1% of Part I, line 27b	ł			1
С	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			2
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			2
6	Credits/Payments·				1
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 6a	}			- 1
b	Exempt foreign organizations—tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868) 6c				Ī
d	Backup withholding erroneously withheld	.			
7	Total credits and payments. Add lines 6a through 6d	7			0
8	Enter any penalty for underpayment of estimated tax. Check here 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			2
10		10			
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶	11			
	VII-A Statements Regarding Activities		T	124	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or of		<u> </u>	Yes	No
	participate or intervene in any political campaign?		1a		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See instructions for the definition	the	1b		•
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater	erials			ł
	published or distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?		1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				1
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$				l
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impos	ed			- 1
	on foundation managers. ► \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	•	2		1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, art				
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	S .	3		<u> </u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		V
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.	•	5		
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	<u> </u>	<u> </u>	
	conflict with the state law remain in the governing instrument?		6	~	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, coi. (c), and Pa	ırt XV	7		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. Nevada	1.			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ger	neral		j	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	•	8b	~	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			0
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Y complete Part XIV		9		v (
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing names and addresses		10		~

_Pari	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		v
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		,
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	7	
	Website address ► N/A			
14		0) 403	-1076	
	Located at ► 3865 White Dove Lane, Bullhead City, AZ ZIP+4 ►	8644	2	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			▶ ⊔
40	and enter the amount of tax-exempt interest received or accrued during the year		N/A Yes	No
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	res	V
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of		•	j
Dor	the foreign country ► VII-B Statements Regarding Activities for Which Form 4720 May Be Required	4	-	
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):		162	140
Ia	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?	` ;		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes Vo			{
	 (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 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)?	:		
	(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.)			u
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			1
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c		-
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)):		,* 1	,
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	all years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 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	-		ļ.
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, 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? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		~
b	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		

Page	6
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Part	VII-B Statements Regarding Activities	s for W	hich Form	4720 I	May Be R	equire	d (contii	nued)			
5a	During the year, did the foundation pay or incur	-		- (aaat	: 4045/-	\\ 2	□v	[]Na		Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? . ☐ Yes ☑ No (2) Influence the outcome of any specific public election (see section 4955); or to carry on,										ł
	directly or indirectly, any voter registration drive?										
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No										- 1
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions										}
	section 4945(d)(4)(A)? See instructions								•	٠.	
	purposes, or for the prevention of cruelty to	childrer	or animals?				☐Yes	☑ No	۸ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ		}
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										
_	Organizations relying on a current notice regards	_							1		1
С	If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility							₽ No]
	If "Yes," attach the statement required by Regula	ations s	ection 53.49	45-5(d).	•		_		}		Ì
6a	Did the foundation, during the year, receive any					emiums	_				
b	on a personal benefit contract?					benefil	Yes ∵contract		6b		
	If "Yes" to 6b, file Form 8870.										
	At any time during the tax year, was the foundation If "Yes," did the foundation receive any proceed								7b		
ь 8	Is the foundation subject to the section 4960 ta							ır.	10		
	remuneration or excess parachute payment(s) di										
Par	VIII Information About Officers, Direct and Contractors	tors, 1	Trustees, Fo	ounda	tion Man	agers,	Highly F	Paid E	mploy	ees,	
1	List all officers, directors, trustees, and found	lation r	nanagers an	d their	compens	ation. S	See instr	ıctions			
	(a) Name and address	(b) Title hou	e, and average rs per week ed to position	(c) Cor (If n	mpensation iot paid, ter -0-)	(d) (emplo	Contribution byee benefit erred compe	s to plans	(e) Expe	nse acc allowan	
SE	SCHEDULE ATTACHED									-	
		ļ									
		1				<u> </u>		ļ			
							-				
	<u> </u>										
2	Compensation of five highest-paid employee "NONE."	es (oth	er than tho	se incl	uded on li	ne 1—	see instr	uction	s). If n	one,	enter
	(a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	veek	(c) Compe	nsation	(d) Contrib- employee plans and compen	benefit deferred	(e) Expe	nse acc allowan	
1	IONE				·						
-											
									ı		
Total	number of other employees paid over \$50,000 .						<u> </u>	. ▶			$\overline{\circ}$
	names of other employees paid over 400,000 .	 	<u> </u>					لسست		0 DF	- -

Part	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	ł Employees,
3	ive highest-paid independent contractors for professional services. See instructions. If none, enter "N	NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
	NONE	
-		
Total	umber of others receiving over \$50,000 for professional services	•
Par		
List	e foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the numbe	er of Expenses
org	zations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1	N/A	
2		
_		
3		
4		
•		
Par		
De	be the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	N/A	
_		
2		
All	er program-related investments See instructions.	
3	, , , , , , , , , , , , , , , , , , ,	
-		
Total	odd lines 1 through 3	•
		Earn 990-PF (20

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	ign founda	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	7,457
b	Average of monthly cash balances	1b	7,307
c	Fair market value of all other assets (see instructions)	1c	- 1,00.
d	Total (add lines 1a, b, and c)	1d	14,764
e	Reduction claimed for blockage or other factors reported on lines 1a and	 	
	1c (attach detailed explanation)]]	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	14,764
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		- 1,751
•	instructions)	4	221
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	14,543
6	Minimum investment return. Enter 5% of line 5	6	727
Part		I I .	
1	Minimum investment return from Part X, line 6	1	727
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b	1	
C	Add lines 2a and 2b	2c	2
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	725
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	725
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	725
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	22,012
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	0
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	0
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	22,012
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	22,012
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculatin qualifies for the section 4940(e) reduction of tax in those years.		
		F	- 000-PE (2010)

Form 99	00-PF (2019)				Page 9
Part	XIII Undistributed Income (see instruction	s)			
		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				725
2	Undistributed income, if any, as of the end of 2019			·	
a	Enter amount for 2018 only			0	
ь	Total for prior years: 20 , 20 , 20		0		
3	Excess distributions carryover, if any, to 2019:				
а	From 2014				
b	From 2015	1	1		
С	From 2016		.		•
d	From 2017				
е	From 2018				
f	Total of lines 3a through e	77.290			
4	Qualifying distributions for 2019 from Part XII,		1	1	
	line 4: ▶ \$ 22,012				
a	Applied to 2018, but not more than line 2a .			0	
b	Applied to undistributed income of prior years (Election required—see instructions)	,	0		
С	Treated as distributions out of corpus (Election			1	
	required—see instructions)	0			
d	Applied to 2019 distributable amount				725
е	Remaining amount distributed out of corpus	21,287			
5	Excess distributions carryover applied to 2019				
	(If an amount appears in column (d), the same amount must be shown in column (a).)	اه			
_					
6	Enter the net total of each column as indicated below:				
2	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	98,577			
a	Prior years' undistributed income. Subtract				
b	line 4b from line 2b		0_		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed		0		
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0		
е	Undistributed income for 2018. Subtract line		1		
	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 catisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be			-	
	required—see instructions)	o		į	
8	Excess distributions carryover from 2014 not				
•	applied on line 5 or line 7 (see instructions) .	154			
9	Excess distributions carryover to 2020.				•
•	Subtract lines 7 and 8 from line 6a	98,423			
10	Analysis of line 9:				
а	Excess from 2015			1	
b	Excess from 2016		r r e burri sa	1947 in - 8 7 7 1 1	maga hi araprara rua al
С	Excess from 2017 . , 16,757			ļ	1
d	Excess from 2018	j	•	}	
_	Excess from 2019 21,287	Ì	•	1	•

	90-PF (2019)	: /= = -	untions and Date	\(\(\) \(\	0)	Page 1 (
_	XIV Private Operating Foundat					
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective for Check box to indicate whether the foun				section \(\begin{array}{c} 4842(i) \\ \end{array}	(2) 0
b 2a		Tax year	e operating lounda	Prior 3 years	section 4842())	(3) or 🔲 4942(j)(5
£.a	income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	investment return from Part X for each year listed	(4) 2010	(3) 2010	(0, 20.1	1 /2010	
h	85% of line 2a		 			
C	Qualifying distributions from Part XII,			1	1	· · · · · · -
•	line 4, for each year listed					1
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.]
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the	· · · · · · · · · · · · · · · · · · ·		1		
	alternative test relied upon:					
а	"Assets" alternative test-enter:			1		!
	(1) Value of all assets	<u> </u>				
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)	######################################	//	-		
b	"Endowment" alternative test-enter 2/3			1		
	of minimum investment return shown in					
	Part X, line 6, for each year listed		/	 	-	
С	"Support" alternative test—enter:	/		-		•
	(1) Total support other than gross investment income (interest,	/		1		1
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public			1		
	and 5 or more exempt	/				
	organizations as provided in section 4942(j)(3)(B)(iii)	/		1		1
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income	(]
Par	XV Supplementary Informatio			the foundation	had \$5,000 or m	ore in assets a
	any time during the year —	see instructio	ns.)			
1	Information Regarding Foundation	Managers:				
а	List any managers of the foundation w	ho have contrib	outed more than 29	% of the total con	stributions received	by the foundation
	before the close of any tax year (but or	nly if they have t	contributed more ti	nan \$5,000). (See	Section 507 (d)(2).)	
	Donald Hubbs List any managers of the foundation	100/	or mare of the etc	ok of a corporate	on (or an oqually la	arge portion of th
b	ownership of a partnership or other en	tity) of which the	e foundation has a	10% or greater in	on (or an equally is nterest.	arge portion or the
	None	ary, or which are	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
2	Information Regarding Contribution	Grant Gift Lo	an Scholarship.	etc Programs:		
_	Check here ▶ ☑ If the foundation of				organizations and	does not accer
	unsolicited requests for funds. If the fo	undation makes	gifts, grants, etc.,	, to individuals or	organizations unde	r other conditions
	complete items 2a, b, c, and d. See in					
a	The name, address, and telephone nu	mber or email ac	ddress of the perso	on to whom applic	cations should be a	ddressed:
			·		,	
					•	
b	The form in which applications should	be submitted a	nd information and	materials they sh	ould include:	
					 .	
C	Any submission deadlines:					
<u></u>	Any restrictions or limitations on aw	ards such as	by geographical a	reas, charitable	fields, kinds of ins	stitutions, or othe
u	factors:	, odon do	-, 33-4-111041 4	,	,25 5, 114	

Form **990-PF** (2019)

Par 3	Supplementary Information (cont Grants and Contributions Paid During to	<i>inued)</i> the Y ear or A pprov	ed for Fu	ture Payment	-
	Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
	Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a					
	SCHEDULE ATTACHED				
			ł		
	Tabel		<u> </u>	▶ 3a	21,750
b	Total	<u> </u>	' 		21,730
	NONE				
			ļ		
				<u></u>	
_	Total			▶ 3b	0

Рα	t XVI-A	Analysis of Income-Producing Ac	74 6	ne			
Ente	r gross amo	ounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by secti	on 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
1	Program s	ervice revenue:	Dusiness code	Amount	Exclusion code	Anount	(See instructions)
	а		-				
	b						
	_						
	_						
	f						
	g Fees a	nd contracts from government agencies					
2	Membersh	nip 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-fi	nanced property					
		bt-financed property					
6	Net rental	income or (loss) from personal property					
7		stment income					
8	Gain or (los	s) from sales of assets other than inventory					
9		e or (loss) from special events					
10	Gross prof	fit or (loss) from sales of inventory					
11	Other reve	nue: a					L
	b						
	c				ļ		·
	d						
	e			<u> </u>	1		
		Add columns (b), (d), and (e)				<u> </u>	
							_
		i line 12, columns (b), (d), and (e)				13	
See	worksheet	in line 13 instructions to verify calculation	s.)				0
See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
See Pa	worksheet	in line 13 instructions to verify calculation	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
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See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
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See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	
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See Pa	worksheet	in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	NIA	

Part		· · · · · · · · · · · · · · · · · · ·		sfers to and Transactio	ns and R	Relationships With Noncha		е Ехе	
1						y other organization described	318.41.1 (1.92)	Yes	
			ther than section	501(c)(3) organizations) or	r in section	ion 527, relating to political		2.	12. 25. 1 (12. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14
9	_	janizations? Insfers from the ren			i-ation	 .			1
0		insfers from the rep Cash	JORING TOURIDATION TO	o a noncharitable exempt org	Janization	01:	1a(1)		
	• •	Other assets .					1a(1)		1-
b		ner transactions:	• • • • • •		• • •		Tay-	, i'	1.
			a noncharitable exe	empt organization		· · · · · · · · ·	1b(1)		1
				able exempt organization .		• • • • • • • • • •	1b(2)		†
				er assets			1b(3))	
	(4)	Reimbursement ar	arrangements				1b(4)		
		Loans or loan guar					1b(5)		<u> </u>
				hip or fundraising solicitation			1b(6)	4	1
_		•		sts, other assets, or paid em			16	ــــــــــــــــــــــــــــــــــــــ	<u> </u>
d	valu	ue of the goods, ot	other assets, or service	ices given by the reporting fe	foundation.	Column (b) should always should always should always should always always should always should be should b	s than	fair m	market
	valu	ue in any transaction	on or sharing arrange	gement, show in column (d) t	the value of	of the goods, other assets, or se	ervices	s recei	eived.
(a) Line	e no.	(b) Amount involved	(c) Name of noncr	hantable exempt organization	(d) Descri	ription of transfers, transactions, and sha	anng am	angem	ents
		1			+				
		4							
			 		1				
		 	 		+				
		 	 		+		• • • • • • • • • • • • • • • • • • • •		
-		 			 				
		1							
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					†				
									_
	'								
			<u> </u>						
	'		 						
- 00		the foundation dir	indicatly s			to exempt organizations			
Za				amiliated with, or related to, ection 501(c)(3)) or in section		nore tax-exempt organizations	□ v	es Ty	→ NIO
ь			e following schedule.		ULI.	• • • • • • • • • • • •	L .	8 5 ∟	Ø IVC
		(a) Name of organi		(b) Type of organization		(c) Description of relation	onship		
	—	(4)	Zanon	(4) - /	'	\ - , ,	H turny		
						(
									
		ider penalties of perjury, I	I declare that I have examine	ed this return, including accompanying	schedules and	d statements, and to the best of my knowle	edge and	belief, i	it is true
Sign	CO	rrect, and complete. Lecti	claration of preparer (other that	han taxpayer) is based on all information	of which breh	parer has any knowledge. May the	IRS disci	uss this	s return

	er penalties of perjury, I declare that I have act, and complete. Declaration of preparer	examined this return, including accompa	nying schedules and statements, a	nd to the	best of my knowledge and belief, it is true
tere	nature of officer or trustee	3/23/20 Date	President/Director Title		May the IRS discuss this return with the preparer shown below? See instructions. Yes No
Paid Preparer	Print/Type preparer's name	Preparer's signature	Date		Check if PTIN self-employed
Ise Only	Firm's name			Firm's	EIN ▶
, , , , , , , , , , , , , , , , , , ,	Firm's address ▶	16		Phone	e no.

Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Employer identification number

33-0640460

Floradon Foundation Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5.000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific. literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, 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 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).

Name of organization Employer identification number Floradon Foundation 33-0640460

Part I	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	Donald Hubbs 1658 San Onofre Drive Pacific Palisades, CA 90272	\$\$	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			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			

Name of organization Employer identification number Floradon Foundation 33-0640460

art II N	loncash Property (see instructions). Use duplicate co	opies of Part II if additional space	ce is needed.
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
No. om art i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
		*	***************************************

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

Name of org) E	mployer identification number		
Floradon F Part III	Exclusively religious, charitable, etc	- contributions to	organizations de	operihad in a	33-0640460		
raiting	(10) that total more than \$1,000 for the following line entry. For organizati contributions of \$1,000 or less for the	the year from any ons completing Par year. (Enter this in	one contributor. t III, enter the tota formation once. Se	Complete co	olumns (a) through (e) and oly religious, charitable, etc.,		
(a) No.	Use duplicate copies of Part III if addi	tional space is need	ded.				
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Desc	ription of how gift is held		
-		(e) Transf	er of gift				
	Transferee's name, address, and	3 ZIP + 4	Relation	ship of trans	feror to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Desc	ription of how gift is held		
-							
	Transferee's name, address, and	sfer of gift Relationship of transferor to transferee					

(a) No. from Part I	(b) Purpose of gift (c) Use of gift		of gift	(d) Desci	ription of how gift is held		
ļ							
-							
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee			
				•••••			
(a) No. from Part I	(b) Purpose of gift	(c) Use (of gift	(d) Desc	ription of how gift is held		
	(e) Transfer of gift						
	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee				
}							

.FLORADON FOUNDATION 33-0640460 FORM 99OPF - PART XV GRANTS PAID DURING 2019

Relationship to Substantial Contributor and **Purpose of Grant** Federal ID **Recipient Name and Address Foundation Status of Recipient** or Contribution Amount 74-2726757 **American Stewards** Civic 250.00 none **Public Charity** 624 S Austin Avenue Suite 101 Georgetown, TX 78626 501(c)(3) and 509(a)(1) 94-6124054 **Bay Area Rescue Mission** None Shelter for Homeless 2,000.00 200 Macdonald Ave **Public Charity** Richmond, CA 94801 501(c)(3) and 509(a)(1) 52-1289734 **Capital Research Center** Civic None 1,000.00 1513 16th Street NW **Public Charity** Washington, DC 20036 501(c)(3) and 509(a)(1) 13-3391210 Covenant House California None **Shelter for Homeless** 1,000.00 1325 N. Western Avenue **Public Charity** Hollywood, CA 90027 501(c)(3) and 509(a)(1) 13-5562162 Helen Keller International, Inc. None Civic 2,000.00 352 Park Avenue South 12th floor **Public Charity** New York, NY 10010 501(c)(3) and 509(a)(1) 23-7327730 The Heritage Foundation None Civic 2,000.00 214 Massachusetts Ave NE **Public Charity** Washington, DC 20002 · 501(c)(3) and 509(a)(1) 04-2103616 Perkins School for the Blind -None Education 2,500.00 175 North Beacon Street **Public Charity** Watertown, MA 02472 501(c)(3) and 509(a)(1) 94-1156347 The Salvation Army None Civic 1,000.00 180 East Ocean Blvd. 9th Floor **Public Charity** Long Beach, CA 90802 501(c)(3) and 509(a)(1) 13-6188433 SOS Children's Villages None Civic 1,000.00 **Public Charity** 1620 I Street NW Suite 900 501(c)(3) and 509(a)(1) Washington, DC 20006 95-1738153). None spcaLA Civic 500.00 5026 West Jefferson Boulevard **Public Charity** Los Angeles CA 90016 501(c)(3) and 509(a)(2) 58-1454716 The Carter Center, Inc. None Civic 2,000.00 One Copenhill 453 Freedom Parkway **Public Charity**

501(c)(3) and 509(a)(2)

Atlanta, Georgia 30307

FLORADON FOUNDATION
33-0640460
FORM 990PF - PART XV
GRANTS PAID DURING 2019

Relationship to Substantial

Federal ID	Recipient Name and Address	Contributor and Foundation Status of Recipient	Purpose of Grant or Contribution	Amount
51-0143029	Therapeutic Living Centers for the Blind 7915 Lindley Avenue	None Public Charity	Visually Blind Services	2,000.00
	Reseda, CA 91335	501(c)(3) and 509(a)(1)		
95-1709293	Union Rescue Mission	None	Shelter for Homeless	2,500.00
	545 South San Pedro Street	Public Charity		
	Los Angeles, CA 90013	501(c)(3) and 509(a)(1)		
95-1922279	World Vision, Inc.	None	Relief Services	2,000.00
	PO Box 9716	Public Charity		
	Federal Way, WA 98063	501(c)(3) and 509(a)(1)		