Department of the Treasury Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990PF for instructions and the latest information.

For galendar year 2019 or tax year beginning		. , and ending		1
Name of foundation	•		A Employer identification	number '
			1	
WILSON - WOOD FOUNDATION,	INC.	-	59-2243926	1
Number and street (or P O box number if mail is not delivered to street	address) .	Room/suite	B Telephone number	
2283 HARRIER WAY		` · · · · ·	(941) 484-	6549 * 1
City or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	
. NOKOMIS, FL 34275		* *	,	,
G Check all that apply:	Initial return of a fo	rmer public charity	D 1 Foreign organizations	check here
Final return	Amended return	, and poone on any	,	,, 0.1001.1.010
Address change	Name change	* , * * * * * ,	Foreign organizations me check here and attach co	eting the 85% test,
H Check type of organization: X Section 501(c)(3) ex		~1)*	
	Other taxable private founda	" () H · · ·	E If private foundation sta	
			under section 507(b)(1)	
I Fair market value of all assets at end of year J Accounts		LX Accrual	F If the foundation is in a	
	her (specify)	· · · · · · · · · · · · · · · · · · ·	under section 507(b)(1)	(B), cneck nere
	, ,	# 17		(d) p. 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))	(a) Revenue and feature and fe	(b) Net investment income	(c) Adjusted net	(d) Disbursements , for charitable purposes
	2	* 1 * 111001116 **	CERRENALAGARET ALAGERTAGE TO THE	(cash basis only)
1 Contributions, gifts, grants, etc., received	dussue various sessa un income de la company		NUMBER N/A COMMUNICATION OF THE PARTY OF THE	
2 Check X if the foundation is not required to attach Sch B			241212121212121212121212121212121212121	Total and the second se
Interest on savings and temporary cash investments		<u>'</u> ,		
4 Dividends and interest from securities	262,320.	262,320.		STATEMENT 1
5a Gross rents 4	,			
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	-45,368:	ESERNISTRAÇÕES STERRITARIS SE		
b Gross sales price for all 403, 809.	Patrio de la comparta del comparta del comparta de la comparta del comparta del comparta de la comparta del comparta del la comparta del comparta del la c		でアン海理の関係と	
7 Capital gain net income (from Part IV, line 2)		000		
8 Net short-term capital gain			187° /1	
7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications Gross sales less returns			MAN	
Gross sales less returns 10a and allowances				
b Less Cost of goods sold				
c Gross profit or (loss)			•	
11 Other income	-24.	-24.	7	STATEMENT 2
12 Total Add lines 1 through 11	216,928.	262,296.	•	COLUMN K-ANAKARIMENANAN NANAN NAN K NANANAN NAN K NANANAN NANANANAN NANANANAN NANANANAN NANANANAN NANANANANANAN NA
13 Compensation of officers, directors, trustees, etc	97,032.	19,406.	, ,	77,626.
14 Other employee salaries and wages	3770321	1	ı	7770200
15 Pension plans, employee benefits	17,126.	3,425.		13,701
15 relision plans, employee belients	17,120	3, 123.		15,701.
	13,250.	. 0.	, 1	13,250.
b Accounting fees STMT 3 c Other professional fees STMT 4	61,712.	61,712.	· · · · · · · · · · · · · · · · · · ·	13,230.
© Cottler professional tees SIMI 4	, 01,/12.	01,/12.		0.
17 Interest 18 Taxes STMT 5 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings	1,778.	.0.	-	0.
E 18 Taxes STMT 5			· · · · · ·	
19 Depreciation and depletion	305.	0.	<u> </u>	
हि 20 Occupancy	2,547.	0.	<u>F</u>	2,547.
21 Travel, conferences, and meetings	* ,	·	14	·
22 Printing and publications	* , .	<u> </u>		•
23 Other expenses STMT 6	4,123.	• 0.	· · · · · · · · · · · · · · · · · · ·	4,123.
23 Other expenses STMT 6 24 Total operating and administrative expenses. Add lines 13 through 23	• • • • • • • • • • • • • • • • • • •	•	, *	74
expenses. Add lines 13 through 23	197,873.	84,543.		. 111,247.
25 Contributions, gifts, grants paid	-388,000.			388,000.
26 , Total expenses and disbursements.	<i>•</i>			
Add lines 24 and 25	585,873.	84,543.	·	499,247.
27 Subtract line 26 from line 12:	-			
a Excess of revenue over expenses and disbursements	-368,945.			2-1-198-67-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-
b Net investment income (if negative, enter -0-)		177,753:		**************************************
c Adjusted net income (if negative, enter -0-)	THE THE PERSON OF THE PROPERTY OF THE PERSON		N/A `	
923501 12-17-19 LHA For Paperwork Reduction Act Notice	e, see instructions	• •	* *	Form 990-PF (2019)

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions

Г	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year		of year
; P	aπ	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	. 1	Cash - non-interest-bearing	25.	25.	25.
	2	Savings and temporary cash investments	185,835.	219,208.	219,208.
	3	Accounts receivable >	TOP CLASS PROBLEM STATE OF THE STREET		
	"	Less: allowance for doubtful accounts		*	
4	4	Pledges receivable			ATHER PARTIES OF THE TRANSPORT OF THE TR
	4	· · · · · · · · · · · · · · · · · · ·	Zarrasta en esta da particula de la primera particula de la pa	TAME AND SHARED AS AN AN ANALYSING STREET, START	ICHEKETATAM TERAMINANTAN TANAN
	_	Less: allowance for doubtful accounts Grants receivable			
	5	•			
	6	Receivables due from officers, directors, trustees, and other		•	
		disqualified persons	NAME OF TRANSPORTED STREET THE EAST OF STREET THE EAST OF STREET THE EAST OF STREET	NAJAH KONTOKSA KIASYANSANA 144, ANIVOKUSANNA LI	· · · · · · · · · · · · · · · · · · ·
	7.	Other notes and loans receivable	A STANTANES AND	AND THE RESIDENCE OF THE REPORT OF THE REPORT OF THE RESIDENCE OF THE RESI	Alter I. C. Soludal and e-ribling and activities and the series of the s
		Less: allowance for doubtful accounts			
ets	8	Inventories for sale or use	40.670	14 005	11 005
Assets	9	Prepaid expenses and deferred charges	13,673.	11,895.	11,895.
⋖	11	Investments - U.S. and state government obligations		*	
	b	Investments - corporate stock STMT 8	6,992,226.	8,137,951. 2,384,625.	8,137,951. 2,384,625.
	C	Investments - corporate bonds 'STMT 9	2,295,473.	2,384,625.	2,384,625.
	11	Investments - land, buildings, and equipment basis		Alexandra de la companya de la compa	SERVICE AND SERVIC
		Less accumulated depreciation	-		
	12	Investments - mortgage loans			
	13	Investments - other	• • •	1,	
. •	14	Land, buildings, and equipment: basis > 3,944.		THE RESERVE AND THE PROPERTY OF THE PROPERTY O	na kanadan kan
		Less accumulated depreciation STMT 10 ▶ 2,691.	47.	1,253.	1,253.
	15	Other assets (describe STATEMENT 11)	7,202.	6,664.	6,664.
	16	Total assets (to be completed by all filers - see the	,		-
		instructions. Also, see page 1, item I)	9,494,481.	10,761,621.	10,761,621.
_	17	Accounts payable and accrued expenses	2,442.	2,795.	AND MIN WAY, AND THE WAY IN THE PROPERTY OF THE PARTY OF
	18	Grants payable	2/1121	27.550	THE PRINTINGS INCOME OF THE RESERVE AND THE PRINTINGS OF
,	19	Deferred revenue		•	THE PROPERTY OF THE PROPERTY O
Ë	20	Loans from officers, directors, trustees, and other disqualified persons			ATTEMPT THE A ARE FOR MANY LESS HAVE A PARTY OF THE AREA OF THE AR
Liabilities	'	•	•	, ,	HN - MALINEN L. TAKON MÜNER RANDA KAN VA MELINA EN - MALINEN L. MARKAN MÜNER RANDA LA MARKAN L. MARKAN MAR
Lia	21	Mortgages and other notes payable	50,661.	57,946.	CALL THE CALL WANTED HAVE THE CONTRACTOR OF THE CALL O
	22	Other liabilities (describe ► <u>STATEMENT 12</u>)	50,001.	31,340.	HAFF LACKA TATANTRE ANEANTH - AREA - PRESENTATIONS
		7 () () () () () () () () () (53,103.	60,741.	THE WAR AND THE WA
_	23	Total liabilities (add lines 17 through 22)	53,103.	00,741.	CHARL TENENT THE THE RESERVE OF THE PROPERTY O
		Foundations that follow FASB ASC 958, check here	,		
Ses		and complete lines 24, 25, 29, and 30	· ·	•	
an	24	Net assets without donor restrictions		 	ARE SAN MARKAMETER MARKAMETER ARA
Net Assets or Fund Balan	25	Net assets with donor restrictions			
힏		Foundations that do not follow FASB ASC 958, check here			THE STATE OF THE S
Ψ		and complete lines 26 through 30		<u> </u>	THE STATE OF THE S
ō	26	Capital stock, trust principal, or current funds	. 0.	0.	SEASTER PRESENTE STATISTICS TO THE PRINT THE P
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	, 0.	0.	
Ass	28	Retained earnings, accumulated income, endowment, or other funds	9,441,378.	10,700,880.	IN SECTION AND AND ASSESSMENT AND ASSESSMENT AND ASSESSMENT A SACRAGE AND ASSESSMENT ASS
et	29	Total net assets or fund balances	9,441,378.	10,700,880.	ASSACHMENT AND AND THE TOTAL PROPERTY OF THE COMMENT OF THE COMMEN
Z١		_	, ,		IN THE SHARE INCOMES TO SHARE AND
	30	Total liabilities and net assets/fund balances	9,494,481.	10,761,621.	TAR IN LANGUAGE TO AND RECENTANCES AND
ìP.	ärt	Analysis of Changes in Net Assets or Fund E	Balances		
_	T-**	I not accord on fined halonoog at harmonia afficient. Deat H. salicas (4) (1)	. 20		Τ -
1.		I net assets or fund balances at beginning of year - Part II, column (a), line	: 29	1.	0 441 270
_		st agree with end-of-year figure reported on prior year's return)	•	1	9,441,378.
		r amount from Part I, line 27a	01 T11 011 0 = 0	2	-368,945.
		r increases not included in line 2 (itemize)	GAIN ON SECUR		1,635,732.
		lines 1, 2, and 3	_	4	10,708,165.
5	Decr	eases not included in line 2 (itemize)		ATEMENT 7 5	7,285.
c	Tota	I not accept or fund halances at and of year (line 4 minus line 5) - Part II is	olumn (h) lina 20	ء ا	10 700 880.

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See the Part VI instructions.

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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.

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499,247.

8 Enter qualifying distributions from Part XII, line 4

8

WILSON - WOOD FOUNDATION Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 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 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-) Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-Credits/Payments: 13,673 a 2019 estimated tax payments and 2018 overpayment credited to 2019 6b b Exempt foreign organizations - tax withheld at source 0. c Tax paid with application for extension of time to file (Form 8868) 6с 0 d Backup withholding erroneously withheld 13,673 7 Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 11,895 10 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11,895. Refunded 11 Enter the amount of line 10 to be: Credited to 2020 estimated tax Part VII-A Statements Regarding Activities 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 Yes any political campaign? 1a X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 1b 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. c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0 . (2) On foundation managers. ▶ \$ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0. 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. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? N/A 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? 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: · 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 X remain in the governing instrument? 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 8a Enter the states to which the foundation reports or with which it is registered. See instructions. FLb If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 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 tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses Form **990-PF** (2019)

09520226 759428 08568

Pa	art-VII-A: Statements Regarding Activities (continued)		•	
		¥	Yes	No
11.	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A	<u> </u>		·
14	The books are in care of ► SUSAN WOOD, EXECUTIVE DIRECTOR Telephone no. ► 941-4	84-6	549)
	Located at ► 2283 HARRIER WAY, NOKOMIS, FL ZIP+4 ►3			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		•	•
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		LÉCETY.	
	foreign country	1 - 4 - 4 - 4 - 5 - 5 - 5 - 5 - 5 - 5 - 5	PART NEET	3", 18 h ' 3
Pa	art 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.	englike gr	Yes	No
1a	During the year, did the foundation (either directly or indirectly):	มามรัก รัฐ เชื่อ - คือส์สิ่ง	a Spring	i sastare
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			- and Shipe of
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		128 1528 128 1528	Market 15
	a disqualified person? Yes X No	12 17 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		- F1 ⁵⁵	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Entras		
	(5) Transfer any income or assets to a disqualified person (or make any of either available	ERAEN A		
	for the benefit or use of a disqualified person)?	\$61 1 1 8.1 \$61 5ke 4		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	CANAL SENS		
	if the foundation agreed to make a grant to or to employ the official for a period after	12.02.00	a lighta, e	
	termination of government service, if terminating within 90 days.)			
b	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	**us, *;		Lattera.com
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
	Organizations relying on a current notice regarding disaster assistance, check here		5112 Hed	
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	1.41.44	1861 st.	
	before the first day of the tax year beginning in 2019?	1c	444 (*)	X Grandania
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	2 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	PT NEW TOTAL
	defined in section 4942(j)(3) or 4942(j)(5)):			ATTENDED
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	23672		ANALYSIS OF THE PROPERTY OF TH
	6d and 6e) for tax year(s) beginning before 2019?	1888 - 184		
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,	1936 3 Pr 1937 3 Pr 1937 3 Pr 1937 3 Pr 1937 3 Pr 1937 3 Pr		
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	12 12 13 15 1 12 12 13 15 1	En 127 12	X1 12 18
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	111111111111111111111111111111111111111	100 2.06.	Z BUSS TO BEEFE
	statement - see instructions.) N/A	2b	"XX IIXX	A DEELPERE
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	CHECKEN C	NAME OF THE PERSON OF THE PERS	TANEMERS AND THE PROPERTY OF T
•	Delth found to be below as the second section of the section of the second section of the section of the second section of the section of t	123 1 2 2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1	# 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	CHEKER PER C
за	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Uring the year? Yes X No	STATE OF THE STATE	TELLET AND LAND AND LAND LAND LAND LAND LAND L	NAME OF STREET
L		A INT TEL	EXPERIA C	
0	of "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after	AND ATRIC	NAME OF	ANTINATION OF THE PROPERTY OF
	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	HEART THERE,	NAME OF THE PARTY	## ## ## #############################
	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.) N/A	3b	-PARTER SE	- 0861.78692
A٠	t Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		x
	Did the foundation mivest during the year any amount in a marifer that would jeopardize its charitable purpose that		NACE CANAL SERVICE	FERRENCE CONTRACTOR
U	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	41857785	X
_		orm 99 0)-PF	

(1) Cerry on propagands, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public decision (see section 4955); or to carry on, directly or indirectly, any voter regislation drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an individual for travel, study, or other similar purposes? (3) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of cruely to children or animals? (5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of cruely to children or animals? I frag aware in 74's 15 (15(1-6), did any of the transcations fail to qualify under the exceptions described in Regulations section 53.945 or in a current notice regarding disaster assistance, there is a complete to the section of the prevention of cruely to children or animals? If the answer is 7'ss' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility of the grant? If Yes, attach the satisfement required by Regulations section 3.1945-5(d). But the foundation, during the year, receive any funds, deadly or indirectly, to pay premiums on a personal benefit contract? If Yes, attach the foundation, during the year, receive any funds, deadly or indirectly, on a personal benefit contract? If Yes is the foundation, during the year, apy premiums, directly or indirectly, on a personal benefit contract? If Yes is the foundation, during the year, apy premiums, directly or indirectly, on a personal benefit contract? If Yes is the foundation, during the year is processed for indirectly in a prohibited tax shelter transaction? If Yes is the foundation, during the year is processed for indirectly and provided the satisfaction of the year is provided to the section 4950 tax on payment(s) of more than \$1,000,000 in remuneration or excepti	-orm 990-PF (2019) WILSON - WOOD FOUNDATION			<u>59-22439</u>	26	Page 6
(1) Carry on propagation, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any speeds public election (see section 4955(x) or to carry on, directly or indirectly, any voter registration of any speeds public election (see section 4955(x) or to carry on, directly or indirectly, any voter registration of any or process of the prevention of cruely study, or other smalar purposes? (3) Provide a grant to an individual for travel, study, or other smalar purposes? (3) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruely to children or animals? If any answer is 745 to 54(1)-60, due sy of the transactions fail to qualify under the exceptions described in Regulations section 53.945 or in a current notice regarding diseaster assistance, clearly or section 53.945 or in a current notice regarding diseaster assistance, clearly or section 53.945 or in a current notice regarding diseaster assistance, clearly or section 53.945 or in a current notice regarding diseaster assistance, clearly or section 53.945 or in a current notice regarding diseaster assistance, clearly or section 53.945 or in a current notice regarding diseaster assistance, clearly or section 53.945 or in a current notice regarding diseaster assistance, clearly or section 53.945 or in a current notice regarding diseaster assistance, clearly or section 53.945 or in a current notice regarding diseaster assistance, clearly or section 450 favored to section 450 favored by received by Regulations section 53.945 or in a prohibit part of the foundation or cever services assistance, clearly or indirectly, on a personal benefic contract? If Yes, 10 the foundation receive any proceeds on have any net income attributable to the transaction? If Yes a table to foundation receive any proceeds on have any net income attributable to the transaction? If Yes a table to income any process or the any proceeds or have any net income attributable to t	Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
(e) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter reportation drive? (3) Provide a grant to an organization other than a charabible, etc. organization described in section 4945(q)(4)? See instruction of the research of the prevention of cruely to children or animals? (4) Provide a grant to an organization other than a charabible, etc. organization described in section 4945(q)(4)? See instruction of the prevention of cruely to children or animals? (5) Provide for any purpose other than religious, cheritable, scentific, literary, or educational purposes, or for the prevention of cruely to children or animals? (6) Provide for any purpose other than religious, cheritable, section 5, 4045(4)? See instructions or the prevention of cruely to children or animals? (7) If Yes (1) If Ye					Yes	No
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address	8 Is the foundation subject to the section 4960 tax on payment(s) of more than	\$1,000,000 in remuneration or				
Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. (b) Title, and average hours per week devoted to position (if not paid, enter -0-) (g) Name and address (inter -0-) (a) Name and address (inter -0-) (b) Title, and average hours per week devoted to position (if not paid, enter -0-) (c) Compensation (if not paid, enter -0-) (d) Compensation (if not paid, enter -0-) (a) Name and address (inter -0-) (b) Title, and average hours per week devoted to position (if not paid, enter -0-) (c) Compensation (if not paid, enter -0-) (d) Compensation (if not paid, enter -0-) (e) Expension (if not paid, enter -0-) (a) Name and address of each employee (other than those included on line 1). If none, enter "NONE." (b) Title, and average hours per week devoted to position (if not paid, enter -10-) (c) Compensation (if not paid, enter -10-) (d) Compensation (if not paid, enter -10-) (d) Compensation (if not paid, enter -10-) (e) Expension (if not paid, enter -10-) (a) Nown (if not paid, enter -10-) (b) Title, and average hours per week devoted to position (if not paid, enter -10-) (c) Compensation (if not paid, enter -10-) (d) Compensation (if not paid, enter -10-) (e) Expensive enter -10-) (d) Compensation (if not paid, enter -10-) (e) Compensation (if not paid, enter -10-) (d) Compensation (if not paid, enter -10-) (e) Compensation (if not paid, enter -10-) (d) Compensation (if not paid, enter -10-) (d) Compensation (if not paid, enter						
1 List all officers, directors, trustees, and foundation managers and their compensation. (b) Title, and werage hours per week devoted to position (a) Name and address (a) Name and address (b) Title, and werage hours per week devoted to position (f) to paid, enter -0-) empression (f) to paid, enter -0-) empression (g) compensation (g) compensation (f) to paid, enter -0-) empression (g) compensation (g) com		tees, Foundation Ma	nagers, Highly	/		
(a) Name and address (b) Title, and average hours per week devoted (lf not paid, enter 4-) (c) Compensation (lf) Combinates to account, allowant (lo position to position (lf) Combinates to appearate to position (lf) Compensation (lf) Compensatio		At				
GEORGE FRALEY 2283 HARRIER WAY NOKOMIS, FL 34275 SUSAN WOOD SECRETARY/TREASURER 2283 HARRIER WAY NOKOMIS, FL 34275 THOMAS A.FAESSLER PRESIDENT 2283 HARRIER WAY NOKOMIS, FL 34275 TOME (a) Name and address of each employee paid more than \$50,000 NONE (b) Itile, and average hours per week devoted to position (c) Compensation (d) Contributions to lamployee account, allowant (e) Expension (f) Compensation (h) Total number of other employees paid over \$50,000	1 List all officers, directors, trustees, and foundation managers and		(a) Companyation	(d) Contributions to	(-) Eve	
2283 HARRIER WAY	(a) Name and address	hours per week devoted to position	(If not paid.	employee benefit plans and deferred compensation	account, allowa	other nces
NOKOMIS, FL 34275 SUSAN WOOD 2283 HARRIER WAY NOKOMIS, FL 34275 THOMAS A. FAESSLER 2283 HARRIER WAY NOKOMIS, FL 34275 TOKEN THOMAS A. FAESSLER (a) Name and address of each employee paid more than \$50,000 NONE 5.00 0. 0. 97,032. 9,703. PRESIDENT 5.00 0. 0. (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (d) Compensation (e) Expension (e) Expension Total number of other employees paid over \$50,000	GEORGE FRALEY	VICE PRESIDEN	T			
SECRETARY/TREASURER 2283 HARRIER WAY NOKOMIS, FL 34275 THOMAS A.FAESSLER 2283 HARRIER WAY NOKOMIS, FL 34275 PRESIDENT 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Compensation (d) Computers to employee berefit plans and deterred compensation all other compensation. (e) Expension Total number of other employees paid over \$50,000	2283 HARRIER WAY					
2283 HARRIER WAY NOKOMIS, FL 34275 THOMAS A.FAESSLER 2283 HARRIER WAY NOKOMIS, FL 34275 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Combuttors to employee begins and detered compensation (e) Compensation Total number of other employees paid over \$50,000	NOKOMIS, FL 34275	5.00	0.	0.		0.
MOKOMIS, FL 34275 THOMAS A.FAESSLER 2283 HARRIER WAY NOKOMIS, FL 34275 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation Total number of other employees paid over \$50,000	SUSAN WOOD	_SECRETARY/TRE	ASURER			
THOMAS A.FAESSLER 2283 HARRIER WAY NOKOMIS, FL 34275 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (c) Compensation (d) Contributors to employee hereil plans and deterred hours per week devoted to position NONE Total number of other employees paid over \$50,000	2283 HARRIER WAY					
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee health plans account, allowant allowant of the properties of the prope	NOKOMIS, FL 34275	40.00	97,032.	9,703 <u>.</u>		0.
NOKOMIS, FL 34275 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position NONE (c) Compensation (d) Contributions to employee paid more than \$50,000 (e) Expenditure and deferred compensation allowant Total number of other employees paid over \$50,000	THOMAS A.FAESSLER	PRESIDENT				
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position NONE (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expension (f) Compensation (f) Compensation (h) Comp						
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans account, allowant all	NOKOMIS, FL 34275	5.00	0.	0.		0.
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans account, allowant all						
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans account, allowant all				!		
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans account, allowant all						
NONE Total number of other employees paid over \$50,000	Compensation of five nighest-paid employees (other than those in	1	enter "NUNE."	(d) Contributions to	(a) Evr	
NONE Total number of other employees paid over \$50,000	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	account	, other
Total number of other employees paid over \$50,000		devoted to position		compensation	allowa	nces
	NONE					
			_			
		4				
		 				
		-				
				<u>-</u>		
		-				
					-	
		-				
	Total number of other ampleuses and ours 050,000	<u> </u>	<u> </u>		L	<u>_</u>
Form 990-PF (2	Total number of other employees paid over \$50,000			Earm	990-PF	

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0.

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Total. Add lines 1 through 3

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P	Part X Minimum Investment Return (All domestic foundation	ns must complete this p	art Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out char	ritable, etc., purposes:			
	Average monthly fair market value of securities			1a	9,950,533.
	Average of monthly cash balances			1b	411,282.
	Fair market value of all other assets			1c	
d	Total (add lines 1a, b, and c)			1d	10,361,815.
	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	10,361,815.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amo	ount, see instructions)		4	155,427.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here an	nd on Part V, line 4		5	10,206,388.
6	Minimum investment return. Enter 5% of line 5			6	510,319.
Р	Part XI Distributable Amount (see instructions) (Section 4942(j)(3 foreign organizations, check here ► and do not complete this p		ng foundations an	d certain	
1	Minimum investment return from Part X, line 6			1	510,319.
2a	Tax on investment income for 2019 from Part VI, line 5		1,778.		
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b			2c	1,778.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	508,541.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	508,541.
6	Deduction from distributable amount (see instructions)			6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on	Part XIII, line 1		7	508,541.
P	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	499,247.
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 cha	arıtable, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:				
a	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			4	499,247.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net	investment			
	income. Enter 1% of Part I, line 27b			5	1,778.
6	Adjusted qualifying distributions Subtract line 5 from line 4		İ	6	497,469.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent year 4940(e) reduction of tax in those years.	ars when calculating wheth	er the foundation o	qualifies fo	r the section

Form **990-PF** (2019)

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,	· · · · · · · · · · · · · · · · · · ·	· -	-	500 544
line 7				508,541.
2 Undistributed income, if any, as of the end of 2019			205 226	
a Enter amount for 2018 only			387,886.	
b Total for prior years:		^		
		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
b From 2015				
c From 2016				
d From 2017				
e From 2018		· -		
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$ 499, 247.			207 006	
a Applied to 2018, but not more than line 2a			387,886.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	^			
(Election required - see instructions)	0.			111,361.
d Applied to 2019 distributable amount				111,301.
e Remaining amount distributed out of corpus	0.			
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	0.			
b Prior years' undistributed income. Subtract		- 		
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				<u>397,180.</u>
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	0.			
9 Excess distributions carryover to 2020				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				Form 000 PE (2010)

Form 990-PF (2019) WILSON Part XIV Private Operating F	- WOOD FOUN				243926 Page 10
			A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for			· · ▶ └──	4040()(0)	0.404.\\5\
b Check box to indicate whether the foun		ig foundation described ii		4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 2018	Prior 3 years (c) 2017	(d) 2016	(e) Total
income from Part I or the minimum	(a) 2019	(0) 2016	(6) 2017	(0) 2010	(e) iolai
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				<u> </u>	
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					<u> </u>
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:				<u> </u>	
(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 Supplementary Info	ormation (Comple	te this part only i	if the foundation	had \$5,000 or m	ore in assets
at any time during					212 222222
1 Information Regarding Foundation					
List any managers of the foundation where year (but only if they have contributed)	no have contributed more		ributions received by the	foundation before the clo	ose of any tax
NONE		(-/\-/-/			
b List any managers of the foundation wi	no own 10% or more of th	e stock of a corporation (or an equally large porti	on of the ownership of a i	partnership or
other entity) of which the foundation ha			or all oqually large port	on or and ownerous provide	, and one of the control of the cont
NONE		<u> </u>		<u> </u>	
	only makes contributions t	to preselected charitable (organizations and does i		uests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone nun	nder or email address of tr	ie person to whom applic	ations should be addres	sea.	
SEE STATEMENT 13					
b The form in which applications should	be submitted and informat	tion and materials they sh	ould include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	ds, such as by geographica	al areas, charitable fields,	kınds of institutions, or	other factors:	

Tart XV Supplementary information				
3 Grants and Contributions Paid During the Ye	If recipient is an individual	Payment	 	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
SEE ATTACHED SCHEDULE	NONE	SEE ATTACHED	SEE ATTACHED SCHEDULE	388,000.
				-
Total			► 3a	388 000.
b Approved for future payment				
NONE				
	-		-	
Total			> 3b	0.
			Fo	rm 990-PF (2019)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ed by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	Exclu-	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	- Iunction income
a	_				
b	-				
C	_				
d	_		_		
e	-				
f	_		<u> </u>		
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		 	14	262,320.	
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			01	-24.	_
8 Gain or (loss) from sales of assets other		 .			
than inventory			18	-45,368.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
d	6 6	· · · · · · · · · · · · · · · · · · ·	1		
e	_				•
12 Subtotal. Add columns (b), (d), and (e)		0		216,928.	
13 Total Add line 12, columns (b), (d), and (e)				13	216,928
(See worksheet in line 13 instructions to verify calculations.))				

Relationship of Activities to the Accomplishment of Exempt Purposes Part XVI-B

Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
	
-	

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Form 990-PF (2019) WILSON - WOOD FOUNDATION, INC. 59-2243926

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations**

	e organization directly or indir than section 501(c)(3) organ					tion 501(c)		Yes	No
•	ers from the reporting founda	•							
(1) C	· · · · · ·	ation to a monomarita	olo exempt on	gumzation on.			1a(1)		X
	ther assets						1a(2)		X
٠,	transactions:						14(2)		
	ales of assets to a noncharital	hle exempt organiza	tion				15(1)		Х
٠,	urchases of assets from a noi						1b(2)		X
` '	ental of facilities, equipment,	•	or garnization				1b(3)		X
` '	eimbursement arrangements						1b(4)		X
	pans or loan guarantees						1b(5)		X
	erformance of services or me	imharchin or fundrai	ena colicitatio	ine			1b(6)		X
	g of facilities, equipment, mai						10(0)		X
	answer to any of the above is				wave chow the fair i	market value of the ac		otc.	
	rices given by the reporting fo							G13,	
	n (d) the value of the goods, (cu icas tilait iali tilai ket vait	Je ili aliy transaction	ir or snaring arrangen	iciit, silow iii		
. 1	(b) Amount involved			e exempt organization	(d) Description	n of transfers transaction	s and sharing an	20000	
1) Line no	(U) Amount involved	(c) Name of		e exempt organization	(u) Descriptio	n of transfers, transaction	s, and snaring an	angeme	nis
			N/A						
				 					
				_					
				<u></u>					
						<u>, </u>			
			·						
		·							
2a Is the	foundation directly or indirect	tly affiliated with, or	related to, one	or more tax-exempt organi	zations described				
	ion 501(c) (other than section						Yes	X	No
	," complete the following sch								
<u>.</u>	(a) Name of org			(b) Type of organization		(c) Description of rela	ationship		
	N/A			(=7 3)		·-/	•		
	11/11								
	-								
				<u> </u>			-		
 -									
Tu	nder penalties of perjury, I declare t	that I have examined th	ıs return, ıncludın	l o accompanying schedules and	I statements, and to the	best of my knowledge			_
	id belief, it is true, correct, and con						May the IRS of return with the	e prepar	er
Here	A	(1) ood		V01112020	10000		shown below		7 I
1.4	Signature of officer or trustee	00 01		3/4/2020	Title	vies	_ X Yes		J No
	- ,		Dranararia	Date		Check If I	PTIN		
	Print/Type preparer's na	IIIIC	Preparer's s	ignature	Date .		T I HIN		
Paid		a=	Vann	1 DA MAN	12/2/20	self- employed	50050-	04	
	REBECCA U.		I nurua.	Ultine CPA	312120		P00585		
Prepare		KERING, P	BARBERI	O & CO.		Firm's EIN ► 59	1-17533	37	
Use On	-								
	Firm's address ▶ P .								
	SA	RASOTA, F	L 3423	0-6348		Phone no. 941			
							Form 99 ()-PF	(2019)

FORM 990-PF	DIVIDENDS	AND INTER	REST FRO	M SECUR	ITIES S	TATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAI GAINS DIVIDENI	RE	(A) VENUE BOOKS	(B) NET INVEST- MENT INCOME		
DIVIDEND INCOME	262,320.		0. 2	62,320.	262,320.		
TO PART I, LINE 4 =	262,320.	= =	0. 2	62,320.	262,320.		
FORM 990-PF		OTHER 1	NCOME		S	TATEMENT	2
DESCRIPTION			(A) REVENU PER BOO		(B) ET INVEST- ENT INCOME	(C) ADJUSTED NET INCOME	3
GAIN ON SALE OF ASSE	TS			-24.	-24.		•••
TOTAL TO FORM 990-PF	, PART I,	LINE 11		-24.	-24.		
		-					
FORM 990-PF	·	ACCOUNT	NG FEES		S	TATEMENT	3
FORM 990-PF DESCRIPTION	· · · · · · · · · · · · · · · · · · ·	ACCOUNTI (A) EXPENSES PER BOOKS	NG FEES (B NET IN MENT I) VEST-	(C) ADJUSTED NET INCOME	TATEMENT (D) CHARITABI PURPOSES	LE
DESCRIPTION		(A) EXPENSES	(B NET IN MENT I) VEST-	(C) ADJUSTED	(D) CHARITABI	LE S
	, LN 16B	(A) EXPENSES PER BOOKS	(B NET IN MENT I	VEST- NCOME	(C) ADJUSTED	(D) CHARITABI PURPOSES	LE S
DESCRIPTION ACCOUNTING FEES		(A) EXPENSES PER BOOKS	(E NET IN MENT I	VEST- NCOME 0.	(C) ADJUSTED NET INCOME	(D) CHARITABI PURPOSES 13,250	LE S O.
DESCRIPTION ACCOUNTING FEES TO FORM 990-PF, PG 1		(A) EXPENSES PER BOOKS 13,250	(E NET IN MENT I	VEST- NCOME 0. 0. FEES	(C) ADJUSTED NET INCOME	(D) CHARITABI PURPOSES 13,250	LE D.
DESCRIPTION ACCOUNTING FEES TO FORM 990-PF, PG 1 FORM 990-PF		(A) EXPENSES PER BOOKS 13,250 13,250 CHER PROFES (A) EXPENSES	(ENET IN MENT I	VEST- NCOME 0. 0. FEES	(C) ADJUSTED NET INCOME S (C) ADJUSTED	(D) CHARITABI PURPOSES 13,250 13,250 TATEMENT (D) CHARITABI PURPOSES	0. 0. 4

FORM 990-PF	TAX	ES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM			
EXCISE TAX	1,778.	().		0.
TO FORM 990-PF, PG 1, LN 18 =	1,778.). 		0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM			
INSURANCE OFFICE SUBSCRIPTIONS/PUBLICATIONS BANK SERVICE CHARGES POSTAGE	2,131. 599. 1,157. 110. 126.	().).).).	2,131. 599. 1,157. 110. 126.	
TO FORM 990-PF, PG 1, LN 23	4,123.). —	4,12	23.
FORM 990-PF OTHER DECREASI	ES IN NET AS	SETS OR FUN	D BALANCES	STATEMENT	7
DESCRIPTION				AMOUNT	
UNREALIZED DEFERRED EXCISE TA	AX EXPENSE			7,28	85.
TOTAL TO FORM 990-PF, PART I	II, LINE 5			7,28	5.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	8
				FAIR MARKET	1
DESCRIPTION		1	BOOK VALUE	VALUE	•
DESCRIPTION SEE ATTACHED SCHEDULE			8,137,951.		

FORM 990-PF CC	DRPORATE BONDS		STATEMENT		
DESCRIPTION		BOOK VALUE	FAIR MARKE	r	
SEE ATTACHED SCHEDULE		2,384,625.	2,384,625.		
TOTAL TO FORM 990-PF, PART II, LIN	2,384,625.	2,384,625.			
FORM 990-PF DEPRECIATION OF ASSE	ETS NOT HELD FOR	INVESTMENT	STATEMENT	10	
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUI	E	
CABINET LEATHER CHAIR OFFICE DESK HP PRINTER ALL IN ONE LASER	500. 150. 1,500.	500. 150. 1,500.		0. 0. 0.	
WIRELESS DELL LATITUDE	260. 1,534.	260. 281.	1,253		
TOTAL TO FM 990-PF, PART II, LN 14	3,944.	2,691.			
FORM 990-PF	OTHER ASSETS		STATEMENT	11	
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKE	Т	
ACCRUED INTEREST AND DIVIDENDS	7,202.	6,664.	6,6	64.	
TO FORM 990-PF, PART II, LINE 15	7,202.	6,664.	6,6	64.	
FORM 990-PF OTH	HER LIABILITIES		STATEMENT	12	
DESCRIPTION		BOY AMOUNT	EOY AMOUNT		
DEFERRED EXCISE TAX PAYABLE	50,661.	57,946.			
TOTAL TO FORM 990-PF, PART II, LIN	NE 22	50,661.	57,946.		
				_	

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

13

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SUSAN WOOD, EXECUTIVE DIRECTOR 2283 HARRIER WAY NOKOMIS, FL 34275

TELEPHONE NUMBER

941-484-6549

FORM AND CONTENT OF APPLICATIONS

A SHORT (1-2 PAGE) LETTER SHOULD BE WRITTEN CONTAINING OFFICIAL NAME & PURPOSE OF THE ORGANIZATION, BRIEF DESC. & TIMETABLE OF PROJECTS, TOTAL EST. COST OF PROJ. & TENTATIVE SUPPORT SOUGHT. PROVIDE COPY OF TAX EXEMPT LETTER.

ANY SUBMISSION DEADLINES

GRANT REQUESTS ARE PROCESSED ON AN ANNUAL BASIS. LETTERS OF INQUIRY MUST BE (CONT. ON NEXT PAGE)

RESTRICTIONS AND LIMITATIONS ON AWARDS

ONLY U.S. ORGS. WITH 501(C)3 AND 509 (A)(1), OR (2) STATUS CONSIDERED. NOT CONSIDERED ARE PROPOSALS FOR ENDOWMENT FUNDS, TRAVEL PROJECTS, SURVEYS FUND RAISING COSTS, RESEARCH, PROPOSALS FROM OTHER PRIVATE FOUNDATIONS, MULTIPLE YEAR, REQUESTS FOR EMERGENCY FUNDS TO ELIMINATE EXISTING DEFICITS. REQUESTS FROM NATIONAL ORGANIZATIONS ONLY IF FOR PROGRAMS ON A LOCAL LEVEL.

WILSON	<u>-</u>	MOOD	FOUNDATION.	TNC.

59-2243926

NAME	AND	ADDRESS	OF	PERSON	TO	MOMW	APPLICATIONS	SHOULD	BE	SUBMITTED
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CONTINUED

FORM AND CONTENT OF APPLICATIONS

ANY SUBMISSION DEADLINES

MAILED BEFORE JUNE. IF APPROVED, FORMAL GRANT APPLICATION SHOULD BE SUBMITTED BEFORE SEPTEMBER.

RESTRICTIONS AND LIMITATIONS ON AWARDS