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

OMB No 1545-0047

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. \(\(\mathcal{Q}\)\)\(\text{\text{Open to Public Inspection}}\)

	For	calen	dar year 2019 or tax year beginning	02-25 , 20	19, and	d ending	3	_ 1	2-31 ,2019
	Nan	ne of fo	undation				A Employer	identification number	
	Lee	a & F	Bob Peterson Foundation Inc				83-37233	61	
•			d street (or PO box number if mail is not delivered to street address)		Room	n/suite		number (see instruction	ns)
	50.	70 R:	ingling Blvd				(941)504	-6717	
			n, state or province, country, and ZIP or foreign postal code		Ц				ng check here
	601		ta, FL 34237				C if exempt	ion application is pendir	ig, check here
				of a former pub	lic cha	etty v	D 1 Former	n organizations, check l	nama ▶ □
	•	J. ICOK	Final return Amended re		/110 O.10			•	
			Address change Name change					n organizations meeting here and attach comput	
	H (heck				~~		•	_
	_		type of organization Section 501(c)(3) exempt private to 4947(a)(1) nonexempt charitable trust Other taxa	hle private foun	dation	() ク	E If private t	foundation status was te 07(b)(1)(A), check here	erminated under
			arket value of all assets at J Accounting method	Cash	X Acc	roual			
			year (from Part II, col. (c), Other (specify)		25 /100	,,,,,,,		idation is in a 60-month ction 507(b)(1)(B), checl	
		ne 16)	-	on cash hasis	`		ander see	30011 007 (b)(1)(b), oneoi	(neic L
	_	art I	Analysis of Revenue and Expenses(The total of	1	'				(d) Disbursements
			amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue expenses p		(b) Net	investment	(c) Adjusted net	for chantable
_			the amounts in column (a) (see instructions))	books	٠.	ir	ncome	income	purposes (cash basis only)
3/6	_	1	Contributions, gifts, grants, ctc , received (attach schedule)	26	350	, ,		3	(300.000.000.000,
"/"	り	2	Check ► ☐ If the foundation is not required to attach Sch B	211,				<u></u>	
	_	3	Interest on savings and temporary cash investments · · ·	ļ	2				
		4	Dividends and interest from securities						
		5a	Gross rents						
		b	Net rental income or (loss)						
		6a	Net gain or (loss) from sale of assets not on line 10 · · · ·		-		-		
	Reve. nue	Ь	Gross sales price for all assets on line 6a			<u></u>		a	
	Ę,	7	Capital gain net income (from Part IV, line 2)						
	É	8	Net short-term capital gain			•			
	-	9	Income modifications			 .			
		10a	Gross sales less returns and allowances						
		b	Less. Cost of goods sold • • • • • •	· · · · · · · · · · · · · · · · · · ·	-				
~		c	Gross profit or (loss) (attach schedule)						
202		11	Other income (attach schedule)		\dashv			,	
		12	Total. Add lines 1 through 11	26	352		0		
2		13	Compensation of officers directors trustees etc		332				
	es	14	Other empleyee colored and weeks.						
83	enses	15	Pension plans, employee benefits Legal fees (attach schedule) Light Hevenue Se	rvice	_			-	
LL.	ο.	16a	Bank -	USB				· · · · · · · · · · · · · · · · · · ·	
SCANNED	ũ	ь	Accounting fees (attach schedule)					·	
Ž	ĕ	С	Other professional fees (attach schedule) NOV. 2020	:					
Z	rat	17	Interest		$\neg \uparrow$				****
Š	ist	18	Taxes (attach schedule) (see instructions)						
(I)	퉏	19	Depreciation (attach schedule) and depletion Ogden. LIT	-					
	þ	20	Occupancy						
	₹ ₽	21	Travel, conferences, and meetings	-artis					
	an	22	Printing and publications · · · · · · · · · · · · · · · · · · ·		812				
	Operating and Administrative Ex	23	Other expenses (attach schedule) · · · STM103 · · · ·		331				
	ati	24	Total operating and administrative expenses.						
	er		Add lines 13 through 23 · · · · · · · · · · · · · · · · · ·	25.	143		0		. 0
	Ö	25	Contributions, gifts, grants paid		0		······································		0
		26	Total expenses and disbursements. Add lines 24 and 25	25	143	•	0		0
		27	Subtract line 26 from line 12						<u> </u>
,		3	Excess of revenue over expenses and disbursements	1	209	• •			
		b	Net investment income (if negative, enter -0-)				0		i
		c	Adjusted net income (if negative, enter -0-)					0	i

$\overline{}$		PF (2019) Lee & Bob Peterson Foundation Inc	<u>.</u>	83-37	723361 Page 2
R	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End	of year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments		1,209	1,209
	3	Accounts receivable			
	i i	Less allowance for doubtful accounts			
	4	Pledges receivable	٠ .٠		1 .16 /
		Less allowance for doubtful accounts			
	5	Grants receivable · · · · · · · · · · · · · · · · · · ·			
	6	Receivables due from officers, directors, trustees, and other			i
	•	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			1
	'				-
ß	8	Inventories for sale or use	······································		
ssets	9	Prepaid expenses and deferred charges	······································		· ··
AS	-				
_	ı	Investments - U.S. and state government obligations (attach schedule)			
		Investments - corporate stock (attach schedule) · · · · · · · · · · · · · · · · · · ·			
		Investments - corporate bonds (attach schedule)			<u> </u>
	11	Investments - land, buildings, and equipment basis		<u> </u>	
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans · · · · · · · · · · · · · · · · · · ·			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis	_ 		<u> </u>
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
	ļ	instructions Also, see page 1, item I)	0	1,209	1,209
	17	Accounts payable and accrued expenses		· · · · · · · · · · · · · · · · · · ·	
/0	18	Grants payable			
ĕ	19	Deferred revenue · · · · · · · · · · · · · · · · · · ·			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons · ·		.	ļ
jat	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0	0	
ces		Foundations that follow FASB ASC 958, check here · · · · · ▶ and complete lines 24, 25, 29, and 30.	,		
_	24	Net assets without donor restrictions		1,209	
<u> </u>	25	Net assets with donor restrictions	· 	1,200	
<u>ш</u>		Foundations that do not follow FASB ASC 958, check here · · ▶			
Š		and complete lines 26 through 30.	:		
or Fund Bala	26	Capital stock, trust principal, or current funds			
<u>ō</u>	27	Paid-in or capital surplus, or land, bldg, and equipment fund			
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds			
SS		- I	0	1 000	
t ≯	29	Total flot doctor of faile balances (see men delicito)		1,209	
Š	30	Total liabilities and net assets/fund balances (see		1 000	
Da	rt III	Analysis of Changes in Not Assets or Fund Balances	0	1,209	<u> </u>
			/must passe with		T
1		al net assets or fund balances at beginning of year - Part II, column (a), line 29			
_	end	-of-year figure reported on prior year's return)		1	
2		er amount from Part I, line 27a			1,209
3		er increases not included in line 2 (itemize)		3	
4		l lines 1, 2, and 3			1,209
5		creases not included in line 2 (itemize)		5	
6	Tota	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, colun	nn (b), line 29 · · ·	6	1,209

Form 990-PF (2019)

_	Base penod years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets	Distribution ratio (col (b) divided by col (c))
	2018			
	2017			
	2016			
	2015			
	2014			
2	Average distribution ratio for the 5-ye	ear base period - divide the total on lineas been in existence if less than 5 ye		3
4	Enter the net value of noncharitable-	use assets for 2019 from Part X, line	5	4
5	Multiply line 4 by line 3 · · · · ·			5 0
6	Enter 1% of net investment income (1% of Part I, line 27b)		6
7	Add lines 5 and 6 · · · · · · · ·			7 0
8			and complete that part using a 1% tax r	

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Rart	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	8 - see instru	ctions)		
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	7			
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)	li			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	▶ 1	_		0
	here ▶ ☐ and enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · ·	 			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of		1		
•	Part I, line 12, col. (b) · · · · · · · · · · · · · · · · · · ·		-		
2		1			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) Add lines 1 and 2) 	+		0
3	, , , , , , , , , , , , , , , , , , ,		+-		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) · ·				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			0
6	Credits/Payments				
а	2019 estimated tax payments and 2018 overpayment credited to 2019 · · · · · · · · 6a				
b	Exempt foreign organizations - tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d	7			
8	Enter any penalty for underpayment of estimated tax. Check here I if Form 2220 is attached		 		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		+		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		 		
			 		
11 Dom		ınded ► 11			
	VII-A Statements Regarding Activities		 r	14	T 80 =
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		-	Yes	
	participate or intervene in any political campaign?		1a	ļ	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				1
	instructions for the definition		1b	<u> </u>	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		1		j
	published or distributed by the foundation in connection with the activities]
С	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		}	1	
·	on foundation managers			İ	
2	<u> </u>		2		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			 	X
	If "Yes," attach a detailed description of the activities		ŀ		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		<u> </u>		
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes $\cdot\cdot$		3	<u> </u>	Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	ļ	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	<u> </u>	х
	If "Yes," attach the statement required by General Instruction T				1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			1	
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			1	1
	conflict with the state law remain in the governing instrument?		6	×	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c)			x	
	\	, and Part AV ·	\ <u>'</u>	<u> </u>	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions ▶				
_			-		
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? If "No," attach explanation	• • • • • • • •	8b		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See instructions for Part XIV)? If "Yes,"				
	complete Part XIV		9	х	1
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			1	
	names and addresses	STPM114 .	10	x	ı
		Olulia.	Form 99		2010
Α			4 O(1)1 33	יט דר (2010

Part VII-A | Statements Regarding Activities (continued) Yes No 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions 11 X 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified X 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A 14 The books are in care of ▶ JEFFREY R PETERSON Located at - ≥ 2070 Ringling Blvd, Sarasota, FL ZIP+4 ► 34237 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 · · · · · · · · · ▶ 15 16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority Yes No over a bank, securities, or other financial account in a foreign country? 16 X 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. Yes No 1a During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? 🗌 Yes (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available for (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 If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions 1b Organizations relying on a current notice regarding disaster assistance, check here Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that 1c 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6el) for tax year(s) beginning before 2019? Yes No If "Yes," list the years Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise 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 3b 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?

Form 9	990-PF (2019) Lee & Bob Peterson Fou	ndati	on Inc				83-3	7233	51	F	age 6
Part	t VII-B Statements Regarding Activities f	or Whi	ich Form 47	'20 Ma	y Be Req	uired	(contınu	ed)			
5a	Dunng the year, did the foundation pay or incur any amo	ount to					_	_		Yes	No
	(1) Carry on propaganda, or otherwise attempt to influe	nce legi:	slation (section	4945(e))?	• • • •	Yes	□ N	0		
	(2) Influence the outcome of any specific public election	n (see se	ection 4955), or	to carry	on,		_	_			
	directly or indirectly, any voter registration drive?						∐ Yes	∐и	o		
	(3) Provide a grant to an individual for travel, study, or o	other sim	ıılar purposes?		• • • • • •	• • • •	Yes	∐ N	•		
	(4) Provide a grant to an organization other than a char	-						_			
			• • • • • • •				∐ Yes	∐ N	o		
	(5) Provide for any purpose other than religious, chanta								>		~
	purposes, or for the prevention of cruelty to children						∐ Yes	∐N	0		
b	If any answer is "Yes" to 5a(1)-(5), did any of the transaction										
	in Regulations section 53 4945 or in a current notice reg								_ <u>5b</u>		
	Organizations relying on a current notice regarding disas							· • [J	}	ł
C	If the answer is "Yes" to question 5a(4), does the foundation						п.,	л.,			
	because it maintained expenditure responsibility for the	-			• • • • • •		∐ Yes	∐N	°		l
_	If "Yes," attach the statement required by Regulations se								}]	
6a	Did the foundation, during the year, receive any funds, d						П v	п.,	_		ĺ
h	on a personal benefit contract?						∐ Yes	□N	·		
b	Did the foundation, during the year, pay premiums, direct	itly or ind	irectly, on a pe	rsonal be	enem contrac	st /			6b		
7.	If "Yes" to 6b, file Form 8870		ashibited toy of	altan ten	accettan?		☐ Yes	Пм	_		
7a b	At any time during the tax year, was the foundation a pa						☐ 162		7b		
8	If "Yes," did the foundation receive any proceeds or have is the foundation subject to the section 4960 tax on paying	-				, , ,			7.5		
•	remuneration or excess parachute payment(s) during the						Yes	Пм			- 1
Part		ors Tr	ustees For	ındati	on Manag	ers. H				28.	
<u>. u.,</u>	and Contractors	, , , , ,	401000, 1 01		on manag	,0.0,	g,		.р.оуо	,	
1	List all officers, directors, trustees, and foundation r	nanager	s and their co	mpensa	tion. See ins	struction	ns.				
		(b) Titl	e, and average	(c) Co	ompensation	(d)	Contribution		(e) Expe	nse acc	count.
	(a) Name and address		rs per week ed to position		not paid, nter -0-)		oyee benefit ferred comp			allowand	
JEFFI	REY R PETERSON	PRESI		,					†		
	Ringling Blvd, FL 34237	1	20.00	•	0			0			0
	ENE M HAUCK	VICE	PRESIDENT		-						
2070	Ringling Blvd, FL 34237		20.00		0			0			0
-											
		<u> </u>							L		
		l							<u> </u>		
2	Compensation of five highest-paid employees (other	than th	ose included	on line 1	l - see instru	ctions).	If none, e	nter			
	"NONE."										
			(b) Title, and a	verage			(d) Contrib employee		(e) Expe	neo acc	Sunt.
. (8	a) Name and address of each employee paid more than \$50,000		hours per w	eek	(c) Compen	sation	plans and	deferred		illowand	
			devoted to pe				compen	sation	ļ		
NONE									ļ		
					-				ļ		
									 		·
					1	;			1		
									 		
						,			1		
									 	 -	
					L		l		<u> </u>		
	number of other employees paid over \$50,000	· · · ·	· · · · · · · · ·	· · · ·		<u>· · · ·</u>			[N DE 45	0
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Part VIII Information About Officers, Directors, Trustees and Contractors (continued) 3 Five highest-paid independent contractors for professional services		
		(-) ()
(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		<u> </u>
Part IX-A Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include re organizations and other beneficiaries served, conferences convened, research papers p		Expenses
1 Foundraiser		
		21,875
. 2	·	
3		
4		
Part IX-B Summary of Program-Related Investments (se	e instructions)	
Describe the two largest program-related investments made by the foundation during the		Amount
1		
2		
All all and a second a second and a second a		
All other program-related investments See instructions 3		
Total. Add lines 1 through 3	······	•
		Form 990-PF (2019

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Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, Part X see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1 purposes Average monthly fair market value of secunties 1a 1b 0 Fair market value of all other assets (see instructions) 1c 0 1d 0 d Reduction claimed for blockage or other factors reported on lines 1a and Acquisition indebtedness applicable to line 1 assets 2 0 2 3 0 3 Cash deemed held for charitable activities
Enter 1 1/2% of line 3 (for greater amount, see 0 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 0_ 5 0 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here > \overline{\text{X}} and do not complete this part.) Minimum investment return from Part X, line 6 Tax on investment income for 2019 from Part VI, line 5 2c C 3 Distributable amount before adjustments Subtract line 2c from line 1 4 \$ 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 7 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 Amounts set aside for specific charitable projects that satisfy the: За Cash distribution test (attach the required schedule) b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 · · · · · · Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. 5 5 Enter 1% of Part I, line 27b See instructions Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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	The control of the co	(a)	(b)	(c)	(d)
	•	Corpus	Years prior to 2018	2018	2019
1	Distributable amount for 2019 from Part XI,			/	
_	line 7				
2	Undistributed income, if any, as of the end of 2019				
a b	Enter amount for 2018 only			 /	
3	Total for prior years,,,,,,				
a-	From 2014		1		
b	From 2015	· · · ·	100		
С	From 2016		/		
ď	From 2017] ,	, . m./	, at	
0	From 2018	4 · 4	7_	,	
f	Total of lines 3a through e		//	"	
4	Qualifying distributions for 2019 from Part XII,]
_	line 4 🕨 \$				
a b	Applied to 2018, but not more than line 2a · · · · · · Applied to undistributed income of prior years		//		
U	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election	····-		· · · · · · · · · · · · · · · · · · ·	i
	required - see instructions)	/			
ď	Applied to 2019 distributable amount				
e	Remaining amount distributed out of corpus				`
5	Excess distributions carryover applied to 2019	/			
•	(If an amount appears in column (d), the same				
_	amount must be shown in column (a)) · · · · ·				<u> </u>
6	Enter the net total of each column as indicated below:	/			
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	/			
b	Pnor years' undistributed income Subtract	/			
	line 4b from line 2b · · · · · · · · · · · · · · · · · ·	/		•	
, с	Enter the amount of pnor years' undistributed	/			
	income for which a notice of deficiency has	/			
	been issued, or on which the section 4942(a)	, i			
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				1
0	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 · · · · · · · / · · · ·				
7	Amounts treated as distributions out of corpus				.
	to satisfy requirements imposed by section				!
	170(b)(1)(F) or 4942(g)(3) (Election máy be	 	the specific	1	
8	required - see instructions)				
•	applied on line 5 or line 7 (see institutions)		,		
9	Excess distributions carryover to 2020.			·	1
	Subtract lines 7 and 8 from line/6a				- 1
10	Analysis of line 9			F - 9 F	
a	Excess from 2015	e	o 1 •		
b	Excess from 2016 · · · ·	-		• •	ļ
C	Excess from 2017 · · · /· · ·		a		30 1 m gm
~ d -	Excess from 2018	r as raje we ge			"
EEA	Excess from 2019 · / · · ·	4	<u></u>		Form 990-PF (2019)

- a The name, address, and telephone number or email address of the person to whom applications should be addressed
- b The form in which applications should be submitted and information and materials they should include
- c Any submission deadlines
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of recipient Purpose of grant or contribution Amount Name and address (home or business) Paid during the year За Approved for future payment

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Page 12

Ente	r gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	on 512, 513, or 514	(e) Related or exempt
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
1	Program service revenue					
	a	—				
	b				-	
			, u			
•	d					<u> </u>
	e					
			-			<u> </u>
•	g Fees and contracts from government agencies · · ·					
2	Membership dues and assessments					
3 4	Interest on savings and temporary cash investments · · · Dividends and interest from securities · · · · · · · · · · · · · · · · · · ·					
5	· · · · · · · · · · · · · · · · · · ·		2		70.	O
7	Net rental income or (loss) from real estate a Debt-financed property		· · · · · · · ·			
	b Not debt-financed property					
6	Net rental income or (loss) from personal property			<u> </u>		
7	Other investment income		· ··· · · · · · · · · · · · · · · · ·			- -
8	.		· · · · ·		· 	
9	Gain or (loss) from sales of assets other than inventory - Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory		<u>.,,</u>		···	
11						
••	Other revenue a b			h		
						-
	e					
12	Subtotal Add columns (b), (d), and (e)		2			
13	Total. Add line 12, columns (b), (d), and (e)				- 13	2
See	worksheet in line 13 instructions to verify calculations)					
Pai	rt XVI-B Relationship of Activities to the Acc	complishme	nt of Exempt I	Purposes		
Pa:		complishmer	nt of Exempt I	Purposes -A contributed imp	portantly to the	
Pa:	rt XVI-B Relationship of Activities to the Accide No. Explain below how each activity for which income is	complishmer	nt of Exempt I	Purposes -A contributed imp	portantly to the	
Pa:	rt XVI-B Relationship of Activities to the Accide No. Explain below how each activity for which income is	complishmer	nt of Exempt I	Purposes -A contributed imp	portantly to the	
Pa:	rt XVI-B Relationship of Activities to the Accide No. Explain below how each activity for which income is	complishmer	nt of Exempt I	Purposes -A contributed imp	portantly to the	
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Pa:	rt XVI-B Relationship of Activities to the Accide No. Explain below how each activity for which income is	complishmer	nt of Exempt I	Purposes -A contributed imp	portantly to the	
Pa:	rt XVI-B Relationship of Activities to the Accide No. Explain below how each activity for which income is	complishmer	nt of Exempt I	Purposes -A contributed imp	portantly to the	
Pa:	rt XVI-B Relationship of Activities to the Accide No. Explain below how each activity for which income is	complishmer	nt of Exempt I	Purposes -A contributed imp	portantly to the	
Pa:	rt XVI-B Relationship of Activities to the Accide No. Explain below how each activity for which income is	complishmer	nt of Exempt I	Purposes -A contributed imp	portantly to the	
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Pa:	rt XVI-B Relationship of Activities to the Accide No. Explain below how each activity for which income is	complishmer	nt of Exempt I	Purposes -A contributed imp	portantly to the	
Pa:	rt XVI-B Relationship of Activities to the Accide No. Explain below how each activity for which income is	complishmer	nt of Exempt I	Purposes -A contributed imp	portantly to the	
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Pa:	rt XVI-B Relationship of Activities to the Accide No. Explain below how each activity for which income is	complishmer	nt of Exempt I	Purposes -A contributed imp	portantly to the	
Pa:	rt XVI-B Relationship of Activities to the Accide No. Explain below how each activity for which income is	complishmer	nt of Exempt I	Purposes -A contributed imp	portantly to the	
Pai	rt XVI-B Relationship of Activities to the Accide No. Explain below how each activity for which income is	complishmer	nt of Exempt I	Purposes -A contributed imp	portantly to the	
Pa:	rt XVI-B Relationship of Activities to the Accide No. Explain below how each activity for which income is	complishmer	nt of Exempt I	Purposes -A contributed imp	portantly to the	

Form 990-PF (2019) Page 13 Lee & Bob Peterson Foundation Inc 83-3723361 Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt **Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a nonchantable exempt organization of 1a(1) (2) Other assets . . . 1a(2) x Other transactions 1b(1) (1) Sales of assets to a noncharitable exempt organization 1b(2) (2) Purchases of assets from a nonchantable exempt organization X 1b(3) (3) Rental of facilities, equipment, or other assets Х 1b(4) X 1b(5) X 1b(6) (6) Performance of services or membership or fundraising solicitations X Shanng of facilities, equipment, mailing lists, other assets, or paid employees Х If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship ilties of penury, 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, complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign May the IRS discuss this return with the preparer shown below? Here See instructions |X| Yes Pont/Type preparer's name Date

Paid

Preparer

Use Only

Shirley B Rowan

IDEAL ACCOUNTING Firm's name

Sarasota FL 34232

3616 Webber Street Ste 202

Firm's EIN

11-2020

Phone no 941-925-1136

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

2019

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Name of	the organization			Employer identification number
Lee &	Bob Peterson B	oundation Inc		83-3723361
Organiz	ation type (check one)			
Filers of	:	Section:		
Form 99	0 or 990-EZ	∐ 501(c)() (enter number) organization	
		1947(a)(1) no	nexempt chantable trust not treated as a private foundation	
		_		
		527 political o	organization	
Form 99	0-PF	501(c)(3) exe	mpt private foundation	
		,		
		4947(a)(1) no	nexempt chantable trust treated as a private foundation	
		501(c)(3) taxa	able private foundation	
			·	
	, ,	•	Rule or a Special Rule.	de Can
note: Or	-	(8), or (10) organization	n can check boxes for both the General Rule and a Special Rul	e see
General	Rule			
x	For an organization fil	na Form 990, 990-EZ	or 990-PF that received, during the year, contributions totaling	\$5.000
==	•	•	contributor Complete Parts I and II See instructions for determ	
	contributor's total con	nbutions		
0	D. J.			
Special	Rules			
	For an organization	described in section 5	01(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% suppor	t test of the
			170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ	
			y one contributor, during the year, total contributions of the grea	
	\$5,000, or (2) 2% of	the amount on (i) For	m 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete P	arts I and II
П	For an organization	described in section 5	01(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fro	m any one
			ons of more than \$1,000 exclusively for religious, charitable, sc	
		-	prevention of cruelty to children or animals Complete Parts I,	
	For an amanization	described in section 5	01(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fro	m any one
Ц	-		exclusively for religious, chantable, etc., purposes, but no such	in any one
			this box is checked, enter here the total contributions that were	received
			, chantable, etc., purpose Don't complete any of the parts unles	
			because it received nonexclusively religious, charitable, etc., co	
0- "	A	onli navanad birdh- O	anoral Dula and/or the Coopel Dulas decan't file Cohedula D./Fr	om 900
			eneral Rule and/or the Special Rules doesn't file Schedule B (Fo IV, line 2, of its Form 990, or check the box on line H of its Form	
			neet the filing requirements of Schedule B (Form 990, 990-EZ, o	
	00-11, 1 QILI, III 16 Z, 10	oorany machiaveontin	ico, ale imig requirements of corrections (i offit ood, ood LLL, o	· · · /

Name of organization

Employer identification number

Lee & Bob Peterson Foundation Inc

83-3723361

Part I	Contributors (see instructions). Use duplicate copies	s of Part I if additional space is no	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	JEFFREY R PETERSON 2070 RINGLING BLVD Sarasota, FL 34237	\$ 26,100	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person

Federal Supporting Statements Name(s) as shown on return Lee & Bob Peterson Foundation Inc Page 10 Pg01 83-3723361

Form 990PF - Part VII-A - Line 10 Substantial Contributors Schedule

Statement #114

Name Address

JEFFREY R PETERSON 2070 RINGLING BLVD Sarasota, FL 34237

		Federal Su	Federal Supporting Statements	ments	2019 PG01
Name(s) as shown on return Lee & Bob Peterson Foundation Inc					ა დ
	Form 990PE	Form 990PF - Part I - Line 23 - Other Expenses Schedule	- Other Expenses S	schedule	Statement #103~
Description	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose	
ADVERTING BANK CFARGES	650	0 0	0 0	0	
FUNDRAISING EVENT	21,875	0 (0 (0	
POSTAGE	1,200	0 0	0 0	0	
Totals	24,331	0	0	0	
~~~					
• • •					
•					

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