-orm 990-PF

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

2019

Department of the Treasury Internal Revenue Service ▶ 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.

Open to Public Inspection

For ca	lenda	r year 2019 or ta	x year beginnin	g	, 2019	, and ending			
LUCY	.G0(DDING CHAR	ITABLE FOU	- NDATI	ON TRUST		A	Employer identification nu 59-2891582	mber
POS:	OF	FICE BOX 37	7349				В	Telephone number (see ins (904) 635-64	
ĸ			,,,,,				c	If exemption application is	
G	eck al	I that apply	Initial return		Initial return of a forr	ner public charity	D	1 Foreign organizations, che	ck here >
בים			Final return Address char	ae l	Amended return Name change			2 Foreign organizations mee	ting the 85% test, check
	_	pe of organization	on X Sec	tion 50	1(c)(3) exempt private f		_	here and attach computate	
	-	ction 4947(a)(1) t value of all assets a	<u>-</u>			private foundation ash Accrual	E	If private foundation statu- under section 507(b)(1)(A	
	m Part	II, column (c), line 1	6)	X	Other (specify) MODIFI column (d), must be on a	ED CASH	F	If the foundation is in a 60 under section 507(b)(1)(B	
Part	<u> </u>	119, 216, nalysis of Re		(Fart I,	Column (a), mast be on t	24511 04515)	L	Unider Section 307(b)(1)(b)	
<u> </u>	CO co ne	Kpenses (The lumns (b), (c), a cessarily equal tumn (a) (see inst	total of amounts and (d) may not the amounts in	s in	(a) Revenue and expenses per books	(b) Net investme income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1		s, etc., received (attach sch	•					
Ma	2	Check ► X If the four	ndation is not required to a	ittach Sch B				 	<u> </u>
•	3	Interest on savings and ter Dividends and intere	mporary cash investments		2,619,160.	2,619,16	-	N/A	
	5 a	Gross rents			2,019,100.	2,019,10			,
	[_	Net rental income or (loss)	 		4 115 220				
ā		Net gain or (loss) from sa Gross sales price for		401	4,115,320.	· · - · ·		·	
2	7	assets on line 6a Capital gain net inco	ome (from Part IV, lin			4,115,32	20.		
Revenue	8	Net short term capital Income modifications							
~	10 a	Gross sales less returns and	1 710		·			 	<u> </u>
		allowances Less Cost of							
		goods sold Gross profit or (loss) (atta	ach schedule)						
	11								
	12	Total Add lines 1 th	rough 11		6,734,480.	6,734,48	20		
	13		icers, directors, truste	ees, etc	265,560.	66,3		RECEIVED	199,170.
88	14	Other employee sala	•				_	1,1202.122	<u>၂</u>
penses	15 16 a	Pension plans, empl Legal fees (attach so	•				용	APR 1 5 2020	
	1	Accounting fees (atta	•				m		8
e l		Other professional fees (a	attach sch)					OGDEN UT	
aģi	17 18	Interest Taxes (attach schedule)(se	ee instrs) See S	tm 1	148,359.	37,85	. 0		
istr	19	Depreciation (attach	,		140,339.	37,00	٠ .		
Ē	20	schedule) and deplet Occupancy 1	tion						
5	21	Travel, conferences,	and meetings						_
7	22	Printing and publicat Other expenses (atta				-			
ᆵ	23		ee Stateme	ent 2	842,877.	827,89	8.		14,979.
ij.	24	Total operating and							
व	25	expenses. Add lines Contributions, gifts, grants	D	XX ;	1,256,796. 4,655,180.	932,14	<u> </u>	-	214,149. 4,655,180.
Operating and Administrative E	26	Total expenses and Add lines 24 and 25	disbursements.		5,911,976.	932,14	7		4,869,329.
	27	Subtract line 26 from	n line 12:		3,311,310.	932,14	' ' :		4,009,329.
	a	Excess of revenue of and disbursements	over expenses		822,504.				,
	b	Net investment inco	me (if negative, ente	r 0-)	, , , ,	5,802,33	33.		
_	0	Adjusted net income	e (if negative, enter -	0-)					

BAA For Paperwork Reduction Act Notice, see instructions.

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Form **990-PF** (2019

Page 2

Par	t II	Balance Sheets	column should be for end-of-year amounts only	Beginning of year	End o	 _
	 -	<u> </u>	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest	_			
	2	- '	rary cash investments	4,502,280.	5,436,890.	5,436,890.
	3	Accounts receivable				
		Less, allowance for	doubtful accounts			
	4	Pledges receivable			-	1
	5	Less allowance for Grants receivable	doubtful accounts			
	_		and decided howkers and all a	-		
	6	disqualified persons (atta	cers, directors, trustees, and other ch schedule) (see instructions)			
	7		• •			1
		Less allowance for				<u> </u>
	8	Inventories for sale	or use			
	9	Prepaid expenses a	nd deferred charges			
73	10:		and state government			
Assets	1 .	obligations (attach s	-	3,482,728.	2,668,020.	2,733,993.
Ąŝ		b Investments — corporate	· ·	64,613,684.	65,701,960.	93,521,223.
_	ĺ	c Investments — corporate	, , ,	17,648,936.	17,263,262.	17,524,118.
	11	Investments – land, equipment basis.	• • • • • • • • • • • • • • • • • • •			
		Less: accumulated deprec (attach schedule)	enation •			
	12			<u></u>		
	13	Investments – other	·			
	14	Land, buildings, and				
		Less accumulated deprec (attach schedule)	-			
		Other assets (descri				
		see the instructions	completed by all filers — Also, see page 1, item I)	90,247,628.	91,070,132.	119,216,224.
	17	· -	nd accrued expenses	5 2 4 5 2 2 2		
	18	Grants payable		5,245,000.	3,840,000.	<u>_</u> <u>l</u>
. <u>8</u>	19	Deferred revenue	there trustees 0 ather discussified payable			<u> </u>
Ę	20		tors, trustees, & other disqualified persons s payable (attach schedule)	<u> </u>		<u> </u>
Liabilities	21	Other liabilities (des				
	22	Other habilities (des				
	23	Total liabilities (add	l lines 17 through 22)	5,245,000.	3,840,000.	
5 68		Foundations that fo and complete lines	llow FASB ASC 958, check here ► 24, 25, 29, and 30.			
Jafar	24	Net assets without of	donor restrictions			
d.	25	Net assets with done	or restrictions			
Net Assets or Fund Balance		Foundations that do and complete lines	not follow FASB ASC 958, check here X			
þ	26	-	principal, or current funds	117,858,491.	117,858,491.	j
윙	27		, or land, bldg , and equipment fund		<u> </u>	i
SS	28		ulated income, endowment, or other funds	-32,855,863.	-30,628,359.	· · · · · · · · · · · · · · · · · · ·
ξÞ	29		fund balances (see instructions)	85,002,628.	87,230,132.	1
2	30		net assets/fund balances	00 247 629		
Par	 +	(see instructions)	ges in Net Assets or Fund Balanc	90,247,628.	91,070,132.	
						
1	Tota end-	I net assets or fund based of the content of the co	alances at beginning of year – Part II, colu d on prior year's return)	ımn (a), line 29 (must aç	gree with	85,002,628.
2		er amount from Part I,			2	822,504.
3			ne 2 (Itemize) ► See Statement 3		3	1,405,000.
4		lines 1, 2, and 3.	= = = = = = = = = = = = = = = = = = = =		4	87,230,132.
5	Decre	ases not included in line 2 (5	
6	Tota	I net assets or fund ba	alances at end of year (line 4 minus line 5)	- Part II, column (b), I	ne 29 6	87,230,132.

(a) List and describe	the kind(s) of property sold (for example varehouse, or common stock, 200 shs	e, real estate, (b)	How acquired — Purchase — Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a			P		
b					
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or ((e) plus (f) m	
a 35,407,401.		31,292,0	081.		1,115,320
ь					
С					
d					· ·
e					
Complete only for assets showing	ng gain in column (h) and owned by the	foundation on 12/31/69	-	(I) Gains (Col	(h)
(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		ain minus col (k), b an -0-) or L osses (fr	
a					,115,320
b					
С					
d					<u> </u>
e					
2 Capital gain net income or (ne	et capital loss) If gain, also e	enter in Part I, line 7 er -0- in Part I, line 7	2	4	,115,320
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)	_			1,115,520
If gain, also enter in Part I, lin in Part I, line 8	ne 8, column (c) See instructions If ((loss), enter -0-	3	4	,115,320
	ection 4942 tax on the distributable an		period?	Yes	X No
	lify under section 4940(e) Do not con				
1 Enter the appropriate amount in	each column for each year, see the inst	tructions before making any ent	ries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution (col (b) divided	
2018	4,754,468.	108,397,2	223.		0.04386
2017	5,471,073.	104,965,5			0.052123
2016	4,923,167.	97,389,8			0.05055
2015	5,191,851.	101,191,6			0.05130
2014	4,979,759.	102,755,8			0.048462
2 Total of line 1, column (d).					
- rotar of time 1, column (a).			2		0.24630
3 Average distribution ratio for the	e 5-year base period — divide the total or on has been in existence if less than !	n line 2 by 5 0, or by the 5 years	3		
Average distribution ratio for the number of years the foundation	e 5-year base period – divide the total or on has been in existence if less than b aritable-use assets for 2019 from Part	5 years		109	0.04926
Average distribution ratio for the number of years the foundation	on has been in existence if less than t	5 years	3		0.04926
 Average distribution ratio for the number of years the foundation Enter the net value of noncharm Multiply line 4 by line 3 	on has been in existence if less than t	5 years	4		0.246309 0.049263 0,905,642 6,414,062 58,023
 Average distribution ratio for the number of years the foundation Enter the net value of noncharm Multiply line 4 by line 3 	on has been in existence if less than baritable-use assets for 2019 from Part	5 years	3 4 5	5	0.04926 0,905,642 6,414,062
Average distribution ratio for the number of years the foundation Enter the net value of nonchar Multiply line 4 by line 3 Enter 1% of net investment in Add lines 5 and 6 Enter qualifying distributions in	on has been in existence if less than suritable-use assets for 2019 from Part note.	5 years. X, line 5	3 4 5 6 7	5	0.04926 0,905,642 6,414,062 58,023

		891582		P	age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstruction	s)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here				ا بر د
	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,	1	1	16,0)47.
	check here ► and enter 1% of Part I, line 27b				İ
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
_	foundations only, others, enter -0-)	2			0.
3	Add lines 1 and 2.	3	1	16,0	147.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	1	16,0	147.
6	Credits/Payments				
а	2019 estimated tax pymts and 2018 overpayment credited to 2019 6a 115,562.				J
	Exempt foreign organizations — tax withheld at source 6b				
	Tax paid with application for extension of time to file (Form 8868) 6 c				- }
	Backup withholding erroneously withheld 6d				
	Total credits and payments Add lines 6a through 6d	7		15,5	62
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8		10,0	702.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9			85.
10	·	10			103.
		11			
Da-	t VII-A Statements Regarding Activities	<u>'' </u>			
		 1	· · · · · ·	V	
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		1.0	Yes	No_
	participate or intervene in any political campaign?		1 a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition		1 b		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				
	Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		1 c		X
_	(1) On the foundation \Rightarrow \$ 0. (2) On foundation managers \Rightarrow \$	0.			- 1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			.	1
	foundation managers •\$0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Χ
	If 'Yes,' attach a detailed description of the activities				·
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3		
1 ~	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a		<u>X</u>
			4b	NT.	
	If 'Yes,' has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	N	X
3		}	3		
_	If 'Yes,' attach the statement required by General Instruction T				1
ь	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		1		- 1
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict				1
	with the state law remain in the governing instrument?	ļ	6	_ X	
	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	Χ	 ,
8 a	Enter the states to which the foundation reports or with which it is registered. See instructions				
	<u>FL</u>				
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General]			
	(or designate) of each state as required by General Instruction G^2 if 'No,' attach explanation		8 b	Х	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4 for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If 'Yes,' complete P	942(j)(5)			
		'art XIV	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		10		X

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11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(0)(13)? If 'Yes, attach schedule' See instructions 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' 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A 14 The books are in care of * BONNIE H. SMITH Located at * PO BOX 37349, JACKSONVILLE, FLORIDA 2/e+4 * 32236-7349 15 Section 4947(a)(1) nonexempt charitable trusts fitting Form 990-PF in lieu of Form 1041 - check here 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 over a bank, securities, or other financial account in a foreign country? 16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 16 X 17 See the instructions for exceptions and filing requirements for FinCEN Form 114 if 'Yes,' enter the name of the foreign country be seen the name of the foreign country be seen the self of the foundation (either directly or indirectly) 18 Capage in the sale or exchange, or leasing of property with a disqualified person? 19 File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. 10 During the year, did the foundation (either directly or indirectly) 11 Engage in the sale or exchange, or leasing of property with a disqualified person? 12 Sorrow money from, lend money to, or otherwise extend credit to (or acce
advisory privileges? If Yes, attach statement See instructions 10 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A 14 The books are in care of BONNIE H. SMITH Located at PO BOX 37349 JACKSONVILLE, FLORIDA ZIP + 4 32236-7349 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 16 At any time during calendary ear 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country See the instructions for exceptions and filing requirements for FinCEN Form 114 If Yes, eitler the name of the foreign country Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 If any time is checked in the Yes' column, unless an exception applies. 1 a During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (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 speed 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)) or in a current notice regarding disaster assistance? See instructions Organizati
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A 1 The books are in care of * BONNIE H. SMITH Located at * PO BOX 37349, JACKSONVILLE, FLORIDA 15 Section 4947(a)(1) nonexempt chantable 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 and enter the amount of tax-exempt interest received or accrued during the year and enter the amount of tax-exempt interest received or accrued during the year and enter the amount of tax-exempt interest received or accrued during the year and enter the amount of tax-exemptions and filing requirements for FinCEN Form 114 If 'Yes,' enter the name of the foreign country. Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. 1 a During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? 2) Burrish goods, services, or facilities to (or accept them from) a disqualified person? 3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? 4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? 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 or property to a government entitied 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) bif any answer is 'Yes' to 1a(1)—(6), did any of the acts fail to qualify under the exceptions described in the vertice of the provisions section 53
14 The books are in care of
Located at P PO BOX 37349. JACKSONVILLE, FLORIDA ZIP 4 32236-7349 15 Section 4947(a)(1) nonexempt interest received or accrued during the year 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 over a bank, securities, or other financial account in a foreign country? 16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 16 X 17 See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," is the years Po Botton 114 in Fig. 114 in Fig. 115 X 18 Yes No 115 X 19 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required 19 File Form 4720 if any item is checked in the Yes' column, unless an exception applies. 10 During the year, did the foundation (either directly or indirectly) 11 Engage in the sale or exchange, or leasing of property with a disqualified person? 12 File Form 4720 if any item is checked in the Yes' column, unless an exception applies. 13 During the year, did the foundation (either directly or indirectly) 14 Engage in the sale or exchange, or leasing of property with a disqualified person? 15 Furnish goods, services, or facilities to (or accept them from) a disqualified person? 16 Pyes X No 17 File Form 4720 if any income to a disqualified person? 18 Yes No 19 Pyes X No 19 Pyes X No 20 File Form 4720 if any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? 21 File Form 4720 if any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? 22 File Form 4720 if any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? 22 File Form 4720 if any income
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 16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country. Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1 a During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X yes No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X yes No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No (6) Agree to pay money or property to a government official? (Exception, Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after fermination 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 (0).3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions Organization relying on a current notice regarding disaster assistance of the foundation was a private operating foundation defined in section 4942(0)(3) or 49
Yes No See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country FinCEN Form 120 May Be Required
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country."
enter the name of the foreign county Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. 1 a During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1 a During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (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 Organizations relying on a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? 1 b
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► 20 _ , 20 _ , 20 _ , 20 _
3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No
b If 'Yes,' did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation
or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or
(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to
determine if the foundation had excess business holdings in 2019)
4a 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 X
BAA Form 990-PF (2019)

Part VII-B Statements Regarding Activit	ies for Which Form	n 4720 May Be Req	uired (continued)			
5 a During the year, did the foundation pay or incur a	ny amount to				Yes	No
(1)' Carry on propaganda, or otherwise attem	pt to influence legislatio	n (section 4945(e))?	Yes	No	-	11,5
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	olic election (see section ation drive?	1 4955), or to carry	Yes	No	, .	9,1
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes	No	;	'
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charitable, etc., organi	zation described	Yes	No No		
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific on of cruelty to children	c, literary, or or animals?	Yes	No		i
b If any answer is 'Yes' to 5a(1)—(5), did any or described in Regulations section 53 4945 or in a	f the transactions fail to current notice regarding d	qualify under the exceptisaster assistance?	ptions			
See instructions Organizations relying on a current notice rega	ırdıng disaster assistand	ce, check here	▶ [51	o N	/A
c If the answer is 'Yes' to question 5a(4), does	_		L	_		
tax because it maintained expenditure respon If 'Yes,' attach the statement required by Reg	,	5 5(4)	N/A Yes	No		
, , ,		` ,				
6 a Did the foundation, during the year, receive a on a personal benefit contract?	ny funds, directly or ind	irectly, to pay premium:	s ∏Yes [x	No		.
b Did the foundation, during the year, pay prem	iums, directly or indirec	tly, on a personal bene	fit contract?	61)	X
If 'Yes' to 6b, file Form 8870 7 a At any time during the tax year, was the foun	dation a party to a prob	ihited tay shelter transa	ection? Yes X	No		
b If 'Yes,' did the foundation receive any process				N/A 71	<u>, </u>	· ·
8 Is the foundation subject to the section 4960 tax	on payment(s) of more that	an \$1,000,000 in remune	ration			. 1
or excess parachute payment(s) during the ye	ear ⁹		Yes 2	No		•
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid	Employee	es,	
and Contractors 1 List all officers, directors, trustees, and foun	dation managers and th	eir compensation. See	instructions			
1 List di Officers, directors, trastees, and four	(b) Title, and average	(c) Compensation	(d) Contributions to	1		
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expen	ise acci allowar	
BONNIE H. SMITH	Trustee	171,960.	0			0.
POST_OFFICE_BOX_37349	32.00					
JACKSONVILLE, FL 32236-7349			· · · · · · · · · · · · · · · · · · ·			
ROBERT A. MILLS	Trustee	31,200.	0.			۵۰.
POST OFFICE BOX 37349 JACKSONVILLE, FL 32236-7349	4.00					
WILFORD C. LYON, JR.	Trustee	31,200.	0.			0.
POST_OFFICE_BOX_37349 JACKSONVILLE, FL 32236-7349	4.00					
DAVID_H. PEEK	Trustee	31,200.	0.			0.
POST_OFFICE_BOX_37349	4.00					
JACKSONVILLE, FL 32236-7349		and the distance of the same o		<u> </u>		
2 Compensation of five highest-paid employees (o	(b) Title, and average	on line I — see instruction	(d)Contributions to			
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expen	ise acci allowar	
None_,						
				 		_
				 		
				+		
-				 		
	[
	1	!				

Form 99		59-2891582 Page 7
3 =:	and Contractors (continued)	WOME !
_ 3 FIV	ie highest-paid independent contractors for professional services. See instructions. If none, enterprise (a) Name and address of each person paid more than \$50,000 (b) Type of ser	
None	(a) Name and address of each person paid more than \$50,000 (b) Type of ser	vice (c) Compensation
NOITE_		
-		-
Total nu	mber of others receiving over \$50,000 for professional services	- 0
	(-A Summary of Direct Charitable Activities	
T al CIA	Summary of Direct Charitable Activities	
List the for	undation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the numbers and other beneficiaries served, conferences convened, research papers produced, etc.	ber of Expenses
	RANT MAKING IS THE ONLY ACTIVITY.	
. 2:		
2		
3 —		
'		
4		
Dadiv	(D. C	
	(-B Summary of Program-Related Investments (see instructions) the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	? Amount
	/A	, man
. 197	<u></u>	
2		
All othe	r program-related investments. See instructions	

TEEA0307L 08/22/19

Form **990-PF** (2019)

Total. Add lines 1 through 3

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Par	Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes Average monthly fair market value of securities	1 a	106 212 072
	Average of monthly cash balances	1 b	106,313,873. 5,265,459.
	Fair market value of all other assets (see instructions)	1 c	5,265,459.
	Total (add lines 1a, b, and c)	1 d	111,579,332.
	Reduction claimed for blockage or other factors reported on lines 1a and		111, 379, 332.
Ī	1c (attach detailed explanation).	1	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	0. 111,579,332.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,673,690. 109,905,642.
6	Minimum investment return. Enter 5% of line 5	6	5,495,282.
	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operar		
ı aı	and certain foreign organizations, check here and do not complete this part.)	g iv	
1	Minimum investment return from Part X, line 6	_1	5,495,282.
2 a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2 c	116,047.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	5,379,235.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	5,379,235.
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	5,379,235.
Par	TXII Qualifying Distributions (see instructions)		
1 a	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	4,869,329.
Ŀ	Program-related investments — total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 a	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3 a	
t	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	4,869,329.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	4,869,329.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years.	ndation	
BAA			Form 990-PF (2019)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
Distributable amount for 2019 from Part XI, line 7				5,379,235.
2 Undistributed income, if any, as of the end of 2019				3,317,233.
a Enter amount for 2018 only		_	0.	1
b Total for prior years 20 , 20 , 20	<u> </u>	0.		
3 Excess distributions carryover, if any, to 2019				
a From 2014				
b From 2015				
¢ From 2016				
d From 2017 232, 143.				
e From 2018				
f Total of lines 3a through e	232,143.			
4 Qualifying distributions for 2019 from Part			· · <u></u> ,	
XII, line 4 ► \$ 4,869,329.				
a Applied to 2018, but not more than line 2a			0.	
h Applied to conduct while of process of prior conservation				
b Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.	,		
d Applied to 2019 distributable amount				4,869,329.
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))	232,143.			232,143.
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 c Enter the amount of prior years' undistributed		0.		
income for which a notice of deficiency has				
been issued, or on which the section 4942(a) tax has been previously assessed		0.		
tax has been previously assessed		U.		
d Subtract line 6c from line 6b Taxable amount — see instructions	:	0.		
e Undistributed income for 2018 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2019 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2020.				277,763.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required — see instructions)	0.			
8 Excess distributions carryover from 2014 not				
applied on line 5 or line 7 (see instructions)	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				ļ
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				

Form 990-PF (2019) LUCY GOODING CHA				59-2891582	
PartiXIVM Private Operating Founda					N/A
1 a If the foundation has received a ruling or det is effective for 2019, enter the date of the	ruling			_	
b Check box to indicate whether the foundate		erating foundation of		4942(j)(3) or	4942(J)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(h) 2019	Prior 3 years (c) 2017	(d) 2016	(e) Total
investment return from Part X for each year listed	(a) 2019	(b) 2018	(c) 2017	(a) 2016	
b 85% of line 2a				/	
c Qualifying distributions from Part XII, line 4, for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets			. 		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		-:			
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed					
c 'Support' alternative test - enter			1		
(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				AT 000	•
Part:XV Supplementary Information assets at any time during the	ı (Complete this ne year – see in	part only if the	foundation had	\$5,uuu or more	e in
1 Information Regarding Foundation Mana a List any managers of the foundation who had close of any tax year (but only if they had None	ve contributed more the	nan 2% of the total c than \$5,000) (See	ontributions received b section 507(d)(2))	y the foundation bef	fore the
b List any managers of the foundation who ow	n 10% or more of the	stock of a corporation	on (or an equally large	portion of the owner	rship of
a partnership or other entity) of which the None	e foundation has a 1	0% or greater inter	rest		
2 Information Regarding Contribution, Grant, Check here ☐ if the foundation only m requests for funds If the foundation mak 2a, b, c, and d See instructions	akes contributions to	preselected charitab	le organizations and dorganizations under o	oes not accept unso ther conditions, co	licited mplete items
a The name, address, and telephone number	or email address of th	e person to whom a	oplications should be a	ddressed	
See Statement 4	automated and info	rmation and materi	als they should include		
b The form in which applications should be	Submitted and info	mation and materia	ais they should includ	ic	
See Statement for Line 2a					
c Any submission deadlines					
See Statement for Line 2a					
d Any restrictions or limitations on awards,	such as by geograp	phical areas, charita	able fields, kinds of in	stitutions, or other	factors
See Statement for Line 2a		<u> </u>		· · · · · · · · · · · · · · · · · · ·	

Page 11

	Grants and Contributions Paid During the	rear or Approved for Fut	ure Paymen	t	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year				
See	Statement 5				
			1		
			1		
	•				
			1		
		<u> </u>	1	<u> </u>	4 655 100
	Total		Ψ	► 3a	4,655,180
t	Approved for future payment				
			1		
				,	
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•					
			-		
	Total		1	<u> </u>	

	I-A Analysis of Income-Producing is amounts unless otherwise indicated		business income	Excluded by	section 512, 513, or 514	(4)
•	Iram service revenue	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions)
a a	Tam Service revenue			code	-	
ь ——		 	 -			
- c			· · · · · · · · · · · · · · · · · · ·			
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e	······································					 -
- 		 				
-	and contracts from government agencies				-	
	bership dues and assessments	<u> </u>		_		
	st on savings and temporary cash investments			 		
	lends and interest from securities		•	14	2,619,160.	
	rental income or (loss) from real estate					
	-financed property					
	debt-financed property			_ -		
	ental income or (loss) from personal property					·· ·
	r investment income					
	or (loss) from sales of assets other than inventory			18	4,115,320.	
	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory	<u> </u>	<u></u> .	_		
11 Othe	r revenue			_ •		
a						
b						
c						
d						
е		,				
12 Subte	otal Add columns (b), (d), and (e)			-	6,734,480.	
	* * * * * * * * * * * * * * * * * * * *					
13 Total	I. Add line 12, columns (b), (d), and (e)				13	6,734,480.
13 Total	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate 				13	6,734,480.
13 Total See works Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. -B Relationship of Activities to the	Accomplis		<u> </u>	13 ₋ es	
13 Total See works	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate 	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es entributed important	v to the
13 Total See works Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es	v to the
13 Total See works Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es	v to the
13 Total See works Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es	v to the
13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es	v to the
13 Total See works Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A	es	v to the

Form 990-PF (2019) LUCY GOODING CHARITABLE FOUNDATION TRUST 59-2891582 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

	ZACIIIPE OTGUITZ								
1 Did th descri relatin	e organization directly bed in section 501(c) (ig to political organizat	or indirectly eng (other than sections?	gage in any of the on 501(c)(3) organ	following wit nizations) or i	h any other organi n section 527,	zation		Yes	No
a Transf	fers from the reporting	foundation to a	noncharitable exe	empt organiza	ation of				
(1) Ca							1 a (1)		Х
(2) Of	ther assets						1 a (2)		Х
b Other	transactions								
• •	ales of assets to a non	•					1 b (1)		Χ
` '	urchases of assets fror			ation			1 b (2)		Х
` '	ental of facilities, equip	•	assets				1 b (3)	 	Χ
• •	eimbursement arrange						1 b (4)		Χ
	oans or loan guarantee						1 b (5)	 	X
	erformance of services		_				1 b (6)	 	X
c Snarir	ng of facilities, equipme	ent, mailing lists	, other assets, or	paid employe	es.		l c		Х
d If the the good	answer to any of the a ods, other assets, or ser	bove is 'Yes,' co vices given by the rrangement, sho	emplete the follow reporting foundation on column (d) the	ing schedule. on. If the foun	Column (b) should dation received less e goods, other ass	d always show the fair than fair market value in ets, or services receive	market vali o ed	ue of	
(a) Line no	(b) Amount involved		noncharitable exempt o			f transfers, transactions, and		ngement	 S
N/A	<u></u> _			·					
				_					
								-	
			<u> </u>						
						·			
	······				~				

		<u></u>			_				
	foundation directly or inc bed in section 501(c) (s,' complete the followi		vith, or related to, con 501(c)(3)) or in	one or more ta n section 527	x-exempt organization	ons	Yes	X	No
	(a) Name of organizati		(b) Type of	organization		(c) Description of re	ationship		
N/A				***************************************					
Unde	er penalties of perjury, I declar ect, and complete. Declaration	e that I have examine	d this return, including a	accompanying sch	nedules and statements,	and to the best of my knowled knowledge	ge and belief,	it is true.	•
Sign		C .		• / /			May the I		
Here	Remark #	Sm. 11	13	19/202	Trustee		this returi preparer	shown be	
Sid	inature of officer or trustee		Date	e/ /////	Title	- ,	See instri	uctions. Yes	No
	Print/Type preparer's nam	ne	Preparer's signa	ture	Date	Check] If	PTIN	162	LINO
Doid			Self-Pre			self employed			
Paid	Euro's same		Nerr-Lie	pareu		 _	11		
Preparer	Firm's name			<u> </u>		Firm's EIN			1
Use Only	Firm's address					Phone no			
BAA	<u> </u>					Phone no	F 001		1
	· · · · · · · · · · · · · · · · · · ·					I	Form 990	J-PF (%	ZU19)

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LUCY GOODING CHARITABLE FOUNDATION TRUST

59-2891582

Statement 1 Form 990-PF, Part I, Line 18 Taxes

		(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted <u>Net Income</u>	(d) Charitable Purposes
EXCISE TAX FOREIGN TAX WITHHELD	Total	\$ 110,500. 37,859. \$ 148,359.	\$ 37,859. \$ 37,859.		\$ 0.

Statement 2 Form 990-PF, Part I, Line 23 Other Expenses

	_	(a) Expenses per Books	(b) Net Investment <u>Income</u>	(c) Adjusted <u>Net Income</u>	(d) aritable Purposes
D & O INSURANCE INVESTMENT FEES MEMBERSHIPS	\$	2,250. 827,898. 12,250.	\$ 827,898.		\$ 2,250. 12,250.
OFFICE EXPENSE	Total §	479. 8 842,877.	\$ 827,898.		\$ 479. 14,979.

Statement 3 Form 990-PF, Part III, Line 3 Other Increases

CURRENT YEAR DECREASE IN GRANTS PAYABLE

1,405,000. Total \$ 1,405,000.

Statement 4 Form 990-PF, Part XV, Line 2a-d **Application Submission Information**

Name of Grant Program:

Name:

LUCY GOODING CHARITABLE FOUNDATION TRUST

BONNIE H SMITH, MANAGING TRUSTEE POST OFFICE BOX 37349 JACKSONVILLE, FL 32226-7349 (904) 786-4796 Care Of:

Street Address: City, State, Zip Code:

Telephone:

bhsmith@bellsouth.net E-Mail Address:

Form and Content: SEE STATEMENT 6

Submission Deadlines: SEPTEMBER 30 OF GRANT YEAR

LIMITED TO DUVAL, CLAY, BAKER, NASSAU AND ST. JOHNS COUNTIES IN FLORIDA WITH EMPHASIS ON ORGANIZATIONS THAT Restrictions on Awards:

PROVIDE DIRECT BASIC SERVICES TO CHILDREN

2019	Federal Statements	Page 2
	LUCY GOODING CHARITABLE FOUNDATION TRUST	59-2891582

Statement 5 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

	Donee a	ound- tion Purpose of	,
Name and Address	<u>Relationship</u> St	catus <u>Grant</u>	<u>Amount</u>
ASS'N OF FUNDRAISING PROFESSIONALS PO BOX 43024 JACKSONVILLE FL 32203	NONE	GENERAL SUPPORT	\$ 2,500.
BIG BROTHERS/BIG SISTERS 40 EAST ADAMS ST# 220 JACKSONVILLE FL 32202	NONE .	MENTORING PROGRAMMING	25,000.
CAMPS:"I AM SPECIAL" 40 EAST ADAMS ST. #320 JACKSONVILLE FL 32202	NONE	CAMP FOR DISABLED CHILDREN	15,000.
CATHOLIC CHARITIES 40 EAST ADAMS ST. #320 JACKSONVILLE FL 32202	NONE	EMERGENCY ASSISTANCE FUND	70,000.
DEPAUL SCHOOL 3044 SAN PABLO ROAD S JACKSONVILLE FL 32224	NONE	GENERAL SUPPORT	25,000.
DOWN SYNDROME ASSOCIATION 8011 PHILIPS HIGHWAY #7 JACKSONVILLE FL 32256	NONE	TUTORING FOR SPECIAL NEEDS CHILDREN	25,000.
DOWNTOWN ECUMENICAL COUNCIL 215 OCEAN ST JACKSONVILLE FL 32202	NONE	FOOD PANTRY	60,000.
GIRL SCOUTS 1000 SHEARER STREET JACKSONVILLE FL 32205	NONE	CLASSROOM SCOUTING-25K & HOUSING PROJECT TROOPS-25K	50,000.
HOPE HAVEN CLINIC 4600 BEACH BLVD. JACKSONVILLE FL 32207	NONE	SUPPORT OPERATIONS-70K & TECHNOLOGY-50K	120,000.
HUBBARD HOUSE PO BOX 4909 JACKSONVILLE FL 32201	NONE	DOMESTIC VIOLENCE SHELTER OPERATIONS	70,000.
JEWISH FAMILY & COMMUNITY 6261 DUPONT STATION CT E. JACKSONVILLE FL 32217	NONE	KIDS PROGRAMMING & COUNSELING	25,000.
N FL SCHOOL SPECIAL ED 223 MILL CREEK ROAD JACKSONVILLE FL 32211	NONE	STUDENT SPEECH THERAPY	30,000.

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LUCY GOODING CHARITABLE FOUNDATION TRUST

59-2891582

Statement 5 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amo	ount
SALVATION ARMY 328 N. OCEAN STREET JACKSONVILLE FL 32202	NONE .		AFTER SCHOOL PROGRAM-20K, OPERATIONS-40K	\$	60,000.
ST. VINCENTS FOUNDATION P O BOX 41564 JACKSONVILLE FL 32203	NONE		YOUTH MOBILE HEALTH OUTREACH PROGRAM	3	00,000.
SULZBACHER HOMELESS CENTER 611 E. ADAMS STREET JACKSONVILLE FL 32202	NONE		HOMELESS SHELTER OPERATION		70,000.
COMMUNITY FOUNDATION 245 RIVERSIDE AVENUE #310 JACKSONVILLE FL 32202	NONE		SUPPORT DONORS FORUM-35K DISCRETIONARY GRANT-220K	2	55,000.
GIRLS ON THE RUN 3986 BOULEVARD CTR DR #102 JACKSONVILLE FL 32207	NONE		AFTER SCHOOL PROGRAM-30K & TECHNOLOGY-5K		35,000.
JUNIOR ACHIEVEMENT 4049 WOODCOCK DR #200 JACKSONVILLE FL 32207	NONE		STUDENT FINANCE EDUCATION PROGRAM		60,000.
NONPROFIT CENTER 40 EAST ADAMS STREET #100 JACKSONVILLE FL 32202	NONE		GENERAL SUPPORT-40K & CENSUS WORK-100K	1	40,000.
WOLFSON CHILDREN'S HOSPITAL 800 PRUDENTIAL DRIVE JACKSONVILLE FL 32207	NONE		PEDIATRIC NEUROSURGICAL CENTER SUPPORT-LASER	5	00,000.
UNITED WAY OF NE FLORIDA 40 EAST ADAMS ST #200 JACKSONVILLE FL 32202	NONE		FULL SERVICE SCHOOL SITE	4	80,000.
EXPONENT PHILANTHROPY 1720 NORTH STREET NW WASHINGTON DC 20036	NONE -		GENERAL SUPPORT		12,000.
MALI VAI WASHINGTON YOUTH FOUNDATION 1096 WEST 6TH STREET JACKSONVILLE FL 32209	NONE		AFTER SCHOOL PROGRAMS-50K CAPITAL CAMPAIGN-500K	5	50,000.

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LUCY GOODING CHARITABLE FOUNDATION TRUST

59-2891582

Statement 5 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
BOYS & GIRLS CLUBS OF NE FL 555 W 25TH ST JACKSONVILLE FL 32206	=		AFTER SCHOOL PROGRAMS-80K, TEEN CENTER CAPITAL CAMPAIGN-200K, THE BRIDGE-100K	\$ 380,000.
SAFETY SHELTER OF ST JOHNS 2450 MOULTRIE RD. #202 ST. AUGUSTINE FL 32086	NONE		DOMESTIC VIOLENCE SHELTER OPERATIONS	25,000.
BEACHES EMERGENCY ASSISTANCE MINISTRY 850 6TH AVE S #400 JACKSONVILLE BEACH FL 32250	NONE		EMERGENCY HOUSING ASSISTANCE	60,000.
GIRLS INC 100 FESTIVAL PARK AVE JACKSONVILLE FL 32202	NONE		AFTER SCHOOL PROGRAMS	45,000.
GREENWOOD SCHOOL 9920 REGENCY SQ BLVD JACKSONVILLE FL 32225	NONE		GUIDANCE COUNSELOR	30,000.
POLICE ATHLETIC LEAGUE OF JACKSONVILLE PO BOX 351060 JACKSONVILLE FL 32235	NONE		AFTER SCHOOL PROGRAMS-50K & ROOF-300495K	350,495.
PRESBYTERIAN SOCIAL MINISTRY 4115 POST ST JACKSONVILLE FL 32205	NONE		CLOTHING MINISTRY	30,000.
QUIGLEY HOUSE PO BOX 142 ORANGE PARK FL 32067	NONE		SUPPORT DOMESTIC VIOLENCE SHELTER	55,000.
DLC NURSE AND LEARN 4101-1 COLLEGE ST JACKSONVILLE FL 32205	NONE		SUPPORT DISABLED CHILD CARE	50,000.
BARNABUS CENTER, INC. 1303 JASMINE ST. #101 FERNANDINA BEACH FL 32034	NONE		CRISIS ASSISTANCE CENTER OPERATIONS	70,000.
MICAH'S PLACE P.O. BOX 16287 FERNANDINA BEACH FL 32035	NONE		DOMESTIC VIOLENCE SHELTER OPERATIONS	40,000.

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LUCY GOODING CHARITABLE FOUNDATION TRUST

59-2891582

Statement 5 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount_
CARPENTER'S SHOP CENTER 1601 UNIVERSITY BLVD N JACKSONVILLE FL 32211	NONE	-	AFTER SCHOOL PROGRAM	\$ 15,000.
SEAMARK RANCH 1 SAN JOSE PLACE, STE 31 JACKSONVILLE FL 32257	NONE	1	OPERATING COSTS FOR YOUTH HOME	30,000.
JACKSONVILLE SPEECH & HEARING 40 EAST ADAMS ST. #LL20 JACKSONVILLE FL 32202	NONE		GENERAL SUPPORT	25,000.
MARATHON HIGH 2610 COUNTESS OF EGMONT ST FERNANDINA BEACH FL 32034	NONE		HIGH SCHOOL RUNNING PROGRAM	15,000.
FEEDING NORTHEAST FLORIDA 1116 EDGEWOOD AVE. N. JACKSONVILLE FL 32254	NONE		CHILDREN'S SUMMER FEEDING PROGRAM	70,000.
POLICE ATHLETIC LEAGUE-CLAY P O BOX 548 GREEN COVE SPRINGS FL 32043	NONE		PARK IMPROVEMENTS, MAINTENANCE EQUIP	15,000.
2ND MILE MINISTRIES 1650 MARGARET ST #302 JACKSONVILLE FL 32204	NONE		YOUTH DEVELOPMENT PROGRAM	9,000.
BOYS & GIRLS CLUB OF NASSAU 942259 OLD NASSAUVILLE RD Fernandina Beach FL 32034	NONE		AFTER SCHOOL PROGRAMMING	25,000.
SAFE HARBOR BOYS HOME 4772 Safe Harbor Way Jacksonville FL 32226	NONE		PROVIDE DISABILITY ACCESS TO CAMPUS	11,185.
VISION IS PRICELESS 4615 PHILIPS HIGHWAY #100A Jacksonville FL 32207	NONE		CHILDREN EYE SCREENING	20,000.
COMMUNITIES IN SCHOOLS 6261 DUPONT STATION COURT E JACKSONVILLE FL 32217	NONE		READING PROGRAM	40,000.
ST. AUGUSTINE SOCIETY, INC 1375 Arapaho Avenue St. Augustine FL 32084	NONE		St. Francis House Family Shelter	250,000.

Page 6 2019 **Federal Statements LUCY GOODING CHARITABLE FOUNDATION TRUST** 59-2891582 Statement 5 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year Found-Purpose of Donee ation Name and Address Relationship Status <u> Grant</u> Amount HEAD START 15,000. LUTHERAN SERVICES FLORIDA NONE PROGRAM SET UP 3027 San Diego Rd, Ellis Building Jacksonville FL 32207 Total \$ 4,655,180.