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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

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2019

OMB No. 1545-0052

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public

For	caler	ndar year 2019, or tax year beginning 01-01-20)19 , ar	nd ending 12-31	-2019	
		ındation		A Employer id	lentification numbe	er
HI	FOUND	ATION INC		65-0848161		
		f street (or P.O. box number if mail is not delivered to street address) ST OAKLAND PARK BOULEVARD	Room/suite	B Telephone nu	ımber (see instructio	ns)
2.	DTO LAS	OF CANDATA FAMIL DOOLE VAND		(954) 566-755	9	
		n, state or province, country, and ZIP or foreign postal code ERDALE, FL 33306		C If exemption	application is pendin	ig, check here
G Cł	neck al	l that apply: 🔲 Initial return 🔲 Initial return of a	former public charity	D 1. Foreign or	ganizations, check h	ere
		Final return Amended return			rganizations meeting	
		Address change Name change		<u> </u>	ck here and attach co	· · -
H Cł	neck ty	pe of organization: $lacksquare$ Section 501(c)(3) exempt private t	foundation		undation status was on 507(b)(1)(A), chec	
	Section	1 4947(a)(1) nonexempt charitable trust	e private foundation			
of	year (f	xet value of all assets at end from Part II, col. (c), ▶\$ 15,384,891 J Accounting method: □ Other (specify) (Part I, column (d) must	✓ Cash ☐ Accru		ation is in a 60-mont on 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Doyanya and	<u>'</u>		(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)				
	2	Check ▶ ☑ if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	1,526	1,526	5	
	4	Dividends and interest from securities	329,040	329,040)	
	5a	Gross rents				
	b	Net rental income or (loss)	565.056			
KIE	6a	Net gain or (loss) from sale of assets not on line 10	565,956			
Revenue	b	Gross sales price for all assets on line 6a 2,690,685				
æ	7	Capital gain net income (from Part IV, line 2)		565,956	5	
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less: Cost of goods sold				
	°					
	11	Other income (attach schedule)	906 533	806 E33		
	12	Total. Add lines 1 through 11	896,522	·		
	13 14	Compensation of officers, directors, trustees, etc. Other employee salaries and wages	0	C	,	
S	15	Pension plans, employee benefits				
ıse	16a	Legal fees (attach schedule)				
<u>B</u>	b	Accounting fees (attach schedule)	6,773	3,387	7	3,386
Administrative Expenses	c	Other professional fees (attach schedule)	9 54,418	54,418	3	C
iive	17	Interest				
tra	18	Taxes (attach schedule) (see instructions)	117,207	10,123	3	C
E S	19	Depreciation (attach schedule) and depletion				
들	20	Occupancy				
ĕ	21	Travel, conferences, and meetings				
anc	22	Printing and publications				
biu	23	Other expenses (attach schedule)	9 61	31		30
Operating and	24	Total operating and administrative expenses.				
be De		Add lines 13 through 23	178,459	67,959		3,416
ں	25	Contributions, gifts, grants paid	595,000			595,000
	26	Total expenses and disbursements. Add lines 24 and 25	773,459	67,959		598,416
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	123,063			
	b	Net investment income (if negative, enter -0-)	123,003	828,563	3	
	С	Adjusted net income (if negative, enter -0-)				

For	m 990-	PF (2019)			Page 2
Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year (a) Book Value	End o (b) Book Value	f year (c) Fair Market Value
_	1	Cash—non-interest-bearing	188,649	31,257	31,257
	2	Savings and temporary cash investments	248,885	382,609	382,609
	3	Accounts receivable ▶			<u>, , , , , , , , , , , , , , , , , , , </u>
		Less: allowance for doubtful accounts			
	4	Pledges receivable -			_
	· ·	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			_
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less: allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
e e	9	Prepaid expenses and deferred charges			
Assets	10a	Investments—U.S. and state government obligations (attach schedule)			
_	ь	Investments—corporate stock (attach schedule)	11,041,391	11,185,126	14,971,025
	c	Investments—corporate bonds (attach schedule)	11/0/11/051 25	11,100,120	11,571,025
	11	Investments—land, buildings, and equipment: basis ▶			
	* *	Less: accumulated depreciation (attach schedule)	-		
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis			
	**	Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
	•	instructions. Also, see page 1, item I)	11,478,925	11,598,992	15,384,891
	17	Accounts payable and accrued expenses		,,	
	18	Grants payable			
Se	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe)			
	23	Total liabilities(add lines 17 through 22)	0	0	
_					
or Fund Balances		Foundations that follow FASB ASC 958, check here ▶ □ and complete lines 24, 25, 29 and 30.			
Ē	24	Net assets without donor restrictions			
Ba	24	Net assets with donor restrictions			
Þ	25				
FE		Foundations that do not follow FASB ASC 958, check here			
ō		and complete lines 26 through 30.			
	26	Capital stock, trust principal, or current funds	0	0	
Assets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28	Retained earnings, accumulated income, endowment, or other funds	11,478,925	11,598,992	
Net	29	Total net assets or fund balances (see instructions)	11,478,925	11,598,992	
	30	Total liabilities and net assets/fund balances (see instructions) .	11,478,925	11,598,992	
	rt III	- 	20 (
1		al net assets or fund balances at beginning of year—Part II, column (a), lir ear figure reported on prior year's return)	ne 29 (must agree with end	⁻ ₁	11,478,925
2	•	er amount from Part I, line 27a		2	123,063
3		er increases not included in line 2 (itemize)		3	0
4		lines 1, 2, and 3		4	11,601,988
5		reases not included in line 2 (itemize)	~	5	2,996
6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)—Part II,	column (b), line 29 .	6	11,598,992

Page **3**

	e the kind(s) of property sold (e.g., rehouse; or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a PUBLICLY TRADED SECUE	Р				
b PUBLICLY TRADED SECUR	RITIES - LT		Р		
c CAPITAL GAINS DIVIDEN	os		Р		
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	h) r (loss)) minus (g)
a 920	0,686	proc snp	1,041,099	· · · · · ·	-120,413
b 1,520	<u>'</u>		1,083,630		437,358
	9,011		_,,		249,011
d	,				
e					
	showing gain in column (h) and ow	ned by the foundation	on 12/31/60	,	1)
(i) F.M.V. as of 12/31/69	(i) Adjusted basis as of 12/31/69	Excess	(k) s of col. (i) l. (j), if any	Gains (Col. (col. (k), but not	l) h) gain minus less than -0-) or om col.(h))
a					-120,413
b					437,358
С					249,011
d					
e					
	ain or (loss) as defined in sections : t I, line 8, column (c) (see instructi		,	3	565,956
	nder Section 4940(e) for Reivate foundations subject to the sec				
If section $4940(d)(2)$ applies, lea	-	celon 19 to(a) tax on th	se investment meen		_
if "Yes," the foundation does no	e section 4942 tax on the distributa t qualify under section 4940(e). Do	not complete this part			es 🔽 No
	ount in each column for each year;	see instructions before	making any entrie		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	ole-use assets	(d) Distribution rat (col. (b) divided by c	
2018	550,033		13,079,605		0.042053
2017	472,083		11,832,080		0.039899
2016	442,830		9,315,873		0.047535
2015	386,551		8,707,079		0.044395
2014	323,030		8,449,781		0.038229
2 Total of line 1, column (d	•		2		0.212111
number of years the found	for the 5-year base period—divide dation has been in existence if less acharitable-use assets for 2019 fron	than 5 years			0.042422 14,163,002
5 Multiply line 4 by line 3		,	5		600,823
' '	nt income (1% of Part I, line 27b)		6		8,286
			7		609,109
8 Enter qualifying distribution			8		
	ater than line 7 , check the box in Parameter $\frac{1}{2}$	art VI, line 1b, and con		I g a 1% tax rate. Se	598,416 e the Part VI

	990-F1 (2019)		- 4-20.14	— • • • • • • • • • • • • • • • • • • •	,		P	age (
श्च		ing Activities for Which	Form 4720 May Be	Required (continued)	<i>)</i>			
ā	During the year did the foundation p	·					Yes	No
	(1) Carry on propaganda, or otherw	ise attempt to influence legisl	ation (section 4945(e))?	☐ Yes ि	✓ No			
	(2) Influence the outcome of any sp	ecific public election (see sect	tion 4955); or to carry					
	on, directly or indirectly, any vot	er registration drive?		· · 🗌 Yes 🛭	✓ No			
	(3) Provide a grant to an individual	for travel, study, or other sim	ilar purposes?	☐ Yes ☐	▼ No			
	(4) Provide a grant to an organization	on other than a charitable, etc	, organization described		<u> </u>			
	in section 4945(d)(4)(A)? See in	structions		· · □ v [✓ No			
	(5) Provide for any purpose other th	an religious, charitable, scien	tific, literary, or	· · L Yes	⊻ No			
	educational purposes, or for the	prevention of cruelty to childr	en or animals?					
b	If any answer is "Yes" to $5a(1)-(5)$,	•		Ceptions described in	⊻ No			
	Regulations section 53.4945 or in a	•		•		5b		
	Organizations relying on a current no			_	t			
_	If the answer is "Yes" to question 5a				ШΙ			
	tax because it maintained expenditu	• • •	•		_			
	If "Yes," attach the statement requir			' '	_ No			
	•	· -						
ìа	Did the foundation, during the year,	, , ,						
	a personal benefit contract?			⊔ Yes D	✓ No			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be	nefit contract?		6b		No
	If "Yes" to 6b, file Form 8870.							
'a	At any time during the tax year, was	the foundation a party to a p	prohibited tax shelter tra	nsaction? Yes	✓ No			
b	If "Yes", did the foundation receive a	any proceeds or have any net	income attributable to the			7b		
3	Is the foundation subject to the sect	ion 4960 tax on payment(s) o	of more than \$1,000,000	in remuneration or				
	excess parachute payment during th	e year?		· · 🗌 Yes	√ N° [
	Information About O	fficers, Directors, Trust	tees. Foundation Ma			ees.		
Pai	t VIIII and Contractors	, 2,	,		,	,,		
1	List all officers, directors, trustee	s. foundation managers ar	nd their compensation	See instructions				
	List an officers, an ectors, trustee	(b) Title, and average	(c) Compensation (If	(d) Contributions to	1,,	_		
	(a) Name and address	hours per week	not paid, enter	employee benefit plans a			ise acci	
		devoted to position	-0-)	deferred compensation	י ו	iller ai	lowanic	.63
ee A	Additional Data Table							
2	Compensation of five highest-pai	d employees (other than t	l hose included on line :	l—see instructions). If ⊢	none, er	ter "l	NONE.	71
	, , ,			(d) Contributions to	1			
a)	Name and address of each employee [paid (b) Title, and average hours per week	(c) Compensation	employee benefit			se acco	
	more than \$50,000	devoted to position	(c) compensation	plans and deferred	otl	ner all	owance	es
				compensation				
ONI	<u> </u>							
					\perp			
nt2	I number of other employees paid ove	r \$50 000.						
Jid	Hamber of other employees paid over				Farr	~ QQ(0-PF (2010
					LOL	□ プラし	5-PF (Z019

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional servic	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produ		r of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see i	nstructions)	
Describe the two largest program-related investments made by the foundation during the	<u> </u>	Amount
1	,	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		• o
Total Add Mico Landagn 5		Form 990-PF (2019)

3

4

5

6

7

1a

1b

2

3a 3b

4

5

691,579

691.579

691.579

598,416

598,416

598.416

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Distributable amount before adjustments. Subtract line 2c from line 1.

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

3

4 5

6

1

2

3

4

5

b

Part XII

16,660

674,919

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rt	ΧI	•	

O-PF	(20)1	9)	
77.11	Į		•		

a From 2014. **b** From 2015. c From 2016. . . d From 2017. e From 2018.

Form 990-PF (2019)						
Part XIII	Und					

Form 990-PF (2019)						
Part XIII	Undistributed Income (see instruction	าร)				

1 Distributable amount for 2019 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2019:

f Total of lines 3a through e. 4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ a Applied to 2018, but not more than line 2a

b Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

d Applied to 2019 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a).)

5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract 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. **d** Subtract line 6c from line 6b. Taxable amount —see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020

6 Enter the net total of each column as

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) 8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a

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. . .

indicated below:

a Enter amount for 2018 only. **b** Total for prior years: 20______, 20______ 3 Excess distributions carryover, if any, to 2019:

(a)

Corpus

0

(b)

Years prior to 2018

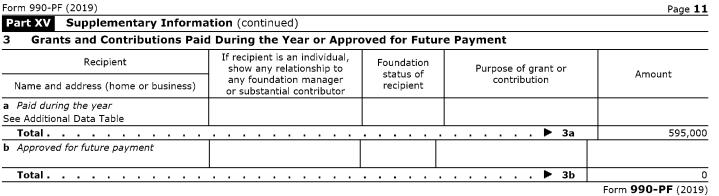
(c)

2018

581,756

NONE

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	Part XIV Private Operating Found	lations (see instr	uctions and Part V	/II-A, question 9)			
1a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling						
b	Check box to indicate whether the organizat	tion is a private oper	ating foundation des	cribed in section \Box] 4942(j)(3) or □] 4942(j)(5)	
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Tabal	
	income from Part I or the minimum investment return from Part X for each	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total	
ь	year listed						
	Qualifying distributions from Part XII, line 4 for each year listed.						
	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:						
а							
	(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							
	(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) (3) Largest amount of support from an exempt organization						
	(4) Gross investment income						
_	Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more i	in	
Ŀċ	assets at any time during th	ne year—see inst					
1 a	Information Regarding Foundation Man List any managers of the foundation who ha before the close of any tax year (but only if	ve contributed more				n	
ь	List any managers of the foundation who ow ownership of a partnership or other entity)	n 10% or more of th	e stock of a corpora	tion (or an equally l			
2	Information Regarding Contribution, G						
	Check here ▶ ☐ if the foundation only mal unsolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, a	ation makes gifts, gr	ants, etc. to individu				
a	The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: MS LUCIE SMITH 2848 E OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306 (954) 566-7559						
b	The form in which applications should be su LETTER OF REQUEST	bmitted and informa	tion and materials th	ney should include:			
С	: Any submission deadlines: NONE						
d	Any restrictions or limitations on awards, su factors:	ıch as by geographic	al areas, charitable f	fields, kinds of instit	utions, or other		



ter gros	s amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
-	n service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
g Fees	and contracts from government agencies					
Memb	ership dues and assessments					
Intere invest	st on savings and temporary cash ments			14	1,526	
Divide	nds and interest from securities			14	329,040	
Net re	ntal income or (loss) from real estate:					
	-financed property					
	debt-financed property					
	ntal income or (loss) from personal property investment income.					
	r (loss) from sales of assets other than					
invent	• •			18	565,956	
Net in	come or (loss) from special events:			10	300/300	
	profit or (loss) from sales of inventory					
Other	revenue: a					
b						
	hal 6 d d				206 522	
			0	15	896,522	
Subto Total .			0	13	896,522 3	
Subto Total. (See w	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th	lations.) le Accomplisi	nment of Exem	pt Purposes	3	
Subto Total. (See wart XV	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	896,522
Subto Total. (See wart XV	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	
Subto Total. (See wart XV ne No.	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	
Subto Total. (See wart XV	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	
Subto Total. (See wart XV	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	
Subto Total. (See wirt XV) 1e No.	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	
Subto Total. (See w Int XV 1e No.	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	
Subto Total. (See w Int XV 1e No.	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	
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Subto Total. (See wart XV	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	
Subto Total. (See wart XV	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	
Subto Total. (See w Int XV 1e No.	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	
Subto Total. (See work XV) ne No.	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	
Subto Total. (See work XV) ne No.	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	
Subto Total. (See wirt XV) 1e No.	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	
Subto Total. (See wirt XV) 1e No.	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	
Subto Total. (See wort XV) Le No.	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	
Subto Total. (See wart XV	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	
Subto Total. (See wart XV	tal. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ted importantly to	

Form 990-PF (2019)		Pa	ge 13
Part XVII Information Regarding Transfers To and Transactions and Relationships With Non Exempt Organizations	charitable		
1 Did the organization directly or indirectly engage in any of the following with any other organization described in sectio (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?	n 501	Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of:			
(1) Cash	. 1a(1)		No
(2) Other assets	. 1a(2)		No
b Other transactions:			
(1) Sales of assets to a noncharitable exempt organization	. 1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	. 1b(2)		No
(3) Rental of facilities, equipment, or other assets	. 1b(3)		No
(4) Reimbursement arrangements	. 1b(4)		No
(5) Loans or loan guarantees	. 1b(5)		No
(6) Performance of services or membership or fundraising solicitations	. 1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	. 1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair m of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair mark in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.	et value		
(a) Line No. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions,	and sharing arra	ngemer	nts

(a) Line No.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		İ	

described in section 501(c) (other than section 501(c)(3)) or in section 527? 🗖 Yes 💆 No						
b If "Yes," complete the following schedule.						
(a) Name of organization	(b) Type of organization	(c) Description of relationship				

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. May the IRS discuss this 2020-07-13 return with the preparer shown

Pai	d	
Pre	epar	
Use	e Or	1

Sign Here Signature of officer or trustee Title Date (see instr.) 🗹 Yes 🗆 No PTIN Print/Type preparer's name Preparer's Signature Date Check if self-P01204534 employed ▶ 🔲 JULIANA KREUL er Firm's name ▶ RSM US LLP Firm's EIN ▶42-0714325 ıly 7351 OFFICE PARK PL Firm's address ▶ Phone no. (321) 751-6200 MELBOURNE, FL 329408229

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, not paid, enter Contributions to (e) other allowances hours per week (b) devoted to position employee benefit plans -0-) and deferred

			compensation	
RICHARD S INGHAM JR	DIRECTOR	0	0	0
2848 E OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306	1.00			

TORT EAGDERBALE, TE 33300				
TIMOTHY C INGHAM	DIRECTOR	0	0	0
2848 E OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306	1.00			
ANNELLE I CARNEY	DIDECTOR			

FORT LAUDERDALE, FL 33306				
ANNELLE I CARNEY	DIRECTOR	0	0	0
2848 E OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306	1.00			
HILARY I HICKMAN	DIRECTOR	0	0	0

ANNELLE I CARNEY	DIRECTOR	0	0	0
2848 E OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306	1.00			
HILARY I HICKMAN	DIRECTOR	0	0	0
2848 E OAKLAND PARK BLVD	1.00			

2848 E OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306	1.00			
HILARY I HICKMAN	DIRECTOR	0	0	0
2848 E OAKLAND PARK BLVD	1.00			

O. () D.				
HILARY I HICKMAN	DIRECTOR	0	0	0
2848 E OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306	1.00			

	17717	· ·		
2848 E OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306	1.00			
SHARON I HORAL	DIRECTOR	0	0	0

FORT LAUDERDALE, FL 33306				
SHARON I HORAL	DIRECTOR	0	0	
2848 E OAKLAND PARK BLVD	1.00			

FORT LAUDERDALE, FL 33306

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMERICAN CANCER SOCIETY NONE PC FOR CANCER RESEARCH. 25,000 PO BOX 13600 EDUCATION, ADVOCACY, AND SERVICE TAMPA, FL 33681

AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVE DALLAS, TX 75231	NONE	PC	TO BUILD HEALTHER LIVES FREE OF CARDIOVASCULAR DISEASES AND STROKE	5,000
AMERICAN RED CROSS SOUTH FLORIDABROWARD COUNTY 6710 W SUNRISE BOULEVARD PLANTATION, FL 33313	NONE	PC	TO PROVIDE DISASTER RELIEF AT HOME AND ABROAD, CPR CERTIFICATION AND FIRST AID COURSES, AND EMERGENCY	30,000

DALLAS, IX 75231			AND STROKE	
AMERICAN RED CROSS SOUTH FLORIDABROWARD COUNTY 6710 W SUNRISE BOULEVARD PLANTATION, FL 33313	NONE	PC	TO PROVIDE DISASTER RELIEF AT HOME AND ABROAD, CPR CERTIFICATION AND FIRST AID COURSES, AND EMERGENCY PREPAREDNESS	30,000

Total .

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Foundation Purpose of grant or Recipient If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMERICAN RED CROSS-PALM BEACH NONE PC TO PROVIDE DISASTER RELIEF 3,000 COUNTY RELIEF AT HOME AND ABOARD, CPR 825 FERN STREET CERTIFICATION AND FIRST AID

WEST PALM BEACH, FL 33401			COURSES, AND EMERGENCY PREPAREDNESS	
ANC TRANSYLVANIA COMMUNITY HOSPITAL INC 400 RIDGEFIELD COURT SUITE 100 ASHEVILLE, NC 28806	NONE	PC	TO PROVIDE MEDICAL CARE AND HELP THE LOCAL HOSPITAL MAINTAIN, EXPAND, AND IMPROVE QUALITY HEALTH CARE	1,000
AUTISM RESEARCH INSTITUTE 4182 ADAMS AVENUE	NONE	PC	TO HELP INDIVIDUALS WITH AUTISM SPECTRUM DISORDERS	5,000

AND TO ADVANCE AUTISM

▶ 3a

595,000

RESEARCH

SAN DIEGO, CA 92116

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

BLANK PARK ZOO FOUNDATION 7401 SW 9TH STREET DES MOINES, IA 50315	NONE	PC	TO ENHANCE QUALITY OF LIFE IN IOWA AS AN AFFORDABLE DESTINATION AND AS A CENTER FOR EDUCATION AND ENDANGERED SPECIES CONSERVATION.	10,000
BOCA HELPING HANDS	NONE	PC	TO PROVIDE FOOD AND	500

BOCA HELPING HANDS 138 NW 16TH STREET BOCA RATON, FL 33432	NONE	PC	TO PROVIDE FOOD AND EMERGENCY ASSISTANCE TO MEET BASIC HUMAN NEEDS AND LONG TERM SOLUTIONS TO BREAK THE CYCLE OF DEPENDENCE	500
BONNET HOUSE900 N BIRCH ROAD FORT LAUDERDALE, FL 33304	NONE	PC	TO PROVIDE SUPPORT TO THE HISTORICAL MUSEUM FOR	10,000

BOCA RATON, FL 33432			MEET BASIC HUMAN NEEDS AND LONG TERM SOLUTIONS TO BREAK THE CYCLE OF DEPENDENCE	
BONNET HOUSE900 N BIRCH ROAD FORT LAUDERDALE, FL 33304	NONE	PC	TO PROVIDE SUPPORT TO THE HISTORICAL MUSEUM FOR PRESERVATIONS AND THE	10,00

			DEPENDENCE	
BONNET HOUSE900 N BIRCH ROAD FORT LAUDERDALE, FL 33304	NONE	PC	TO PROVIDE SUPPORT TO THE HISTORICAL MUSEUM FOR PRESERVATIONS AND THE MAINTENANCE AND OPERATIONS	10,000

BONNET HOUSE900 N BIRCH ROAD FORT LAUDERDALE, FL 33304	NONE	PC	TO PROVIDE SUPPORT TO THE HISTORICAL MUSEUM FOR PRESERVATIONS AND THE	10,0
			MAINTENANCE AND	
			OPERATIONS	

,		PRESERVATIONS AND THE	
		MAINTENANCE AND	
		OPERATIONS	

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595,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
BREVARD MUSIC CENTERPO BOX 312 BREVARD, NC 28712	NONE	PC	TO PROVIDE SUPPORT TO YOUNG MUSICIANS TO PREPARE AND PERFORM GREAT MUSICAL WORKS AT A HIGH ARTISTIC LEVEL.	1,500
BRIGHTFOCUS FOUNDATION - MACULAR DEGENERATION RESEARCH 22512 GATEWAY CENTER DRIVE CLARKSBURG, MD 20871	NONE	PC	TO SUPPORT SCIENTIFIC RESEARCH FOR THE PREVENTION, TREATMENT, AND CURE OF MACULAR DENEGERATION	10,000
BROWARD PARTNERSHIP FOR THE HOMELESS 920 NW 7TH AVENUE	NONE	PC	TO PROVIDE SUPPORT FOR THE HOMELESS PEOPLE EXPERIENCING HOMELESSNESS WITH A TEMPORARY PLACE TO	5,000

22512 GATEWAY CENTER DRIVE CLARKSBURG, MD 20871			PREVENTION, TREATMENT, AND CURE OF MACULAR DENEGERATION	
BROWARD PARTNERSHIP FOR THE HOMELESS 920 NW 7TH AVENUE FORT LAUDERDALE, FL 33311	NONE	PC	TO PROVIDE SUPPORT FOR THE HOMELESS PEOPLE EXPERIENCING HOMELESSNESS WITH A TEMPORARY PLACE TO STAY	5,000

595,000

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Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **BROWARD PERFORMING ARTS** NONE PC TO PROVIDE SUPPORT TO THE 20,000 **EQUINDATION** DROWARD CENTER FOR

201 SW FIFTH AVENUE FORT LAUDERDALE, FL 33312			PERFORMING ARTS	
BROWARD PUBLIC LIBRARY FOUNDATION 100 S ANDREWS AVE	NONE	PC	TO PROVIDE EDUCATIONAL RESOURCES	25,000

FOUNDATION 100 S ANDREWS AVE FORT LAUDERDALE, FL 33301			RESOURCES	
CHILDREN'S HOME SOCIETY OF FLORIDA 482 SOUTH KELLER ROAD ORLANDO, FL 32810	NONE	PC	TO PROTECT AND HEAL CHILDREN WITHIN THE COMMUNITIES OF FLORIDA	5,000

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595,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or husiness)

Total .

COVENANT HOUSE FLORIDA	NONE	DC.	TO PROVIDE SHELTER TO THE	10.000
a Paid during the year				
Name and address (name of business)	or substantial contributor			

733 BREAKERS AVENUE FORT LAUDERDALE, FL 33304	NONE	,	HOMELESS YOUTH ACROSS AMERICA	10,000
DOCTORS WITHOUT BORDERS 40 RECTOR STREET 16TH FLOOR	NONE		TO PROVIDE HEALTH CARE AND MEDICAL TRAINING TO	15,000

DOCTORS WITHOUT BORDERS 40 RECTOR STREET 16TH FLOOR NEW YORK, NY 10006	NONE	PC	TO PROVIDE HEALTH CARE AND MEDICAL TRAINING TO MULTIPLE COUNTRIES	15,000
EAGLE RANCH FOUNDATION INC PO BOX 7200 CHESTNUT MOUNTAIN GA 30502	NONE	PC	TO PROVIDE A CHRIST- CENTERED CHILDREN'S HOME FOR BOYS AND GIRLS IN CRISIS	3,000

40 RECTOR STREET 16TH FLOOR NEW YORK, NY 10006			MEDICAL TRAINING TO MULTIPLE COUNTRIES	,
EAGLE RANCH FOUNDATION INC PO BOX 7200 CHESTNUT MOUNTAIN, GA 30502	NONE	PC	TO PROVIDE A CHRIST- CENTERED CHILDREN'S HOME FOR BOYS AND GIRLS IN CRISIS	3,000
				í

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
FEEDING SOUTH FLORIDA 2501 SW 32 TERRACE PEMBROKE PARK, FL 33023	NONE	PC	TO HELP END HUNGER IN SOUTH FLORIDA BY PROVIDING IMMEDIATE ACCESS TO NUTRITIOUS FOOD AND LEADING HUNGER AND POVERTY ADVOCACY EFFORTS.	16,000
FLAMINGO GARDENS 3750 S FLAMINGO RD DAVIE, FL 33330	NONE	PC	TO PROVIDE SUPPORT TO DEPICT, PRESERVE, AND EDUCATE THE PUBLIC ABOUT THE NATURAL AND CULTURAL HERITAGE OF SOUTH FLORIDA AND THE EVERGLADES IN OUR BOTANICAL GARDENS AND WILDLIFE SANCTUARY	5,000
FLORENCE FULLER CHILD DEVELOPMENT 200 NE 14TH STREET BOCA RATON, FL 33432	NONE	PC	TO SUPPORT THE ORGANIZATION'S MISSION OF PROVIDING CHILDREN A PATHWAY OUT OF POVERTY	5,000

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595,000

Total . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or Recipient Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FLORIDA ATLANTIC UNIVERSITY NONE PC TO PREPARE STUDENTS FOR 5,000 FOUNDATION INC CAREERS IN BANKING, GOVERNMENT, DATA ANALYSIS, 777 GLADES ROAD BOCA RATON, FL 33431 TEACHING AND ADVANCED GRADUATE OR DOCTORAL

			WORK	
FRIENDS OF BIRCH STATE PARK 3020 NE 32ND AVE FORT LAUDERDALE, FL 33308	NONE	PC	TO HELP PRESERVE, CONSERVE, ENHANCE AND PROMOTE HUGH TAYLOR BIRCH STATE PARK THROUGH COMMUNITY SUPPORT	15,000
FUNDING ARTS BROWARD	NONE	PC	TO PRESERVE AND CULTIVATE	20,000

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595,000

3020 NE 32ND AVE FORT LAUDERDALE, FL 33308			ENHANCE AND PROMOTE HUGH TAYLOR BIRCH STATE PARK THROUGH COMMUNITY SUPPORT	
FUNDING ARTS BROWARD 1350 E SUNRISE BLVD STE 120	NONE	PC	TO PRESERVE AND CULTIVATE THE ARTS IN BROWARD COUNTY	20,00

FORT LAUDERDALE, FL 33308			TAYLOR BIRCH STATE PARK THROUGH COMMUNITY SUPPORT	
FUNDING ARTS BROWARD 1350 E SUNRISE BLVD STE 120 FORT LAUDERDALE, FL 33304	NONE	PC	TO PRESERVE AND CULTIVATE THE ARTS IN BROWARD COUNTY	20,0

Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CTUDA'S CLUB COUTH FLORIDA NONE TO CREATE WELCOMING E 000

119 ROSE DRIVE FORT LAUDERDALE, FL 33316	NONE	PC	COMMUNITIES OF FREE SUPPORT FOR EVERYONE LIVING WITH CANCER	5,000
GOLD COAST JAZZ SOCIETY 1350 E SUNRISE BOULEVARD FORT LAUDERDALE, FL 33304	NONE	PC	TO PRESERVE JAZZ MUSIC WITH AN ANNUAL CONCERT SEASON IN FORT LAUDERDALE, FL AND	25,000

FORT LAUDERDALE, FL 33304			AN ANNUAL CONCERT SEASON IN FORT LAUDERDALE, FL AND VARIOUS EVENTS TO CELEBRATE JAZZ	
HEIFER INTERNATIONAL ONE WORLD AVENUE LITTLE ROCK, AR 72202	NONE	PC	TO HELP TO END WORLD HUNGER	1,500

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HENDERSON BEHAVIORAL HEALTH INC. NONE PC TO PROVIDE HELP TO ALL 5,000 4740 NORTH STATE ROAD 7 STE 201 PEOPLE ACROSS SOUTH LAUD LAKES, FL 33319 FLORIDA INCLUDED SUPPORTIVE HOUSING.

PC

TO PROVIDE EXCELLENT

PERSONALIZED CARE

MEDICAL CARE AND HIGH

■ 3a

10,000

10,000

595,000

			PERMANENT HOUSING FOR THOSE WITH CO-OCCURRING SUBSTANCE ABUSE AND MENTAL HEALTH, AND EMERGENCY HOMELESS SHELTER
HOLLYWOOD ART AND CULTURE CENTER INC 1650 HARRISON STREET HOLLYWOOD, FL 33020	NONE	PC	TO FOSTER A CREATIVE ENVIRONMENT WHERE NEW AND CHALLENGING WORK CAN FLOURISH

NONE

HOLY CROSS HOSPITAL

Total . .

4725 N FEDERAL HIGHWAY

FORT LAUDERDALE, FL 33308

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Amount Purpose of grant or contribution

Purpose of grant or contribution

recipient

Amount

PC

TO PARTNER WITH CHRISTIAN

5,000

595,000

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

NONE

HOPE SOUTH FLORIDA

FORT LAUDERDALE, FL 33308			PROVIDE HOUSING, MENTORING, AND ONE-STOP SERVICE CENTERS FOR BROKEN FAMILIES	
JOE DIMAGGIO CHILDREN'S HOSPITAL FOUNDATION 3329 JOHNSON ST	NONE	PC	TO PROVIDE A COMPREHENSIVE SCOPE OF HEALTHCARE SERVICES TO CHILDREN	5,000

FOUNDATION 3329 JOHNSON ST HOLLYWOOD, FL 33021			SCOPE OF HEALTHCARE SERVICES TO CHILDREN	
KIDS IN DISTRESS INC 819 NE 26TH STREET WILTON MANOR, FL 33305	NONE	PC	TO PREVENT CHILD ABUSE, PRESERVE THE FAMILY, AND TREAT CHILDREN WHO HAVE BEEN ABUSED AND NEGLECTED	10,000

orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
MAKE A WISH FOUNDATION OF SOUTHERN FLORIDA 4491 SOUTH STATE ROAD 7 201 FORT LAUDERDALE, FL 33314	NONE	PC	TO GRANT THE WISH OF A CHILD DIAGNOSED WITH A LIFE-THREATENING MEDICAL CONDITION IN THE UNITED STATES	500
MOFFITT CANCER CENTER FOUNDATION 12902 MAGNOLIA DRIVE TAMPA, FL 33612	NONE	PC	TO PREVENT AND CURE CANCER, CARE FOR PATIENTS, AND PROVIDE EDUCATION AND CONDUCT CANCER RESEARCH	15,000
MUSEUM OF DISCOVERY AND SCIENCE 401 SW 2ND STREET	NONE	PC	TO PROVIDE EXPERIENTIAL PATHWAYS TO LIFELONG	10,000

			STATES	
MOFFITT CANCER CENTER FOUNDATION 12902 MAGNOLIA DRIVE TAMPA, FL 33612	NONE	PC	TO PREVENT AND CURE CANCER, CARE FOR PATIENTS, AND PROVIDE EDUCATION AND CONDUCT CANCER RESEARCH	15,00
MUSEUM OF DISCOVERY AND SCIENCE 401 SW 2ND STREET FORT LAUDERDALE, FL 33312	NONE	PC	TO PROVIDE EXPERIENTIAL PATHWAYS TO LIFELONG LEARNING IN SCIENCE FOR	10,00

CHILDREN AND ADULTS

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)		recipient		
a Paid during the year				
MUSICIANS UNITED TO SERVE THE YOUTH OF CHARLOTTESVILLE 105 RIDGE STREET CHARLOTTESVILLE, VA 22902	NONE	PC	TO CREATE A SENSE OF EMPOWERMENT AND ACCOMPLISHMENT THROUGH RECORDING AND PERFORMING ARTS	5,000
PINE CREST PREPATORY SCHOOL INC 1501 NE 62ND STREET FORT LAUDERDALE, FL 33334	NONE	PC	TO OFFER A CHALLENGING ACADEMIC EXPERIENCE COMPLEMENTED BY EXCELLENCE IN THE ARTS AND ATHLETICS	50,000
PLANNED PARENTHOOD	NONE	PC	TO PROVIDE COMPREHENSIVE	15,000

			AKIS	
PINE CREST PREPATORY SCHOOL INC 1501 NE 62ND STREET FORT LAUDERDALE, FL 33334	NONE	PC	TO OFFER A CHALLENGING ACADEMIC EXPERIENCE COMPLEMENTED BY EXCELLENCE IN THE ARTS AND ATHLETICS	50,00
PLANNED PARENTHOOD	NONE	PC	TO PROVIDE COMPREHENSIVE	15,00

585 NW 161ST STREET 2ND FLOOR

REPRODUCTIVE AND

COMPLEMENTARY HEALTH CARE SERVICES

MIAMI, FL 33169 595,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PRISON BOOK PROJECT NONE PC PURCHASE BOOKS TO SEND TO 1,000 3880 S WASHINGTON AVE SUITE 154 PRISONS WITH ONE VISION IN

MIND TO TOUCH LIVES BEHIND

▶ 3a

5,500

595,000

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

,			BARS	
RONALD MCDONALD HOUSE CHARITIES OF CHICAGOLAND AND NORTHWEST INDIANA 1301 WEST 22ND STREET SUITE 905 OAKBROOK, IL 60523	NONE	PC	TO CREATE, FIND, AND SUPPORT PROGRAMS THAT DIRECTLY IMPROVE THE HEALTH AND WELL-BEING OF CHILDREN	
SEAFARERS' HOUSE PORT EVERGLADES	NONE	PC	TO OFFER REFUGE, RESOURCES,	

TITUSVILLE, FL 32959

OAKBROOK, IL 60523			AND WELL-BEING OF CHILDREN	
SEAFARERS' HOUSE PORT EVERGLADES 2550 EISENHOWER BLVD SUITE 207 PORT EVERGLADES, FL 33316	NONE	PC	TO OFFER REFUGE, RESOURCES, RENEWAL AND RESPECT TO THE MARITIME COMMUNITY THROUGH MULTI-FAITH	5,000

OAKBROOK, IL 60523				
SEAFARERS' HOUSE PORT EVERGLADES 2550 EISENHOWER BLVD SUITE 207 PORT EVERGLADES, FL 33316	NONE	PC	TO OFFER REFUGE, RESOURCES, RENEWAL AND RESPECT TO THE MARITIME COMMUNITY THROUGH MULTI-FAITH SERVICE	5,00

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
SHERIDAN HOUSE FAMILY MINISTRIES 1700 S FLAMINGO ROAD	NONE	PC	TO HONOR CHRIST BY SERVING THE NEEDS OF CHILDREN AND	10,000

DAVIE, FL 33325			FAMILIES	
SHRINER'S HOSPITAL FOR CHILDREN 2900 N ROCKY POINT DR TAMPA, FL 33607	NONE	PC	TO PROVIDE SPECIALIZED CARE TO CHILDREN WITH ORTHOPAEDIC CONDITIONS	6,000

SHRINER'S HOSPITAL FOR CHILDREN 2900 N ROCKY POINT DR TAMPA, FL 33607	NONE	PC	TO PROVIDE SPECIALIZED CARE TO CHILDREN WITH ORTHOPAEDIC CONDITIONS	6,000
SOS CHILDREN'S VILLAGES - FLORIDA 3681 NW 59TH PLACE	NONE	PC	TO PROVIDE FOSTER CARE SERVICES TO MORE THAN 70	10,000

2900 N ROCKY POINT DR TAMPA, FL 33607			TO CHILDREN WITH ORTHOPAEDIC CONDITIONS	ŕ
SOS CHILDREN'S VILLAGES - FLORIDA 3681 NW 59TH PLACE COCONUT CREEK, FL 33073	NONE	PC	TO PROVIDE FOSTER CARE SERVICES TO MORE THAN 70 FOSTER CHILDREN	10,000

TAMPA, FL 33607			ORTHOPAEDIC CONDITIONS	
SOS CHILDREN'S VILLAGES - FLORIDA 3681 NW 59TH PLACE COCONUT CREEK, FL 33073	NONE	PC	TO PROVIDE FOSTER CARE SERVICES TO MORE THAN 70 FOSTER CHILDREN	10,000
Total			▶ 3a	595,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SOUTHEASTERN GUIDE DOGS NONE PC TO CREATE AND NURTURE A 1,000

4210 77TH STREET EAST

PALMETTO, FL 34221			VISUALLY IMPARED INDIVIDUAL AND A GUIDE DOG	
SPANISH RIVER COMMUNITY HIGH SCHOOL 5100 JOG ROAD	NONE	PC	TO PROVIDE SECONDARY EDUCATION TO THOSE IN THE BOCA RATON AND DELRAY	3,000

SCHOOL 5100 JOG ROAD BOCA RATON, FL 33496			EDUCATION TO THOSE IN THE BOCA RATON AND DELRAY BEACH COMMUNITIES	2,222
ST JUDE CHILDREN'S RESEARCH HOSPITAL PO BOX 50 MEMPHIS, TN 38101	NONE	PC	TO FIND CURES AND SAVE CHILDREN WITH PEDIATRIC CANCER AND OTHER DISEASES	27,000

DADTNEDCHID BETWEEN A

Total		 ▶ 3a	595,000
ST JUDE CHILDREN'S RESEARCH HOSPITAL PO BOX 50 MEMPHIS,TN 38101	NONE	TO FIND CURES AND SAVE CHILDREN WITH PEDIATRIC CANCER AND OTHER DISEASES	27,000
BOCA RATON, FL 33496		BEACH COMMUNITIES	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year STETSON UNIVERSITY NONE PC TO PROVIDE POST-SECONDARY 3,000 421 NORTH WOODLAND BLVD **EDUCATION**

DELAND, FL 32723				
SYMPHONY OF THE AMERICAS 2300 E OAKLAND PARK BLVD STUDIO 306 FORT LAUDERDALE, FL 33306	NONE	PC	TO IMPROVE THE LIVES OF CHILDREN THROUGH THE MAGIC OF MUSICAL INVESTIGATIONS	15,000
TAYLORS CLOSET FOUNDATION INC 1227 NE 8TH AVE FORT LAUDERDALE, FL 33304	NONE	PC	TO CREATE A COMMUNITY IN WHICH GIRLS IN NEED WILL BE EMPOWERED TO BREAK THE	10,000

Total			▶ 3a	595,000
TAYLORS CLOSET FOUNDATION INC 1227 NE 8TH AVE FORT LAUDERDALE, FL 33304	NONE	PC	TO CREATE A COMMUNITY IN WHICH GIRLS IN NEED WILL BE EMPOWERED TO BREAK THE CYCLE OF ABUSE AND NEGLET	10,000
FORT LAUDERDALE, FL 33306				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year TERRACE HILL PARTNERSHIP NONE PC TO PRESERVE AND ENHANCE 5,000 2300 GRAND AVENUE THE PROPERTY AND PROGRAMS DES MOINES, IA 50312 OF TERRACE HILL

THE BOYS AND GIRLS CLUBS OF BROWARD COUNTY 877 NW 61ST STREET FORT LAUDERDALE, FL 33309	NONE	PC	TO GIVE LOCAL BOYS AND GIRLS A POSITIVE ALTERNATIVE TO THE STREETS	10,000
THE BOYS AND GIRLS CLUBS OF PALM	NONE	PC	TO GIVE LOCAL BOYS AND	1,000

За

595,000

877 NW 61ST STREET FORT LAUDERDALE, FL 33309			TO THE STREETS	
THE BOYS AND GIRLS CLUBS OF PALM BEACH COUNTY 800 NORTHPOINT PARKWAY STE 204 WEST PALM BEACH EL 33407	NONE	PC	TO GIVE LOCAL BOYS AND GIRLS A POSITIVE ALTERNATIVE TO THE STREETS	1,00

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
THE SALVATION ARMY 1445 W BROWARD BOULEVARD FORT LAUDERDALE, FL 33312	NONE	PC	TO PREACH THE GOSPEL OF JESUS CHRIST AND TO MEET HUMAN NEEDS IN HIS NAME	10,500
UNITED WAY OF BROWARD 1300 SOUTH ANDREWS AVENUE	NONE	PC	TO FOCUS AND UNITE OUR ENTIRE COMMUNITY TO CREATE	10,000

UNITED WAY OF BROWARD 1300 SOUTH ANDREWS AVENUE FORT LAUDERDALE, FL 33316	NONE	PC	TO FOCUS AND UNITE OUR ENTIRE COMMUNITY TO CREATE SIGNIFCANT LASTING CHANGE IN THE COMMUNTITY	10,000
USO 2111 WILSON BOULEVARD SUITE 1200	NONE	PC	TO HELP PROVIDE A HOME AWAY FROM HOME FROM OUR	5,000

FORT LAUDERDALE, FL 33316			SIGNIFCANT LASTING CHANGE IN THE COMMUNTITY	
USO 2111 WILSON BOULEVARD SUITE 1200 ARLINGTON, VA 22201	NONE	PC	TO HELP PROVIDE A HOME AWAY FROM HOME FROM OUR TROOPS	5,000

			IN THE COMMUNTITY	
USO 2111 WILSON BOULEVARD SUITE 1200 ARLINGTON, VA 22201	NONE	PC	TO HELP PROVIDE A HOME AWAY FROM HOME FROM OUR TROOPS	5,000
Total			▶ 3a	595,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

WEDGEWOOD CHRISTIAN SERVICES 3300 36TH ST SE GRAND RAPIDS, MI 495180007	NONE	PC	TO PROVIDE PROFESSIONAL COUNSELING TO CHILDREN, YOUTH AND FAMILIES WITH THE PROBLEMS THEY ARE FACING	5,000
WOMEN IN DISTRESSPO BOX 676	NONE	PC	TO STOP DOMESTIC VIOLENCE	25,000

WOMEN IN DISTRESSPO BOX 676 FORT LAUDERDALE, FL 33302	NONE	PC	TO STOP DOMESTIC VIOLENCE FOR EVERYONE THROUGH INTERVENTION, EDUCATION, AND ADVOCACY	25,000
WORLD VISION 34834 WEYERHAEUSER WAY S FEDERAL WAY WA 98001	NONE	PC	TO WORK WITH CHILDREN AND FAMILIES WORLDWIDE TO REACH THEIR FULL POTENTIAL	5,000

		AND ADVOCACÝ	
WORLD VISION 34834 WEYERHAEUSER WAY S FEDERAL WAY, WA 98001	NONE	TO WORK WITH CHILDREN AND FAMILIES WORLDWIDE TO REACH THEIR FULL POTENTIAL BY TACKLING POVERTY	5,000

595,000

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491195017340									
TY 2019 Accounting Fees Schedule									
Name: HI FOUNDATION INC									
EIN	EIN: 65-0848161								
	_	<u> </u>		1					
Category Amount Net Investment Adjusted Net Disbursements Income Income for Charitable Purposes									
ACCOUNTING FEES	6,773	3,387		3,386					

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491195017340

TY 2019 Investments Corporate Stock Schedule

Name: HI FOUNDATION INC

EIN: 65-0848161							
Investments Corporation Stock Schedule							
Name of Stock	End of Year Book Value	End of Year Fair Market Value					
ING GROEP N.VSPONSORED ADR	23,949	479,349					
VANGUARD COMMUNICATION SERVICES ETF	138,839	140,895					
ISHARES CORE S&P MIDCAP ETF	198,041	404,848					
ARTISAN INTL VAL	159,789	213,637					
FIDELITY INTL INDX	1,000,000	993,110					
JPMORGAN BETABUILDERS CANADA	462,546	520,200					
JPMORGAN BETABUILDERS EUROPE ETF	398,546	422,235					
CULLEN HIGH DIVIDEND	433,560	561,898					
ENERGY SELECT SECTOR	262,090	240,160					
FIDELITY 500 INDEX	2,500,000	2,924,058					
HEALTH CARE SELECT	275,288	305,580					
INDUSTRIAL SELECT	142,804	142,573					
ISHARES EDGE MSCI USA VALUE	478,573	538,380					
ISHARES CORE DIVIDEND GROWTH	632,511	757,260					
JPM GROWTH ADVATAG	239,350	615,768					
NEUBERGER	229,816	424,404					
SPDR S&P 500 ETF TRUST	2,546,948	4,101,462					
JPMORGAN BETABUILDERS JAPAN ETF	258,160	269,940					
ISHARES EDGE MSCI MIN VOL EMER	255,874	263,970					
JPM GL RES ENH IDX FD	548,442	651,298					

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TY 2019 Other Decreases Schedule								
Name:	HI FOUNDATION INC							
EIN:	65-0848161							
Do	escription	Amount						
BOOK/TAX DIFFERENCE		2,996						

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491195017340			
TY 2019 Other Expenses Sche	edule						
Name:	HI FOUNDATIO	N INC					
EIN:	EIN: 65-0848161						
Other Expenses Schedule							
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
STATE FILING FEE	61	31		30			

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491195017340 TY 2019 Other Professional Fees Schedule							
Name: HI FOUNDATION INC EIN: 65-0848161							
Category Amount Net Investment Adjusted Net Disbursements Income Income for Charitable							

54,418

54,418

Purposes

Category	Amount	Net Investment Income	P
,			

INVESTMENT FEES

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491195017340						
TY 2019 Taxes Schedule						
	: HI FOUNDAT : 65-0848161					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FOREIGN TAX WITHHELD	10,123	10,123	·	0		
2018 990-PF EXCISE TAX	47,164	0	· 	0		
2019 990-PF EXCISE ESTIMATE TAXES	59,920	0		0		