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. OMB No 1545-0047

Department of the Treasury

► Go to www.irs.gov/Form990PFfor instructions and the latest information Open to Public Inspection Internal Revenue Service For calendar year 2019 or tax year beginning , 2019, and ending Name of foundation A Employer identification number ROBERT AND RUTH K LEE FOUNDATION 56-6562309 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 888-730-4933 6325 S RAINBOW BLVD STE 300 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here. LAS VEGAS, NV 89118 G Check all that apply: Initial return Initial return of a former public charity 1 Foreign organizations, check here . Amended return Final return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation H Check type of organization X Section 501(c)(3) exempt private foundation If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust

Other taxable private foundation under section 507(b)(1)(A), check here . J Accounting method: X Cash Fair market value of all assets at If the foundation is in a 60-month termination end of year (from Part II, col (c), line Other (specify) under section 507(b)(1)(8), check here . > 729,460 (Part I, column (d), must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and for charitable (b) Net investment (c) Adjusted net total of amounts in columns (b), (c), and (d) expenses per purposes may not necessarily equal the amounts in income income books (cash basis only) column (a) (see instructions)) Contributions, gifts, grants, etc , received (attach schedule) . Check X if the foundation is not required to attach Sch B. 3 Interest on savings and temporary cash investments-15,991 15,991 STMT Dividends and interest from securities Net rental income or (loss) 54,940 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 106,160 RECEIVED 54,940 Capital gain net income (from Part IV, line 2) . Net short-term capital gain. Income modifications . 10a Gross sales less returns and allowances . . . **b** Less Cost of goods sold . c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 70,931 70,931 12 Total Add lines 1 through 11 3,203 9,609 13 12,813 Compensation of officers, directors, trustees, etc . . . NONE NONE 14 Other employee salaries and wages NONE NONE 15 Pension plans, employee benefits , , Legal fees (attach schedule) . . . 16a 934 NONE NONE 934 Accounting fees (attach schedule) STMT 2. Administrative E Other professional fees (attach schedule) . . . c 1,020 273 Taxes (attach schedule) (see instructions). 3. Depreciation (attach schedule) and depletion. NONE NONE 21 22 Travel, conferences, and meetings NONE NONE Printing and publications Operating 22 Other expenses (attach schedule) Total operating and administrative expenses. 14,767 9,882 NONE Add lines 13 through 23. 35,000 35.000 Contributions, gifts, grants paid 49,767 9,882 NONE 39 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 and the second 21,164 3 Excess of revenue over expenses and disbursoments

61,049

JSA For Paperwork Reduction Act Notice, see instructions.

b Net investment income (if negative, enter;-0-)

c Adjusted net income (if negative, enter -01-)1-4.

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Forr	n 990-	PF (2019)		<u> </u>	-0302309	rage Z
Pa	rt II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
			amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ng		1,096	1,096
	2	Savings and temporary	cash investments	47,319.	39,074	. 39,074
			btful accounts >			
			· · · · · · · · · · · · · · · · · · ·			
			officers, directors, trustees, and other		_	
			ach schedule) (see instructions)			
	7	Other notes and loans re	eceivable (attach schedule)		***************************************	
ı		Less allowance for doub	btful accounts ► NONE			
S	8	Inventories for sale or us	se		<u> </u>	
Assets			eferred charges		,	
As			government obligations (attach schedule).			
			stock (attach schedule)	•		
		•	bonds (attach schedule)			
	11	Investments - land, building	10			
		and equipment basis Less accumulated deprecia				
ı		(attach schedule)	leane			
	12 13	Investments - mortgage	loans	581.598.	614.824	. 689,290
	14	Land, buildings, and	•			
-		equipment basis Less accumulated deprecia	ation			المستدر المالية الله الله المستولفية المانية البيداء المانية ا
1)			· · · · · · · · · · · · · · · · · · ·
- 1			completed by all filers - see the	-		
			age 1, item i)	628,917.	654,994	. 729,460
十			accrued expenses			1
- 1						
		• •				
:=	20		ors, trustees, and other disqualified persons.			i
逼	21		otes payable (attach schedule)	-		1
<u>E</u> .			e ►)			
		Other machines (accorde	· · · · · · · · · · · · · · · · · · ·			
	23	Total liabilities (add line	es 17 through 22)		NON	·B
7			v FASB ASC 958, check here			
nces		and complete lines 24,				
a	24	Not assets without done	or restrictions			
− CG I	25		estrictions · · · · · · · · · · · · · · · · · · ·			
힏			ollow FASB ASC 958, check here			
녆.		and complete lines 26 thr	I			
딝	26	Canital stock trust princ	cipal, or current funds	628,917.	654,994	.]
S	27		r land, bldg , and equipment fund		·	!
ğ	28		lated income, endowment, or other funds		"-	
Ass	29	•	d balances (see instructions)	628,917.	654,994	
ᇂ	30	Total liabilities and				
Ž				628,917.	654,994	
p.	rt III		nges in Net Assets or Fund Balar			
			balances at beginning of year - Part I		nust agree with	
•			d on prior year's return)			628,917.
2		_ · _ ·	line 27a		_	21,164.
			ded in line 2 (itemize) ► RECOVERY OF G		3	5,000.
					4	655,081.
			n line 2 (itemize) ► SEE STAT		5	87.

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 6

654,994. Form **990-PF** (2019)

Form 990-PF (2019)					Page 3
Part IV Capital Gains	and Losses for Tax on Inve	estment Income		,	
	scribe the kind(s) of property sold (for ex		(b) How acquired	(c) Date acquired	
2-story br	rick warehouse, or common stock, 200	shs MLC Co)	P - Purchase D - Donation		(mo , day, yr)
1 a PUBLICLY TRADED	SECURITIES				
b					
		· · · · · · · · · · · · · · · · · · ·			
		-			
					
e		(-) Cook or other hour			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) mini	
a 406,460.		351,520.			54,940.
b					
C					
d					
		-			
Complete only for assets sh	lowing gain in column (h) and owned b	v the foundation on 12/31/69		0 (0 (1)	
Complete only for assets sit				Gains (Col (h) ga (k), but not less t	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	"	Losses (from co	
	43 01 12/3 1/03	over eer (ji, ii arry		·	F4 040
_a					<u>54,940.</u>
b					
C					
d					
е	-				
	(If ga	ain, also enter in Part I, line 7			
2 Capital gain net income	or (not capital loss)	oss), enter -0- in Part I, line 7	2		54,940.
3 Net short-term capital qu	ain or (loss) as defined in sections				•
	Part I, line 8, column (c) See ins				
•			2		
		uced Tax on Net Investment I	20000		
		section 4940(a) tax on net investing			
If section 4940(d)(2) applies,		outable amount of any year in the b	ase perio	d?	ີYes ່ X No
	't qualify under section 4940(e) De		uoo pu.,.		٠٠٠ وفي ١٠٠٠ ر
		r; see the instructions before makir	ng any er		
(a)			Ig any ci	(d)	
Base period years	(b) Adjusted gualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra	
Calendar year (or tax year beginning in)				(col (b) divided by	
2018	36,794.	716,748.			0.051335
2017	35,873.	718,834.			0.049904
2016	37,841.	680,963.			0.055570
2015	41,337.	742,048.			0.055707
2014	39,374.	785,554.			0.050123
		·			
2 Total of line 1, column (d)		2		0.262639
3 Average distribution rat	o for the 5-year base period - divid	le the total on line 2 by 5.0, or by			
			3		0.052528
the number of years the	foundation has been in existence	ir less than 5 years	<u> </u>		0.032320
			.		(02 (00
4 Enter the net value of no	oncharitable-use assets for 2019 fr	om Part X, line 5	4	<u> </u>	693,608.
5 Multiply line 4 by line 3			5		36 <u>,434</u> .
, , ,					
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		610.
C Litter 1/0 Of flet IIIvestill	one mooning (170 of 1 are), fine 270)				
a Add			7		37,044.
7 Add lines 5 and 6			 -		3,,011.
					20 127
If line 8 is equal to or g	tions from Part XII, line 4 greater than line 7, check the box	ın Part VI, line 1b, and complete	8 that part	using a 1% ta	39,137. x rate See the
Part VI instructions.					

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru		s)				
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			1				
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)							
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check							
	here X and enter 1% of Part I, line 27b							
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-)		l	<u>IONE</u>				
3	Add lines 1 and 2			<u>510.</u>				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		1	<u>IONE</u>				
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0		(<u>510.</u>				
6	Credits/Payments			- 1				
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 712.							
b	Exempt foreign organizations - tax withheld at source			ţ				
C	Tax paid with application for extension of time to file (Form 8868)6c NONE							
d	• • •							
7	Total credits and payments Add lines 6a through 6d			<u>712.</u>				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	-		100				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<u>102.</u>				
11 Doz	Enter the amount of line 10 to be Credited to 2020 estimated tax ► 102. Refunded ► 11 VII-A Statements Regarding Activities							
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1	Yes	No				
ıa	participate or intervene in any political campaign?	1a	162	X				
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	···						
b	Instructions for the definition	1 _b	1	X				
	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							
С	Did the foundation file Form 1120-POL for this year?	1c	-	X				
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			,				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$							
е	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?	2		X				
	If "Yes," attach a detailed description of the activities			,				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	- <u>-</u>	-	:				
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u> </u>				
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?	5		<u> </u>				
	If "Yes," attach the statement required by General Instruction T			. .				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			1				
	By language in the governing instrument, or			,				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		V					
	conflict with the state law remain in the governing instrument?	6	X					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	^					
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			1 .				
	SC			·				
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	- 8b	·X	- 1				
_	(or designate) of each state as required by General Instruction G^2 If "No," attach explanation	- 00	^	 				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	-	-	3				
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes,"	9		\ x \?				
	complete Part XIV	1						
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10		X				
	names and addresses		A DE					

Part	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		Х
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address N/A			
14	The books are in care of ▶ SEE STATEMENT 7 Telephone no ▶			
	Located at ▶ ZIP+4 ▶			,
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		>	ـــا
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	└
	over a bank, securities, or other financial account in a foreign country?	16		Σ
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country >	<u>l</u>		
Par	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? Yes X 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 X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(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)			
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	<u> </u>	X
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	-		l
	were not corrected before the first day of the tax year beginning in 2019?	1c	ļ <u>.</u>	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
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 ,,,,,,			
Ь	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	١.,		-
	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			
	<u> </u>			
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			
	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	-	
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			.,,
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	L	X

u cu	t VII-B Statements Regarding Activities	s for which form	4/20 May Be Rec	uirea (cont	inuea)				
5a	During the year, did the foundation pay or incur any a	mount to					Yes	No	
	(1) Carry on propaganda, or otherwise attempt to inf	uence legislation (section	on 4945(e))?	. Yes	X No			,	
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,								
	directly or indirectly, any voter registration drive? Yes X N								
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X								
	(4) Provide a grant to an organization other than	a charitable, etc., or	ganization described	IN					
	section 4945(d)(4)(A)? See instructions		<i></i>	Yes	X No			t	
	(5) Provide for any purpose other than religious,								
	purposes, or for the prevention of cruelty to child				X No			,	
þ	If any answer is "Yes" to 5a(1)-(5), did any of	he transactions fail to	qualify under the e	exceptions des	scribed in				
	Regulations section 53 4945 or in a current notice re	garding disaster assistar	nce? See instructions .			5b			
	Organizations relying on a current notice regarding di	saster assistance, check	here		▶[
С	If the answer is "Yes" to question 5a(4), does to	he foundation claim e	exemption from the	tax		İ			
	because it maintained expenditure responsibility for t	ne grant?		. Yes	No				
	If "Yes," attach the statement required by Regulations	section 53.4945-5(d)				l			
6a	Did the foundation, during the year, receive any	funds, directly or indi	rectly, to pay premiu	ms				'	
	on a personal benefit contract?			. Yes	X No				
b	Did the foundation, during the year, pay premiums, di	rectly or indirectly, on a	personal benefit contr	act ⁷		6b		X	
	If "Yes" to 6b, file Form 8870								
7a	At any time during the tax year, was the foundation a	party to a prohibited tax	k shelter transaction?.	. Yes	X No		_		
b	If "Yes," did the foundation receive any proceeds or h	ave any net income attri	butable to the transact	ion?		7b			
8	Is the foundation subject to the section 4960 tax on p	•							
	remuneration or excess parachute payment(s) during				X No				
Par	t VIII Information About Officers, Direct and Contractors	tors, Trustees, Foi	undation Manage	rs, Highly P	aid Empl	oyees,			
1	List all officers, directors, trustees, and founda	tion managers and t	heir compensation.	See instruct	ions.				
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributi employee bene	fit plans	(e) Expens	e accou	ınt,	
MELLO	P. EADOO DANK N. A	devoted to position TRUSTEE	enter -0-)	and deferred con	npensation				
	S FARGO BANK N.A.	— I	12,813.		-0-			-0-	
100 N		11 1 1			- v - I			-0-	
	MAIN ST MAC D4001-117, WINSTON SALEM, NC 2710	1	12,013.						
	WIMAIN SI MAC DAVOI-III, WINSION SALEM, NC 2710		12,013.						
	WHAIN SI MAC DAUDI-III, WINSION SALEM, NC 2710		12,013,_						
	WHAIN SI MAC DAUDI-III, WINSION SALEM, NC 2710		12,013.						
	WHAIN SI MAC DAUDI-III, WINSION SALEM, NC 2710		12,013.						
	WHAIN SI MAC DAUDI-III, WINSION SALEM, NC 2710		12,013.			-			
2	Compensation of five highest-paid employed			e 1 - see i	nstruction	s). If no	one,	enter	
2	Compensation of five highest-paid employee	es (other than those (b) Title, and average	se included on lin	(d) Contribut	tionsto				
	Compensation of five highest-paid employee	es (other than those (b) Title, and average hours per week		(d) Contribut employee b plans and de	tionsto enefit eferred	s). If no (e) Expens other all	e accou	ınt,	
	Compensation of five highest-paid employed	es (other than those (b) Title, and average	se included on lin	(d) Contribut	tionsto enefit eferred	(e) Expens	e accou	ınt,	
(a)	Compensation of five highest-paid employed "NONE." Name and address of each employee paid more than \$50,000	es (other than those (b) Title, and average hours per week	se included on lin	(d) Contribut employee b plans and de compense	tions to enefit eferred ation	(e) Expens other all	se accou owance	ınt,	
(a)	Compensation of five highest-paid employed "NONE." Name and address of each employee paid more than \$50,000	es (other than those (b) Title, and average hours per week	se included on lin	(d) Contribut employee b plans and de	tions to enefit eferred ation	(e) Expens other all	e accou	ınt,	
(a)	Compensation of five highest-paid employed "NONE." Name and address of each employee paid more than \$50,000	es (other than those (b) Title, and average hours per week	se included on lin	(d) Contribut employee b plans and de compense	tions to enefit eferred ation	(e) Expens other all	se accou owance	ınt,	
(a)	Compensation of five highest-paid employed "NONE." Name and address of each employee paid more than \$50,000	es (other than those (b) Title, and average hours per week	se included on lin	(d) Contribut employee b plans and de compense	tions to enefit eferred ation	(e) Expens other all	se accou owance	ınt,	
(a)	Compensation of five highest-paid employed "NONE." Name and address of each employee paid more than \$50,000	es (other than those (b) Title, and average hours per week	se included on lin	(d) Contribut employee b plans and de compense	tions to enefit eferred ation	(e) Expens other all	se accou owance	ınt,	
(a)	Compensation of five highest-paid employed "NONE." Name and address of each employee paid more than \$50,000	es (other than those (b) Title, and average hours per week	se included on lin	(d) Contribut employee b plans and de compense	tions to enefit eferred ation	(e) Expens other all	se accou owance	ınt,	
	Compensation of five highest-paid employed "NONE." Name and address of each employee paid more than \$50,000	es (other than those (b) Title, and average hours per week	se included on lin	(d) Contribut employee b plans and de compense	tions to enefit eferred ation	(e) Expens other all	se accou owance	ınt,	
(a)	Compensation of five highest-paid employed "NONE." Name and address of each employee paid more than \$50,000	es (other than those (b) Title, and average hours per week	se included on lin	(d) Contribut employee b plans and de compense	tions to enefit eferred ation	(e) Expens other all	se accou owance	ınt,	
(a)	Compensation of five highest-paid employed "NONE." Name and address of each employee paid more than \$50,000	es (other than those (b) Title, and average hours per week	se included on lin	(d) Contribut employee b plans and de compense	tions to enefit eferred ation	(e) Expens other all	se accou owance	ınt,	
(a)	Compensation of five highest-paid employed "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	se included on lin (c) Compensation NONE	(d) Contribut employee b plans and de compense	tions to enefit eferred ation	(e) Expens other all	se accou owance	ınt,	

Page 7

3 Five highest-paid independent contractors for professional services. See instructions. If no	ne, enter "NONE."	
	T	(c) Compensation
OVE		NI/AII
ONE		NON!
		·
	-	
otal number of others receiving over \$50,000 for professional services		NONI
art 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 organizations and other beneficiaries served, conferences convened, research papers produced, etc.	as the number of	Expenses
1NONE		
	-	
2		
3		
4		
art 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 NONE		
2		
All other program-related investments See instructions		
3 NONE		
otal. Add lines 1 through 3		

56-6562309 Page **8**

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 662,892. 1a 1b 41,279. 1c NONE 1d 704,171. Reduction claimed for blockage or other factors reported on lines 1a and NONE 704,171. 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see 10,563. 693,608. Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 34,680. 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) 34,680. 2a Tax on investment income for 2019 from Part VI, line 5 2a Income tax for 2019. (This does not include the tax from Part VI.). . | 2b | 610. 34,070. Distributable amount before adjustments Subtract line 2c from line 1....... 3 5,000. Recoveries of amounts treated as qualifying distributions................. 4 39,070. 5 NONE Deduction from distributable amount (see instructions).......... Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 39,070. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26...... 39,137. 1a 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., NONE 2 3 Amounts set aside for specific charitable projects that satisfy the NONE 3a NONE Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 39,137. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 610. 38,527. 6

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Form **990-PF** (2019)

qualifies for the section 4940(e) reduction of tax in those years

Page 9 Form 990-PF (2019)

Pai	t XIII Undistributed Income (see instr	uctions)	-		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2019 from Part XI,	Corpus	Years prior to 2018	2018	2019
	line 7				39,070.
2	Undistributed income, if any, as of the end of 2019				1
а	Enter amount for 2018 only			19,597.	
b	Total for prior years 20,20,20		NONE		'
3	Excess distributions carryover, if any, to 2019		,		
а	From 2014 NONE		п		
b	From 2015 NONE		1		ıı ,
C	From 2016 NONE				
d	From 2017 NONE				,
	From 2018 NONE	NONE			<u> </u>
	Total of lines 3a through e	NONB			}
4	Qualifying distributions for 2019 from Part XII,				ļ
	line 4 ▶ \$39,137.			10 507	1
а	Applied to 2018, but not more than line 2a			19,597.	<u> </u>
b	Applied to undistributed income of prior years		NONE		``
	(Election required - see instructions)		NONE		
C	Treated as distributions out of corpus (Election	NONE	ı		
	required - see instructions)	147) (41)	·		19,540.
	Applied to 2019 distributable amount Remaining amount distributed out of corpus	NONE	1	ı	15,510.
	Excess distributions carryover applied to 2019	1,01,7			
	(If an amount appears in column (d), the same amount must be shown in column (a))	NONE			NONE
_					1
ь	Enter the net total of each column as indicated below:				
ú	Corpus Add lines 31, 4c, and 4e Subtract line 5	NONE			- 1
	Prior years' undistributed income Subtract				I
_	line 4b from line 2b		NONE		•
С	Enter the amount of prior years' undistributed				į
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				<u>'</u> ,
	tax has been previously assessed		NONE		;
d	Subtract line 6c from line 6b Taxable				ĺ
	amount - see instructions		NONE		j
е	Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount - see				ļ
	instructions		-		
f	Undistributed income for 2019 Subtract lines				•
	4d and 5 from line 1 This amount must be				19,530.
	distributed in 2020				19,550.
7	Amounts treated as distributions out of corpus				1
	to satisfy requirements imposed by section				<u>'</u>
	170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	NONE			'
_	·			<u></u>	
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)	NONE			'
۵	Excess distributions carryover to 2020.				ı
J	Subtract lines 7 and 8 from line 6a	NONE		100	1
10	Analysis of line 9	<u> </u>		11 11 11	
	Excess from 2015 NONE	" n n n n q		appenta o date	ing (ω"
	Excess from 2016 NONE	101 101 101		Company of the Compan	a militar glama en
	Excess from 2017 NONE	1 41 11	a compared a compared to the		
	Excess from 2018 NONE				
	Excess from 2019 NONE				Ì

Pa	rt XIV Private Op	erating Foundations	s (see instructions a	nd Part VII-A, questi	on 9)	=	NOT APPLICA	3I	
1 a	If the Youndation has	received a ruling or d	etermination letter tha	t it is a private opera	ating		-		
	foundation, and the ruling is effective for 2019, enter the date of the ruling								
ь	Check box to indicate	-	_			4942(j)(3	3) or 4942(j)(5	<u>-</u>	
	Enter the lesser of the ad	Тах уеаг	is a pintate aparating	Prior 3 years		1 13 1 3/13	10.120/10	<u> </u>	
2 0	justed net income from Part		(6) 2010	T	(d) 20	16	(e) Total		
	I or the minimum investment	(a) 2019	(b) 2018	(c) 2017	(a) 20	16	 -	_	
	return from Part X for each								
	year listed							_	
b	85% of line 2a								
	Qualifying distributions from Part								
٠	XII, line 4, for each year listed .	`							
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					1			
a	"Assets" alternative test - enter					1			
	(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 invest-								
	ment return shown in Part X,								
	line 6 for each year listed "Support" alternative test - enter							_	
·	(1) Total support other than					\			
	gross investment income								
	(interest, dividends, rents,								
	payments on securities					1			
	loans (section 512(a)(5)), or royalties)			•		1			
	(2) Support from general								
	public and 5 or more								
	exempt organizations as provided in section 4942								
	(j)(3)(B)(m)								
	(3) Largest amount of sup- port from an exempt								
	organization							_	
	(4) Gross investment income .							_	
Pa	rt XV Supplemei	ntary Information (Complete this part	only if the founda	tion had \$!	5,000 or	more in assets	a	
	any time d	uring the year - see	instructions.)	•					
1	Information Regarding	Foundation Manager	'S:				•	_	
а	List any managers of			e than 2% of the total	al contributio	ns receive	d by the foundation	or	
_		y tax year (but only if th							
		, , (,	,						
	NONE							_	
b	List any managers of					n equally	large portion of t	ne	
	ownership of a partner	rship or other entity) of	which the foundation	n has a 10% or greater	interest				
	NONE								
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsh	ip, etc , Programs:					
	Check here ▶ ☐ If t	the foundation only	makee contributions	to preselected char	table organi	zatione ar	nd does not acce	ni	
	unsolicited requests f								
	complete items 2a, b,			inta, etc., to marvidue	ns or organiz	utions und	ici otilci conditioi		
								_	
а	The name, address, an	id telephone number o	r email address of the	person to whom appl	ications shou	ld be addre	essed:		
	SEE STATEMENT	8			_				
b	The form in which app	lications should be sub	omitted and information	on and materials they	should include	e:			
	* *	TATEMENT FOR LI		·					
	OND WITWCHED D	TITTOPIDITE FOR DI	.111 2						
	Any submission deadli	nec		_				_	
C	•								
	SEE ATTACHED S'	TATEMENT FOR LI	.NE 2						
d	Any restrictions or I	imitations on awards,	, such as by geogra	aphical areas, charita	ible fields, k	inds of in	nstitutions, or oth	er	
	factors:								
	SEE ATTACHED S	TATEMENT FOR LI	NE 2						
_								_	

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Amount status of recipient Name and address (home or business) a Paid during the year HEALING SPECIES, INC. P.O. BOX 1202 ORANGEBURG SC 29116 NONE PC GENERAL OPERATNG 5,000. UPSTATE WARRIOR SOLUTION, INC. NONE PC GENERAL OPERATNG 5,000. 3 CALEDON CT A-2 GREENVILLE SC 29615 EMPOWERING FAMILIES SUPPORT PROGRAM 5,000. PC GENERAL OPERATNG P.O. BOX 1731 SPARTANBURG SC 29304 NONE LEGACY EARLY COLLEGE NONE PC GENERAL OPERATNG 3,000. 900 WOODSIDE AVE GREENVILLE SC 29611 FRIENDS OF THE LITTLE WHITE HOUSE PC GENERAL OPERATNG 4,000. 235 APPLE BLOSSOM LN SIMPSONVILLE SC 29681-5 NONE BOB JONES UNIVERSITY MUSEUM AND GALLERY GENERAL OPERATNG 5,000. 1700 WADE HAMPTON BLVD GREEMNVILLE SC 29614 PC YMCA OF GREENVILLE 3,000. 721 CLEVELAND ST GREENVILLE SC 29601 NONE PC GENERAL OPERATNG REBUILD UPSTATE 601 GREEN AVE GREENVILLE SC 29601 NONE PC GENERAL OPERATNG 5,000. 35,000. **b** Approved for future payment Total

Part XVI-A	Analysis of Income-Produ	ucing Acti	vities			
Enter gross amounts unless otherwise indicated Unrelated business income Excluded by section 512, 513, or 514 (e)						(e)
-	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
-						(occ matrodions)
_					_	
f						
g Fees a	and contracts from government agencies					
2 Members	thip dues and assessments					<u>.</u>
	savings and temporary cash investments •					
	s and interest from securities			14	15,991.	
5 Net renta	I income or (loss) from real estate	_				
a Debt-f	financed property	,				
b Not d	ebt-financed property					
6 Net rental	income or (loss) from personal property					
7 Other inv	restment income		· · · · · · ·			
8 Gain or (lo	ss) from sales of assets other than inventory			18	54,940.	
9 Net incor	ne or (loss) from special events · · ·			· · · · · ·	- **-	
	ofit or (loss) from sales of inventory					
	venue a					
ь			<u></u>			
			<u> </u>			<u> </u>
e					70,931.	
	Add columns (b), (d), and (e) Id line 12, columns (b), (d), and (e)		<u> </u>		·	
	eet in line 13 instructions to verify calci				13	70,931.
Part XVI-			ccomplishment of Fx	cemnt Pur	noses	
			-			
Line No	Explain below how each activit					
▼	accomplishment of the foundation	on s exemp	t purposes (other than t	oy providing	j tunas for such purpose	s) (See instructions)
			-			
			-			
	·		NOT APPLICABLE	<u>E</u>		
			· · · · · · ·			
			· · · · · · · · · · · · · · · · · · ·			
						
	<u>-</u>					····
			<u> </u>			
						
						···

Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt

Part XVII

		Organizations									
1	Did the	e organization direct	ly or indirectly e	ngage in any of the fo	llowing	with any ot	her organizatı	on described		Yes	No
	ın sec	tion 501(c) (other	than section	501(c)(3) organizatıor	ns) or	ın section	527, relating	to political	,		
	organi	zations?									
а	Transf	ers from the reporting	g foundation to a	noncharitable exempt	organiz	zation of:					
	(1) Cas	sh				. .			1a(1)		X
	(2) Oth	her assets							1a(2)		X
		transactions									
	(1) Sal	les of assets to a non	charitable exemi	ot organization		. .			1b(1)		X
				e exempt organization							X
				assets							Х
			•						$\overline{}$		Х
		_									X
		_		or fundraising solicitat							X
				, other assets, or paid e							X
				," complete the follow						fair m	
		-		es given by the report	-			•			
		_		ement, show in colum	-						
(a) Lı		(b) Amount involved		ncharitable exempt organizat				nsactions, and shar			
							<u> </u>	<u> </u>			
											
			· · · · · · · · · · · · · · · · · · ·								
				•		-					
		<u> </u>		•							
											
			1								
							-				
						•					
	ls the	foundation directly	or indirectly affi	liated with, or related	to. one	or more tax	x-exempt orga	inizations			
		·	•	ion 501(c)(3)) or in sec					TY	es 🗆	No
		," complete the follow									3
		(a) Name of organizatio	1	(b) Type of organiz	zation		(c) Desc	cription of relations	hip		
	Under	r penalties of perjury, decla	ire that I have examine	ed this return, including accomp	anying sch	redules and statem	nents, and to the b	est of my knowledg	e and b	elief, it	is true,
Cian			Cepas V.P. than tax	ed this return, including accomp payer) is based on all information	of which pi	reparer has any kno	owieage				_
Sign	- I 1	Wells Fargo Ban	kNΔ	04/06/2020		TRUSTEE			discus:		return below?
Here		nature of officer or trustee	A, Di-Ci	Date		Title		See instruction		Yes	No
	-										
		Print/Type preparer's na	me	Preparer's signature		Da	ete	Check X if P	TIN		
Paid		JOSEPH J. CA	STRIANO	1 11/1	Qc.	<u> </u>	4/06/2020		P012	5160)3
Prep	arer		ICEWATERHOU				Firm's		1008		
-	Only		0 GRANT ST							<u> </u>	
		1	TTSBURGH,	PA	152	19	Phone	no 412-35	55-6	000	
			1 1 D D OROIT		102		T i none	<u></u> .		D-DE	(2010)

STATEMENT

SECURITIES	
INTEREST FROM S	
- DIVIDENDS AND	=============
PART I	
FORM 990PF,	

REVENUE AND EXPENSES INVESTMENT PER BOOKS INCOME	877. 1,671. 3,735. 10. 3,218. 6,251. 6,251. 6,251. 6,251.	15,991. 15,991. ===================================
DESCRIPTION	USGI REPORTED AS NONQUALIFIED DIVIDENDS FOREIGN DIVIDENDS DOMESTIC DIVIDENDS US GOVERNMENT INTEREST REPORTED AS QUALI NONQUALIFIED FOREIGN DIVIDENDS NONQUALIFIED DOMESTIC DIVIDENDS SECTION 199A DIVIDENDS	TOTAL

CHARITABLE PURPOSES	934.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	934.
DESCRIPTION	TAX PREPARATION FEE (NON-ALLOC

(1

STATEMENT

FORM 990PF, PART I - TAXES

NET INVESTMENT INCOME	1 1 1 1 1	169.	•	T04.	273.
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1 1	169. 35.	712.	104.	1,020.
DESCRIPTION		FOREIGN TAXES FEDERAL TAX PAYMENT - PRIOR YE	FEDERAL ESTIMATES - PRINCIPAL	FOREIGN TAXES ON NONQUALIFIED	TOTALS

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STATEMENT

ENDING FMV		24,415. 5,933. 36,360.	, 55	118,262.	43,339.	14,838. 22,028.	3,25	0,94	20,521. 103,729. 13,923.
ENDING BOOK VALUE		13,961. 6,325. 20,665.	, 13	116,486.	38,070.	17.0	3,26 6,80	1,93	20,584. 91,278. 6,317.
COST/ FMV C OR F	טטטט	. U U U	ບ ບ ບ	0 U U C	0 U U U	0 U U C	ນ ບ ບ	0000C) U U U
DESCRIPTION	312C080 5428720 1641Q76	39128100 JP MORGAN MID CAP 79919307 T ROWE PR REAL EST 5273H353 MFS VALUE FUND-R5	8463X863 4128R608 7958B402	92905764 92905764 0888Y508	7956H43 5621010 5620610	5434G103 2508332C	4314H600 ARTISAN MID C 7234N765 TCW EMRG MKTS	46 STE 04 OPP 68 JOH 03 BLA	76313309 THE JENSEN PORTFOL 64287150 ISHARES TRS & P 15 11512528 HARBOR CAPITAL APP

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HLX374 V17U 04/06/2020 13:28:14

	ENDING BOOK VALUE		13,760.	13,951.	20,403.	26,173.	39,456.	55,134.	614,824.
NTS ===	COST/ FMV C OR F	1 1 1 1 1	ບ	บ	ט	υ	ບ	U	TOTALS
FORM 990PF, PART II - OTHER INVESTMENTS	DESCRIPTION		922908629 VANGUARD MIDCAP VIPE	31641Q755 FIDELITY NEW MRKTS I	693390841 PIMCO HIGH YIELD FD-	00143W859 INV OPP DEVELOP MRKT	381430503 GOLDMAN ACTIVEBETA U	693390700 PIMCO TOTAL RET FD-I	

14,611. 14,187. 20,770. 36,517. 44,234. 55,634.

ENDING FMV

56-6562309

ROBERT AND RUTH K LEE FOUNDATION

689,290.

FORM 990PF,	PART	III -	- OTHER	DECREASES	IN	NET	WORTH	OR	FUND	BALANCES	
=========	=====	=====		:======:	===:	====	=====	===:	=====	======	
DESCRIPTION										TNUOMA	
MUTUAL FUND ROUNDING	TIMI	NG ADJ	J								86. 1
ROUNDING											
				TOT	AL						87.
										========	====

FORM 990PF, PART VII-A, LINE 14 - BOOKS ARE IN THE CARE OF

NAME: WELLS FARGO BANK N.A

ADDRESS: 100 N MAIN ST MAC D4001-117

WINSTON SALEM, NC 27101

TELEPHONE NUMBER: (888)730-4933

ROBERT AND RUTH K LEE FOUNDATION FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME:

GRANTADMINSTRATION@WELLSFARGO.COM

ADDRESS:

100 N Main ST MAC D4001-117

WINSTON SALEM, NC 27101

RECIPIENT'S PHONE NUMBER: (888) 234-19

FORM, INFORMATION AND MATERIALS:

APPLICATION FORM FOUND ONLINE AT WWW.WELLSFARGO.COM/PRIVATEFOUNDATIONS SUBMISSION DEADLINES:

SEPTEMBER 1ST

RESTRICTIONS OR LIMITATIONS ON AWARDS:

501(C)(3) ORGANIZATION WITH INTERESTS IN HIGHER EDUCATION, ARTS, LITER

FEDERAL FOOTNOTES

PART VIII: INFORMATION ABOUT OFFICERS, DIRECTORS, TRUSTEES, FOUNDATION MANAGERS, HIGHLY PAID EMPLOYEES, AND CONTRACTORS. THE CORPORATE TRUSTEE'S COMPENSATION REPORTED IN COLUMN (C) IS CALCULATED BASED ON PERIODIC MARKET VALUES AND/OR THE APPLICABLE FEE AGREEMENT. IT IS NOT DETERMINED ON AN HOURLY BASIS AND THE REFERENCE TO ONE HOUR PER WEEK IS AN ESTIMATE ONLY. CORPORATE TRUSTEE SERVICES INCLUDE, BUT ARE NOT LIMITED TO, ADMINISTRATIVE SERVICES SUCH AS FIDUCIARY ACCOUNTING, CUSTODY OF ASSETS, COMPLYING WITH TAX FILING REQUIREMENTS, COMPLYING WITH DISTRIBUTION PROVISIONS, AND COMPLYING WITH FEDERAL AND STATE LAWS APPLICABLE TO PRIVATE FOUNDATIONS, PLUS ASSET MANAGEMENT SERVICES SUCH AS CREATING ASSET ALLOCATION STRATEGIES, INVESTMENTS REPORTING AND REALLOCATING AND REBALANCING OF PORTFOLIOS AS NECESSARY.

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