Form **990-PF**

Department of the Treasury

Internal Revenue Service

0423220043 JUN 04 21 Proc as orig

Return of Private Found 29491275004001 OMB No 1545-0047

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

2019

▶ Do not enter social security numbers on this form as it may be made public ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

Fo	r calen	dar year 2019 or tax year begi	nning	Jun 1,201	9, and e	ending	Ma	ay 31 ,20 20
	ne of fou						r identification numbe	
T	HE DR	. P. PHILLIPS FOUNDATI	ION			59-63	135403	
		street (or P O box number if mail is not of		Roon	n/suite		e number (see instruct	ions)
ъ	O B	OX 692709				(407	422-6105	
Cit	or town	state or province, country, and ZIP or fo	reign postal code	1	-			
		O FL 32869-2709				C if exemp	ion application is pend	ing, check here ▶
_			a District return	of a former public	oboriti			
G	Check			of a former public	Charity	D 1. Foreig	n organizations, check	here ► ∐
		☐ Final return	_				n organizations meeting	
		Address ch			~ . -	check	here and attach compu	ıtatıon ► 🗌
Н		type of organization: X Sec					foundation status was 07(b)(1)(A), check here	
业		on 4947(a)(1) nonexempt charitat				Section 5	or (b)(1)(A), check here	▶□
₹			J Accounting method:	:⊠ Cash ∐ A	ccrual		ndation is in a 60-mont	
0		f year (from Part II, col. (c),	→ □ Other (specify)			under se	ction 507(b)(1)(B), checl	k here ▶ 🗌
_	line 16		(Part I, column (d), must be	on cash basis)	,			
نار	art I			(a) Revenue and	(b) Not	investment	(a) Adjusted not	(d) Disbursements for charitable
Σ		amounts in columns (b), (c), and (d) m		expenses per books		come	(c) Adjusted net income	purposes
≥_		the amounts in column (a) (see instruc			L			(cash basis only)
_	1	Contributions, gifts, grants, etc., red	ce edule)					
į	2	Check ► X if the foundation is not	rr Sch. B					
Z	3	Interest on savings and tempora	ar nents	242,690.	24	42,690.		
SCANING	4	Dividends and interest from sec)	864,193.		64,193.		i
S.	5a	Gross rents		8,355.		8,355.		i
U #	Ь	Net rental income or (loss)	8,355.		1			i
a	6a	Net gain or (loss) from sale of a		1,069,392.				
Revenue	b	Gross sales price for all assets on lin			L-6a	Stmt		
Ş	7	Capital gain net income (from F				69,392.		
æ	8	Net short-term capital gain .	•			37,372.		
	9	Income modifications .			<u> </u>			
	10a	Gross sales less returns and allowa	need	·		 		
	1				ļ	······		
	b	•			 			
	C	Gross profit or (loss) (attach sc				1 245	- 101 CO	PHES
	11	Other income (attach schedule)		1,347.	0.1	1,34/.	CENED "	1
	12	Total. Add lines 1 through 11		2,185,977.	2,18	85,977n	CEIVED IN CO	
S	13	Compensation of officers, direct	,	6,750.			APR 0 2 21	6,750.
SE	14	Other employee salaries and w	- P				APROL	
Expenses	15	Pension plans, employee benef			ļ			NH
X	16a	Legal fees (attach schedule)		2,161.	ļ		OGDEN, UT	An 2,161.
		Accounting fees (attach schedu		6,000.	ļ	2,400.		3,600.
€:	С	Other professional fees (attach	schedule)	87,029.				87,029.
ra	17	Interest	/ 					
S	18	Taxes (attach schedule <u>) (</u> see in:		15,288.		61.		15,227.
Ę	19	Depreciation (attach salvedule)	and depletion					
þ	20	Occupancy	· · · · · · · · · · · · · · · · · · ·					
¥	21	Travel, conferences, and meet	PSFV /LET · · [15,329.				15,329.
ĭ	22	Printing and blandations EN	ווויאטבין [
Operating and Administrative	23	Other expenses (attach schedu	∥é) See.Stmt .	94,172.		1,581.		92,591.
3:	24	Total operating and admin						
ē		Add lines 13 through 23		226,729.]	4,042.		222,687.
õ	25	Contributions, gifts, grants paid	ı	2,570,591.				2,570,591.
0	26	Total expenses and disbursemer		2,797,320.		4,042.		2,793,278.
_	27	Subtract line 26 from line 12:				,		1
	a	Excess of revenue over expense	es and disbursements	-611,343.				
	b	Net investment income (if neg		-011,343.	2 10	31,935.		
		Adjusted net income (if negati			4,10	11,333.		
<u></u>		work Reduction Act Notice, see in			<u> </u>		F-	rm 990-PF (2019)

Pa	irt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	En	d 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	1,527,556.	954,420	. 954,420.
	2	Savings and temporary cash investments	332,966.	326,542	
	3	Accounts receivable ▶			
		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) ▶ 981,322.	L-7 Stmt		
		Less: allowance for doubtful accounts ▶0.	1,750,000.	981,322	. 981,322.
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	13,854.	6,120	6,120.
ĕ	10a	Investments—U.S. and state government obligations (attach schedule)		=	
	b	Investments—corporate stock (attach schedule) L-10b Stmt	30,619,542.	33,590,528	. 39,069,783.
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment; basis ▶			
		Less: accumulated depreciation (attach schedule) ▶	_		
	12	Investments—mortgage loans	2,723,681.	0	0.
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ≥ 8,768,940.			
		Less accumulated depreciation (attach schedule) ▶ 0.	8,768,940.	8,768,940	14,181,149.
	15	Other assets (describe ►) •			
	16	Total assets (to be completed by all filers—see the			
		ınstructions. Also, see page 1, item l)	45,736,539.	44,627,872	
	17	Accounts payable and accrued expenses	0.	2,676	
Ś	18	Grants payable	1,000,000.	500,000	·
ij	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	-		
Ë	21	Mortgages and other notes payable (attach schedule)	2 000	2 000	
	22	Other liabilities (describe ► L-22 Stmt)	3,000.	3,000	
	23	Total liabilities (add lines 17 through 22)	1,003,000.	505,676	
Balances		Foundations that follow FASB ASC 958, check here			
ŭ	24	and complete lines 24, 25, 29, and 30. Net assets without donor restrictions			
ğ	24 25	Net assets with donor restrictions			
nd E	25	Foundations that do not follow FASB ASC 958, check here ► 🗵			
Ē		and complete lines 26 through 30.			
Ē	26	Capital stock, trust principal, or current funds			
ō	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
eţ	28	Retained earnings, accumulated income, endowment, or other funds	44,733,539.	44,122,196	:
SS	29	Total net assets or fund balances (see instructions)	44,733,539.	44,122,196	
t A	30	Total liabilities and net assets/fund balances (see	11/100/0351	11/202/200	
Net Assets or	••	instructions)	45,736,539.	44,627,872	
	rt III	Analysis of Changes in Net Assets or Fund Balances			•
		I net assets or fund balances at beginning of year-Part II, colu	mn (a), line 29 (mus	t agree with	
•		of-year figure reported on prior year's return)			44,733,539.
2		er amount from Part I, line 27a			-611,343.
3					3
4		lines 1, 2, and 3			44,122,196.
5					
6	Tota	reases not included in line 2 (itemize) ► il net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), li	ne 29 (44,122,196.

Part	IV Capital Gains and	Losses for Tax on Investm	ent Income				
,	(a) List and describe the kir	nd(s) of property sold (for example, real esse, or common stock, 200 shs MLC Co)	state,	(b) How acquired P—Purchase D—Donation	(c) Date ac		(d) Date sold (mo , day, yr)
	PUBLICLY TRADED SE	CURITIES		P	Various	s	Various
b							
c							
d							
<u> e</u>		· · · · · · · · · · · · · · · · · · ·					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis ense of sale			in or (loss) (f) minus (g))
<u>a</u>	6,687,675.			5,618,283.			1,069,392.
			·			-	
d					-		
e							
	Complete only for assets sho	wing gain in column (h) and owned t	by the foundation	on 12/31/69.	0.0	Gains (Co	ol (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) (j), if any	col ((k), but no	of less than -0-) or from col (h))
а	0.	0.		0.			1,069,392.
b							
С							
d							
<u> e</u>							
2	Capital gain net income of		also enter in Pa enter -0- in Pa		2		1,069,392.
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c). See instruc	ctions. If (loss)), enter -0- ın)	3		0
Par		er Section 4940(e) for Redu			_		0.
Was ⁻		section 4942 tax on the distribut			base period	d?	☐ Yes 🏿 No
1		ount in each column for each yea			akıng any e	entries.	
Cal	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) f nonchantable-use a	ssets		(d) stribution ratio divided by col. (c))
	2018	2,981,63	17.	39,725,3	49.	, , ,	0.075056
	2017	1,761,10		40,304,7			0.043695
	2016	778,55	51.	36,887,8	59.		0.021106
	2015	502,04	41.	34,760,9	95.	_	0.014443
	2014	3,323,23	19.	39,463,7	708.		0.084210
2	Total of line 1, column (d)				. 2		0.238510
3		for the 5-year base period—divoundation has been in existence					0.047702
4	Enter the net value of non-	charitable-use assets for 2019 fr	om Part X, line	5	. 4		40,470,205.
5	Multiply line 4 by line 3				. 5		1,930,510.
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)			. 6		21,819.
7	Add lines 5 and 6				. 7		1,952,329.
8	· • • •	ns from Part XII, line 4				<u> </u>	2,793,278.
	If line 8 is equal to or great Part VI instructions.	ter than line 7, check the box in	raπ vi, line 1t	o, and complete	ınat part us	sing a 1	1% tax rate. See the

3

Part \		see II	nstru	ICTIO	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.				1
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			_	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1		<u>21,8</u>	19.
	here ► 🗵 and enter 1% of Part I, line 27b				1
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)	-			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2			0.
3	Add lines 1 and 2	3		21,8	19.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5		21,8	19.
6	Credits/Payments:				
а	2019 estimated tax payments and 2018 overpayment credited to 2019 . 6a 5,353.				
b	Exempt foreign organizations—tax withheld at source				}
C	Tax paid with application for extension of time to file (Form 8868) 6c				1
_d	Backup withholding erroneously withheld	- -			
7	Total credits and payments. Add lines 6a through 6d	7 8			53.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		17,0	
9 10		10		17,0	0.
10 11		11			<u> </u>
	VII-A Statements Regarding Activities	•••			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or d	id it		Yes	No
ıa	participate or intervene in any political campaign?		1a	1.00	×
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See				×
	Instructions for the definition		1b		Ĥ
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater published or distributed by the foundation in connection with the activities.	riais			
С	Did the foundation file Form 1120-POL for this year?		1c	ļ	×
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				l .
	(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 impos	ea			
_	on foundation managers. ► \$				<u>ب</u>
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		2		×
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, arti of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		×
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? If "Yes," attach the statement required by <i>General Instruction T</i> .	•	5		×
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions	that			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions 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), and Par		7	×	
, 8а	Enter the states to which the foundation reports or with which it is registered. See instructions.		<u> </u>	 ``	
	DT .				
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gen	eral			
J	(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				
•	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Y				
	complete Part XIV		9		×
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing t				
	names and addresses		10		×

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		×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	
	Website address ► WWW.DRPHILLIPS.ORG			
14	The books are in care of ▶ KENNETH D. ROBINSON, PRESIDENT Telephone no. ▶ (407)4 Located at ▶ 7400 DR. PHILLIPS BLVD ORLANDO FL ZIP+4 ▶ 32819-			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here			
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		×
	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 No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?			
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			
a	At the end of tax year 2015, did the foundation have any diddistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019?			
h	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.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	-		
3a	➤ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			1
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or			1
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			1
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			1
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the	<u></u>		
	foundation had excess business holdings in 2019.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u> </u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4h		Ţ

Part	VII-B Statements Regarding Activities	s tor w	nich Form	4/20	мау ве н	equire	a (contir	nuea)			
	During the year, did the foundation pay or incur	any am	ount to:							Yes	No
	(1) Carry on propaganda, or otherwise attempt t	o influe	nce legislatio	n (sect	ion 4945(e))? .	☐ Yes	⊠ No			1
	(2) Influence the outcome of any specific public										ì
	directly or indirectly, any voter registration dr						☐ Yes	X No			ŀ
	(3) Provide a grant to an individual for travel, stu	dv. or d	other similar i	ourpos	es?		_ ☐ Yes	X No			1
	(4) Provide a grant to an organization other than						_	_			ŀ
	section 4945(d)(4)(A)? See instructions			-			☐ Yes	⊠ No			
	(5) Provide for any purpose other than religious					cational	_			Ì	1
	purposes, or for the prevention of cruelty to							⊠ No	1		
b	If any answer is "Yes" to 5a(1)-(5), did any of the						_		i		- (
_	in Regulations section 53.4945 or in a current no								5b		
	Organizations relying on a current notice regardi	_	_					▶□			
С	If the answer is "Yes" to question 5a(4), does t							_			- 1
	because it maintained expenditure responsibility							□No	1		- 1
	If "Yes," attach the statement required by Regula		=						1		į
6a	Did the foundation, during the year, receive any					emiums			1		- 1
	on a personal benefit contract?						☐ Yes	⊠ No	1		
b	Did the foundation, during the year, pay premiur	ns, dıre	ctly or indired	ctly, on	a persona	benefit	contract	? .	6b		×
	If "Yes" to 6b, file Form 8870.	·	•	•							
7a	At any time during the tax year, was the foundation	a party	to a prohibite	ed tax s	helter trans	action?	☐ Yes	⊠ No]
b	If "Yes," did the foundation receive any proceed								7b		
8	Is the foundation subject to the section 4960 ta	x on pa	syment(s) of i	more t	han \$1,000),000 in					
	remuneration or excess parachute payment(s) d	uring th	e year?				☐ Yes	⊠ No			
Part	VIII Information About Officers, Direct	tors, 1	rustees, F	ounda	tion Man	agers,	Highly F	Paid E	mploy	ees,	
	and Contractors										
1	List all officers, directors, trustees, and found	lation r	nanagers an	d their	compens	ation. S	See instru	uctions			
	(a) Name and address		e, and average rs per week	(c) Co	mpensation ot paid.	(d) (Contributions	s to plans	(e) Expe		
	(a) Name and address	hou	e, and average rs per week ed to position	(lf r	mpensation iot paid, ter -0-)	emplo	Contributions byee benefit erred compe	plans		nse aco allowan	
JAMI	(a) Name and address ES W. FERBER	devote	rs per week	(lf r	ot paid,	emplo	yee benefit	plans			ces
		devote CHAII	rs per week ed to position RMAN/DIR 12.00	(lf r	ot paid,	emplo	yee benefit	plans			
P.0	ES W. FERBER	devote CHAII	rs per week ed to position RMAN/DIR	(lf r	1 , 250 .	emplo	yee benefit	plans ensation 0.			0 .
P.O KENI	ES W. FERBER BOX 692709 ORLANDO FL 32869	CHAII	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00	(lf r	ot paid, ter -0-)	emplo	yee benefit	plans ensation			ces
P.O KENI P.O	ES W. FERBER BOX 692709 ORLANDO FL 32869 NETH D. ROBINSON	CHAII	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00 ASST SEC	(lf r	1,250.	emplo	yee benefit	plans ensation 0.			0. 0.
P.O KENI P.O E.M	ES W. FERBER BOX 692709 ORLANDO FL 32869 NETH D. ROBINSON BOX 692709 ORLANDO FL 32869	CHAII	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00	(lf r	1 , 250 .	emplo	yee benefit	plans ensation 0.			0 .
P.O KENI P.O E.M P.O	ES W. FERBER BOX 692709 ORLANDO FL 32869 NETH D. ROBINSON BOX 692709 ORLANDO FL 32869 TUKDARIAN	CHAII	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00 /ASST SEC 8.00	(lf r	1,250. 750.	emplo	yee benefit	plans ensation 0.			0 . 0 .
P.O KENI P.O E.M P.O See	ES W. FERBER BOX 692709 ORLANDO FL 32869 NETH D. ROBINSON BOX 692709 ORLANDO FL 32869 TUKDARIAN BOX 692709 ORLANDO FL 32869 Statement	CHAII PRESID	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00 //ASST SEC 8.00 12.00	(Iff r	1,250. 750. 0.	emplo and defe	yee benefit erred compe	0. 0.	other :	allowan	0. 0. 0.
P.O KENI P.O E.M P.O	ES W. FERBER BOX 692709 ORLANDO FL 32869 NETH D. ROBINSON BOX 692709 ORLANDO FL 32869 TUKDARIAN BOX 692709 ORLANDO FL 32869 Statement Compensation of five highest-paid employed	CHAII PRESID	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00 //ASST SEC 8.00 12.00	(Iff r	1,250. 750. 0.	emplo and defe	yee benefit erred compe	0. 0.	other :	allowan	0. 0. 0.
P.O KENI P.O E.M P.O See	ES W. FERBER BOX 692709 ORLANDO FL 32869 NETH D. ROBINSON BOX 692709 ORLANDO FL 32869 TUKDARIAN BOX 692709 ORLANDO FL 32869 Statement	CHAII PRESID	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00 //ASST SEC 8.00 12.00	(Iff r	1,250. 750. 0.	emplo and defe	yee benefit erred compe	plans nsation 0. 0. 0. uctions	other :	allowan	0. 0. 0.
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P.O KENI P.O E.M P.O See	ES W. FERBER BOX 692709 ORLANDO FL 32869 NETH D. ROBINSON BOX 692709 ORLANDO FL 32869 TUKDARIAN BOX 692709 ORLANDO FL 32869 Statement Compensation of five highest-paid employed	hou devote CHAII PRESID TREAS	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00 F/ASST SEC 8.00 12.00 er than thos	se incl	1,250. 750. 0.	emplo and def	see instru (d) Contribu employee plans and c	O. O. uctions	s). If no	one, (0. 0. 0. count,
P.O KENI P.O E.M P.O See	ES W. FERBER BOX 692709 ORLANDO FL 32869 NETH D. ROBINSON BOX 692709 ORLANDO FL 32869 TUKDARIAN BOX 692709 ORLANDO FL 32869 Statement Compensation of five highest-paid employed "NONE."	hou devote CHAII PRESID TREAS	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00 ASST SEC 8.00 12.00 er than those (b) Title, and a hours per week hours per week ed to per week hours per week ed to per week 12.00	se incl	1,250. 750. 0. 4,750. uded on li	emplo and def	see instru	O. O. uctions	s). If no	one, o	0. 0. 0. count,
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P.O KENI P.O E.M P.O See	ES W. FERBER BOX 692709 ORLANDO FL 32869 NETH D. ROBINSON BOX 692709 ORLANDO FL 32869 TUKDARIAN BOX 692709 ORLANDO FL 32869 Statement Compensation of five highest-paid employed "NONE."	hou devote CHAII PRESID TREAS	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00 ASST SEC 8.00 12.00 er than those (b) Title, and a hours per week hours per week ed to per week hours per week ed to per week 12.00	se incl	1,250. 750. 0. 4,750. uded on li	emplo and def	see instru (d) Contribu employee plans and c	O. O. uctions	s). If no	one, o	0. 0. 0. count,
P.O KENI P.O E.M P.O See	ES W. FERBER BOX 692709 ORLANDO FL 32869 NETH D. ROBINSON BOX 692709 ORLANDO FL 32869 TUKDARIAN BOX 692709 ORLANDO FL 32869 Statement Compensation of five highest-paid employed "NONE."	hou devote CHAII PRESID TREAS	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00 ASST SEC 8.00 12.00 er than those (b) Title, and a hours per week hours per week ed to per week hours per week ed to per week 12.00	se incl	1,250. 750. 0. 4,750. uded on li	emplo and def	see instru (d) Contribu employee plans and c	O. O. uctions	s). If no	one, o	0. 0. 0. count,
P.O KENI P.O E.M P.O See	ES W. FERBER BOX 692709 ORLANDO FL 32869 NETH D. ROBINSON BOX 692709 ORLANDO FL 32869 TUKDARIAN BOX 692709 ORLANDO FL 32869 Statement Compensation of five highest-paid employed "NONE."	hou devote CHAII PRESID TREAS	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00 ASST SEC 8.00 12.00 er than those (b) Title, and a hours per week hours per week ed to per week hours per week ed to per week 12.00	se incl	1,250. 750. 0. 4,750. uded on li	emplo and def	see instru (d) Contribu employee plans and c	O. O. uctions	s). If no	one, o	0. 0. 0. count,
P.O KENI P.O E.M P.O See	ES W. FERBER BOX 692709 ORLANDO FL 32869 NETH D. ROBINSON BOX 692709 ORLANDO FL 32869 TUKDARIAN BOX 692709 ORLANDO FL 32869 Statement Compensation of five highest-paid employed "NONE."	hou devote CHAII PRESID TREAS	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00 ASST SEC 8.00 12.00 er than those (b) Title, and a hours per week hours per week ed to per week hours per week ed to per week 12.00	se incl	1,250. 750. 0. 4,750. uded on li	emplo and def	see instru (d) Contribu employee plans and c	O. O. uctions	s). If no	one, o	0. 0. 0. count,
P.O KENI P.O E.M P.O See	ES W. FERBER BOX 692709 ORLANDO FL 32869 NETH D. ROBINSON BOX 692709 ORLANDO FL 32869 TUKDARIAN BOX 692709 ORLANDO FL 32869 Statement Compensation of five highest-paid employed "NONE."	hou devote CHAII PRESID TREAS	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00 ASST SEC 8.00 12.00 er than those (b) Title, and a hours per week hours per week ed to per week hours per week ed to per week 12.00	se incl	1,250. 750. 0. 4,750. uded on li	emplo and def	see instru (d) Contribu employee plans and c	O. O. uctions	s). If no	one, o	0. 0. 0. count,
P.O KENI P.O E.M P.O See	ES W. FERBER BOX 692709 ORLANDO FL 32869 NETH D. ROBINSON BOX 692709 ORLANDO FL 32869 TUKDARIAN BOX 692709 ORLANDO FL 32869 Statement Compensation of five highest-paid employed "NONE."	hou devote CHAII PRESID TREAS	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00 ASST SEC 8.00 12.00 er than those (b) Title, and a hours per week hours per week ed to per week hours per week ed to per week 12.00	se incl	1,250. 750. 0. 4,750. uded on li	emplo and def	see instru (d) Contribu employee plans and c	O. O. uctions	s). If no	one, o	0. 0. 0. count,
P.O KENI P.O E.M P.O See	ES W. FERBER BOX 692709 ORLANDO FL 32869 NETH D. ROBINSON BOX 692709 ORLANDO FL 32869 TUKDARIAN BOX 692709 ORLANDO FL 32869 Statement Compensation of five highest-paid employed "NONE."	hou devote CHAII PRESID TREAS	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00 ASST SEC 8.00 12.00 er than those (b) Title, and a hours per week hours per week ed to per week hours per week ed to per week 12.00	se incl	1,250. 750. 0. 4,750. uded on li	emplo and def	see instru (d) Contribu employee plans and c	O. O. uctions	s). If no	one, o	0. 0. 0. count,
P.O KENI P.O E.M P.O See	ES W. FERBER BOX 692709 ORLANDO FL 32869 NETH D. ROBINSON BOX 692709 ORLANDO FL 32869 TUKDARIAN BOX 692709 ORLANDO FL 32869 Statement Compensation of five highest-paid employed "NONE."	hou devote CHAII PRESID TREAS	rs per week ed to position RMAN/DIR 12.00 ENT/CEO/DIR 12.00 ASST SEC 8.00 12.00 er than those (b) Title, and a hours per week hours per week ed to per week hours per week ed to per week 12.00	se incl	1,250. 750. 0. 4,750. uded on li	ne 1—	see instru (d) Contribu employee plans and c compens	plans on attorn O . O . uction: uttons to benefit deferred satton	s). If no	one, o	0. 0. 0. count,

	and Contractors (continued) Five highest-paid independent contractors for professional services. See instructions. If none, enter "NON	F "
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	R	
	<u></u>	
<u> </u>		
Tota	I number of others receiving over \$50,000 for professional services	0
	t IX-A Summary of Direct Charitable Activities	
	at the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	MAINTAIN AND IMPROVE PROGRAM RELATED INVESTMENT PROPERTY, RECREATIONAL FACILITIES AND LAND	
	IMPROVEMENTS. FACILITIES SERVE THE DR. PHILLIPS COMMUNITY IN ORANGE COUNTY, FLORIDA THIS AMOUNT IS	
	INCLUDED, ALONG WITH OTHER MISCELLANEOUS EXPENSES IN PART I, LINE 24(d) - \$207,460	17,987.
2	SOFTWARE FOR INTERACTIVE VIDEO SCREENS FOR UCF COLLEGE STUDENT USE AT DOWNTOWN	
	UCF CAMPUS TO PROVIDE STUDENTS WITH HISTORY ON REGION AND DR. PHILLIPS THIS	
	AMOUNT IS INCLUDED, ALONG WITH GRANTMAKING SOFTWARE COSTS IN LINE 23 - \$48,367	39,084.
3	CONSULTANT COSTS TO EXPAND REACH OF SAFE START DROWNING PREVENTION PROGRAM (\$10,000), DESIGN COSTS OF CITY OF ORLANDO OUTDOOR PAVILION FOR LOCAL NONPROFIT ARTS ORGANIZATIONS (\$50,016) AND MASTER PLAN OF	
	4R FARM TO EDUCATE STUDENTS ON HEALTHY FARMING AND NUTRITION (\$27,013), LINE 16(c)	87,029.
4		
Par	t IX-B Summary of Program-Related Investments (see instructions)	ı
	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
2		
Ail	other program-related investments. See instructions	
3		
Tota	I. Add lines 1 through 3	
		Form 990-PF (2019

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreit see instructions.)	ign to	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	38,052,617.
b	Average of monthly cash balances	1b	1,888,551.
c	Fair market value of all other assets (see instructions)	1c	1,577,251.
ď	Total (add lines 1a, b, and c)	1d	41,518,419.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	41,518,419.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	1,048,214.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	40,470,205.
6	Minimum investment return. Enter 5% of line 5	6	2,023,510.
Part		ounda	ations
1	Minimum investment return from Part X, line 6	1	2,023,510.
2a	Tax on investment income for 2019 from Part VI, line 5 2a 21,819.		· · · · · · · · · · · · · · · · · · ·
b	Income tax for 2019. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	2c	21,819.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,001,691.
4	Recoveries of amounts treated as qualifying distributions	4	768,678.
5	Add lines 3 and 4	5	2,770,369.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		1
	line 1	7	2,770,369.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	2,793,278.
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	2,793,278.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		i _
	Enter 1% of Part I, line 27b See instructions	5	21,819.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,771,459.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whe	ther the foundation

Part	XIII Undistributed Income (see instruction	ons)			
`		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI,				2,770,369.
2	Undistributed income, if any, as of the end of 2019				1
а	Enter amount for 2018 only				į
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2019:				
а	From 2014 0 .				į
b	From 2015 0 .				
C	From 2016				
d	From 2017				
е	From 2018 <u>14,824.</u>				
f	Total of lines 3a through e	14,824.			
4	Qualifying distributions for 2019 from Part XII, line 4: ► \$ 2,793,278.				
	Applied to 2018, but not more than line 2a .				
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2019 distributable amount				2,770,369.
е	Remaining amount distributed out of corpus	22,909.			
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	37,733.			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
С	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				·
ď.	Subtract line 6c from line 6b. Taxable				
	amount-see instructions		0.		
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see				
	instructions	!		0.	
f	Undistributed income for 2019. Subtract lines				
•	4d and 5 from line 1. This amount must be distributed in 2020				0.
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)				
ρ	Excess distributions carryover from 2014 not				
8	applied on line 5 or line 7 (see instructions)	0.			
9	Excess distributions carryover to 2020.	37 733			
10	Subtract lines 7 and 8 from line 6a	37,733.		_	
10	Analysis of line 9: Excess from 2015				
a b	Excess from 2016 0 .	1			
C	Excess from 2017 0.	İ			
d	Excess from 2018 14,824.				
_	Excess from 2019 22,909.			<u></u>	

orm 99	90-PF (2019)					Page 10
Part	XIV Private Operating Foundation	ons (see ınstru	ctions and Part	VII-A, question 9		N/A
1a	If the foundation has received a ruling foundation, and the ruling is effective for 2					
b	Check box to indicate whether the found	lation is a private	operating founda	tion described in se	ction 🗌 4942(j)((3) or 🔲 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(0) 7000
b	85% of line 2a	<u>-</u>	_			
С	Qualifying distributions from Part XII, line 4, for each year listed					_
d	Amounts included in line 2c not used directly for active conduct of exempt activities .					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter:		\times			
	(1) Value of all assets (2) Value of assets qualifying under	-				
b	section 4942(j)(3)(B)(i)					
	Part X, line 6, for each year listed					
С	"Support" alternative test-enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
Ć	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income .			<u> </u>	1.47.000	
Part	•		-	the foundation ha	ad \$5,000 or m	ore in assets at
1	any time during the year—s Information Regarding Foundation M	•	15.j			
	List any managers of the foundation who before the close of any tax year (but on	no have contribu				by the foundation
	NONE	· · · · · · · · · · · · · · · · · · ·				
b	List any managers of the foundation w ownership of a partnership or other enti-					rge portion of the
	NONE					
2	Information Regarding Contribution, Check here ▶ ☐ If the foundation or unsolicited requests for funds. If the foundation for	nly makes contr	butions to prese	elected charitable of		
	complete items 2a, b, c, and d. See inst		giito, granto, etc.,	, to mainidadio or or	gameanono anao	outer conditions,
а	The name, address, and telephone num	ber or email add	dress of the perso	on to whom applicat	tions should be ac	ddressed:
	See Supplementary Information	on Statemen	t			
	The form in which applications should be			materials they shou	uld include:	
С	Any submission deadlines:					
d	Any restrictions or limitations on awa factors:	rds, such as by	y geographical a	reas, charitable fie	lds, kinds of ins	titutions, or other

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Form **990-PF** (2019)

Form 990-PF (2019) Page 11 Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year 4R FOUNDATION, INC. (THE) PC FARM CAMPUS & 275,000. DISTRIBUTION CENTER 210 N PARK AVENUE PROGRAM SUPPORT WINTER PARK FL 32789-3814 PC 1,050. ADULT LITERACY LEAGUE, INC. PROGRAM SUPPORT TO 633 N ORANGE AVENUE SUPPORT LITERACY ORLANDO FL 32801 PROGRAM SUPPORT TO PC 500. ALZHEIMER'S DISEASE & RELATED DISORDERS ASSOCIATION, INC FIND CURE FOR 2180 WEST SR 434, STE 1100 ALZHEIMER'S LONGWOOD FL 32779 PROGRAM SUPPORT TO AMERICAN DIABETES ASSOCIATION - FLORIDA AFFILIATE, INC PC 16,000. FIND CURE FOR 2301 MAITLAND CENTER PARKWAY, STE 126 DIABETES MAITLAND FL 32751 PROGRAM SUPPORT TO 10,000. ANNIKA FOUNDATION, INC. PC PROMOTE HEALTHY, 1257 WORCHESTER ROAD, #254 ACTIVE LIFESTYLE FRAMINGHAM MA 01701 PC CHRISTMAS PROGRAM BABY DJ 2,500. FOR DISADVANTAGED 2500 MAITLAND CENTER PARKWAY, STE 401 CHILDREN MAITLAND FL 32751 BALLET MAGNIFICAT! 2,500. PC PROGRAM SUPPORT 5406 I 55 NORTH JACKSON MS 39211 PROGRAM SUPPORT BLOOM AND GROW GARDEN SOCIETY, INC 2,000. PC 1630 VICTORIA WAY WINTER GARDEN FL 34787 SUPPORT YOUTH PC BOY SCOUTS OF AMERICA, CENTRAL FLORIDA COUNCIL 1951 LEADERSHIP & 4H S. ORANGE BLOSSON TRAIL, STE 102 59,783. STEER PURCHASE APOPKA FL 32703 See Statement 2,201,258.

Total			▶ 3a	2,570,591.
b Approved for future payment				
UNITED ARTS OF CENTRAL FLORIDA, INC.				
2450 MAITLAND CENTER PARKWAY, STE 201]		
MAITLAND FL 32751		PC	CAPITAL IMPROVEMENTS	500,000.
	!			
		l		

500,000.

▶

3b

nter	gross amou	unts unless otherwise indicated.	Unrelated but	siness income	Excluded by sect	ion 512, 513, or 514	(e)
	_		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.
	•	rvice revenue:					
					+		
					+		
					-		
					-		
					+		-
		d and the state from the state of the state	ļ		 		
	-	d contracts from government agencies	-	<u> </u>	-	_	
	-	o dues and assessments			1.4	242 600	
		avings and temporary cash investments			14	242,690.	
		nd interest from securities			14	864,193.	
		ncome or (loss) from real estate:					
		anced property					
		t-financed property			16	8,355.	
		ncome or (loss) from personal property					
		tment income			14	1,347.	
	•) from sales of assets other than inventory			18	1,069,392.	
		or (loss) from special events					
	•	or (loss) from sales of inventory					
11	Other reven	ue. a					
	b						
	·						
	d						
	a						
12	Subtotal. A	dd columns (b), (d), and (e)		-		2,185,977.	
		line 12, columns (b), (d), and (e)				13	2,185,977
	i Otali. Adu						
		n line 13 instructions to verify calculation					
See v			ns.)				
ee v Par	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed ii	
ee v Par	vorksheet ii XVI-B	n line 13 instructions to verify calculation	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
ee v Par Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
ee v Par Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
ee v Par Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
ee v Par Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
ee v Par Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
ee v Par Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
ee v Par Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
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ee v Pari Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
ee v Par Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
ee v Par Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
ee v Par Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
ee v Par Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
ee v Pari Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
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ee v Pari Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
ee v Pari Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
ee v Pari Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
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ee v Par Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
ee v Par Line	vorksheet ii XVI-B	n line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm e	ent of Exem _l	ot Purposes	I-A contributed in oses) (See instruc	
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Part	XVII	Information Organization		rding Tran	sfers to	and Tran	sactio	ns and R	elationshi	ps Wi	th No	nchari	table	Exe	mpt
1 a	ın se organ	e organization oction 501(c) (oizations?	ther tha	n section	501(c)(3)) organizati	ons) or	in section	on 527, re	nızatıo latıng	n desc to po	ribed litical		Yes	No
•	(1) Ca	ash	_				-						1a(1)		×
	` '	her assets .											1a(2)		×
a		transactions:	a nonch	aritable eve	mot oraș	anization							1b(1)		J
		lles of assets to irchases of asse								• •		-	1b(1)		×
		ental of facilities,											1b(3)		×
		eimbursement ai											1b(4)		×
		ans or loan gua	_										1b(5)		×
	(6) Pe	erformance of se	ervices or	r membersh	ıp or fun	draising sol	icitation	s					1b(6)		×
С	Sharır	ng of facilities, e	quipmen	t, mailing lis	ts, other	rassets, or p	paid em	ployees .				. [1c		×
d		answer to any													
		of the goods, o													
(a) Line) Amount involved				empt organizat			ption of transfe						
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	descr	foundation direbed in section 5, complete the	501(c) (ot	her than sec	ction 501							_	Y€	es 🗵	No
		(a) Name of organ	ization			(b) Type of or	ganization			(c) Desc	enption o	of relations	ship		
															
						_									
									•		_				
				-		·									
	Under	penalties of pegury, I	declare that	t I have examine	d this return	n, including acco	mpanying s	schedules and	statements, and	d to the b	est of my	knowledg	e and l	belief, it	is true,
Sign Here	correc	t, and complete Deck	aration of pro				nformation	of which prepa	arer has any kno		W.	lay the IRS of the pre ee instruct	S discu	ss this	retum elow?
	Jaigita	ture of officer or trus Print/Type preparer			Preparer	r's signature	ride		Date			_ I p	TIN		
Paid		Tara Miller	o name		·	ra Hiller	_		3/11/202	1	Check [self-emp	If	•		
Prepa		Firm's name	BDO U	JSA, LLP	1 100	· · · · · · ·	-		<u> </u>	Firm's		.3 - 538	3159	0	
Use ()nly	Firm's name ► Firm's address ►	450 S	ORANGE A	VE CIT	ITE 550, O		FL 3280	1	Phone				<u> </u>	
		. am 5 address P	- 10 D	OKANGE A	· , .3U.	<u> 330, O</u>	, UUMUU,	J20U				For	ga	0-PF	(2019)

THE DR. P. PHILLIPS FOUNDATION Form 990-PF: Return of Private Foundation

Continuation Statement Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc.

Name and Address Information	Form Information	Submission Information	Restrictions
SEE ATTACHED STATEMENT	SEE ATTACHED STATEMENT	SEE ATTACHED	SEE ATTACHED
P.O. BOX 692709		STATEMENT	STATEMENT
ORLANDO, FL 32869-2709			
407-422-6105			



Part XV, Line 3a: Grants and Contributions Paid During the Year

Tart AV, Emic oa. Grants and Continue				
Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC		PC	PROGRAM SUPPORT	35,000.
101 EAST COLONIAL DRIVE				
ORLANDO, FL 32801				
CENTRAL CARE MISSION OF ORLANDO, INC.		PC	LIFE SKILLS	22,289.
4027 LENOX BLVD			CENTER & STEER PURCHASE	
ORLANDO, FL 32811				
CENTRAL FLORIDA FAIR, INC.		PC	PROGRAM SUPPORT	500.
4603 W. COLONIAL DRIVE				
ORLANDO, FL 32808				
CENTRAL FLORIDA REGIONAL WORKFORCE DEVELOPMENT BOARD, INC		PC	SUMMER YOUTH	20,000.
390 N ORANGE AVENUE, STE 700		į	EMPLOYMENT PROGRAM	
ORLANDO, FL 32801 CENTRAL FLORIDA YOUNG MEN'S CHRISTIAN ASSOCIATION, INC.		DG.	l	2 500
433 N MILLS AVENUE		PC	PROGRAM SUPPORT	2,500.
ORLANDO, FL 32803				
CHRISTIAN SERVICE CENTER FOR CENTRAL FLORIDA, INC		PC	COMBAT	25,000.
808 W. CENTRAL BLVD		"	HOMELESSNESS &	23,000.
ORLANDO, FL 32805			POVERTY	
COALITION FOR THE HOMELESS OF CENTRAL FLORIDA, INC		PC	COMBAT	22,000.
PO BOX 3467			HOMELESSNESS	
ORLANDO, FL 32802-3467				
COLUMBIA THEOLOGICAL SEMINARY		PC	PROGRAM SUPPORT	1,000.
PO BOX 520				
DECATUR, GA 30031-9954				
DREAMFLIGHT USA, INC.		PC	PROGRAM SUPPORT	5,000.
PO BOX 252				
GOLDENROD, FL 32733				
EDGEWOOD CHILDREN'S RANCH, INC.		PC	SERVICES FOR	38,509.
1451 EDGEWOOD RANCH ROAD			YOUTH IN	
ORLANDO, FL 32835			RESIDENTIAL CARE	
EDGEWOOD RANCH ENDOWMENT, INC.		PC	SERVICES FOR	10,000.
PO BOX 185			YOUTH IN	
WINDERMERE, FL 34786-0185			RESIDENTIAL CARE	
FELLOWSHIP OF FAITH MINISTRY		PC	STEER PURCHASE	2,289.
P.O. BOX 560484				
ORLANDO, FL 32856				
FLORIDA CITRUS SPORTS ASSOCIATION, INC.		PC	PROGRAM SUPPORT	1,000.
1 CITRUS BOWL PLACE				_,
ORLANDO, FL 32805				
FLORIDA LEADERSHIP VENTURE INC.		PC	POST-SECONDARY	69,200.
PO BOX 940633			COORDINATOR STAFF	•
MAITLAND, FL 32794			POSITION	
FOUNDATION FOR ORANGE COUNTY PUBLIC SCHOOLS, INC.		PC	PROGRAM SUPPORT &	15,000.
455 W AMELIA STREET, STE 901			ANTI-BULLYING	
ORLANDO, FL 32801				
FRIENDS OF LEU GARDENS, INC.		PC	PROGRAM SUPPORT	3,000.
1920 NORTH FOREST AVENUE				•
ORLANDO, FL 32803				
OKEREDO) 12 32003	<u>l</u>	<u> </u>	<u> </u>	

Part XV, Line 3a: Grants and Contributions Paid During the Year

Part AV, Line 3a. Grants and Continue	itions I ala balling the	c i cai		ion Statement
Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
GARDEN THEATRE, INC.		PC	CULTURAL	5,700.
160 WEST PLANT STREET			PROGRAMMING	
WINTER GARDEN, FL 34787				
GRACE MEDICAL HOME, INC.		PC	PROGRAM SUPPORT	5,000.
1417 E CONCORD STREET				
ORLANDO, FL 32803		-		
GUARDIAN CARE, INC.		PC	CAPITAL	223,990.
2500 W CHURCH STREET			IMPROVEMENTS	
ORLANDO, FL 32805-2330]	
HALL OF FAME FOUNDATION, INC.		PC	PROGRAM SUPPORT	2,500.
PO BOX 86144				
ST. PETERSBURG, FL 33738			1	
HARBOR HOUSE OF CENTRAL FLORIDA, INC.		PC	STEER PURCHASE	4,622.
P.O. BOX 680748				
ORLANDO, FL 32868				
HONOR FLIGHT OF CENTRAL FLORIDA, INC.		PC	PROGRAM SUPPORT	5,000.
BOX #321, 1170 TREE SWALLOW DRIVE				
WINTER SPRINGS, FL 32708				
HOPE HELPS, INC.		PC	PROGRAM SUPPORT	2,000.
812 EYRIE DRIVE				
OVIEDO, FL 32765				
IDIGNITY, INC.		PC	PROGRAM SUPPORT	5,000.
424 E CENTRAL BLVD, STE 199				
ORLANDO, FL 32801 James Madison institue for public policy studies, inc. (The)		PC	PRINCIPLES OF	40,000.
2017 DELTA BLVD, STE 102			FREE ENTERPRISE	
TALLAHASSEE, FL 32303				
JIMMY CRABTREE CANCER FUND, INC.		PC	CANCER FAMILY	6,000.
P.O. BOX 770446			SUPPORT	
WINTER GARDEN, FL 34777-0046				
JUNIOR ACHIEVEMENT OF CENTRAL FLORIDA, INC.		PC	PROGRAM SUPPORT	10,000.
2121 CAMDEN ROAD				
ORLANDO, FL 32803-1447				
KATE & JUSTIN ROSE FOUNDATION INC.		PC	PROGRAM SUPPORT	10,000.
10524 MOSS PARK ROAD, STE 204-712				
ORLANDO, FL 32832		-	1011110	
LAKE NONA INSTITUTE, INC.		PC	ADVANCE SUSTAINABLE	20,000.
6900 TAVISTOCK LAKES BLVD, STE 200			HEALTH	
ORLANDO, FL 32827			COMMUNITIES	
LEUKEMIA & LYMPHOMA SOCIETY, INC. (THE)		PC	IMPROVE QUALITY	2,000.
341 N. MAITLAND AVENUE, SUITE 100			OF LIFE FOR PATIENTS	
MAITLAND, FL 32751				
LIFE CONCEPTS, INC.		PC	FARMING PROJECT	10,000.
500 E COLONIAL DRIVE				
ORLANDO, FL 32803-4504				
MATTHEWS HOPE MINISTRIES, INC.		PC	CAPITAL	76,316.
611 BUSINESS PARK BLVD, #101]	IMPROVEMENTS	
WINTER GARDEN, FL 34787				

Part XV, Line 3a: Grants and Contributions Paid During the Year

Tart AV, Line Ja. Orants and Contribu				
Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
MILKY MADNESS, INC.		PC	YOUTH PROGRAM	1,000.
470 FITZWATER DRIVE			SUPPORT	
WINTER PARK, FL 32792-4737				
NATIONAL PEDIATRIC CANCER FOUNDATION, INC.		PC	PROGRAM SUPPORT	5,000.
5550 WEST EXECUTIVE DRIVE, STE 300				
TAMPA, FL 33609				
NEGRO SPIRITUAL SCHOLARSHIP FOUNDATION, INC		PC	PROGRAM SUPPORT	2,000.
PO BOX 547728				•
ORLANDO, FL 32854-7728				
NEW HOPE FOR KIDS INC.		PC	CAPITAL	75,000.
544 MAYO AVENUE			IMPROVEMENTS	•
MAITLAND, FL 32751-4573			1	
OCA: OPPORTUNITY, COMMUNITY, ABILITY, INC.		PC	IMPROVE LIFE	10,000.
4917 ELI STREET		1.0	SKILLS	10,000.
ORLANDO, FL 32804				
OPERA ORLANDO, INC.		PC	OPERA PROGRAMMING	13,000.
P.O. BOX 533974		1.0		13,000.
		i		
ORLANDO, FL 32853		DC.	DALLEM	357 000
ORLANDO BALLET, INC.		PC	BALLET PROGRAMMING &	357,000.
600 N LAKE FORMOSA DRIVE			CAPITAL	
ORLANDO, FL 32803			IMPROVEMENTS	
ORLANDO HEALTH, INC.		PC	HEALTH OF FAMILY	20,000.
1414 S. KUHL AVENUE			& CHILDREN	
ORLANDO, FL 32806				
ORLANDO HEALTH FOUNDATION, INC.		PC	PROGRAM SUPPORT	2,500.
3160 SOUTHGATE COMMERCE BLVD, STE 50				
ORLANDO, FL 32806-8549			[
ORLANDO MAGIC YOUTH FOUNDATION, INC.	···	PC	PROGRAM SUPPORT	2,500.
8701 MAITLAND SUMMIT BLVD				•
ORLANDO, FL 32810				
ORLANDO MUSEUM OF ART, INC.		PC	SUPPORT HOLIDAY	11,000.
2416 N. MILS AVENUE			EVENT FOR	,
ORLANDO, FL 32803			FAMILIES	
ORLANDO PHILHARMONIC ORCHESTRA, INC. (THE)		PC	SUPPORT ARTS	54,403.
425 N. BUMBY AVENUE		-	PROGRAMMING	34,403.
ORLANDO, FL 32803				
ORLANDO REPERTORY THEATRE, INC.		PC	YOUTH THEATRE	1,500.
•		-	PROGRAMMING	1,500.
10010 E PRINCETON STREET				
ORLANDO, FL 32803	<u> </u>	70	T HADED CUTS 311255	272 500
ORLANDO SCIENCE CENTER, INC.		PC	LEADERSHIP AWARD	273,500.
777 EAST PRINCETON STREET			L ROGRAM BUFFORT	
ORLANDO, FL 32803		ļ		
ORLANDO SHAKESPEARE THEATER, INC.		PC	SUPPORT OF ARTS	5,000.
812 E. ROLLINS STREET, SUITE 100			PROGRAMMING	
ORLANDO, FL 32803				
PARKINSON ASSOCIATION OF GREATER DAYTONA BEACH, INC		PC	PROGRAM SUPPORT	1,000.
555 W GRANADA BLVD, STE A-1				
ORMOND BEACH, FL 32174	<u> </u>	l		

Part XV, Line 3a: Grants and Contributions Paid During the Year

Part XV, Line 3a: Grants and Contribu	, 	T		
Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
PET ALLIANCE OF GREATER ORLANDO, INC.		PC	PROGRAM SUPPORT	1,000.
2727 CONROY ROAD				
ORLANDO, FL 32839				
REFORMED THEOLOGICAL SEMINARY, INCORPORATED		PC	PROGRAM SUPPORT	5,000.
5422 CLINTON BLVD			i i	
JACKSON, MS 39209				
ROTARY CLUB OF COLLEGE PARK FOUNDATION, INC		PC	SUPPORT LOCAL ESTABLISHMENTS	3,500.
P.O. BOX 540000			ESTABLISHMENTS	
ORLANDO, FL 32854		D.C.	HOLTDAY CAMPATON	20.000
SALVATION ARMY (THE)		PC	HOLIDAY CAMPAIGN	20,000.
416 WEST COLONIAL DRIVE				
ORLANDO, FL 32804 SECOND HARVEST FOOD BANK OF CENTRAL FLORIDA, INC.				24 222
411 MERCY DRIVE		PC	STEER PURCHASE & FEEDING FAMILIES	24,090.
ORLANDO, FL 32805			DURING COVID	
SERVANT'S HEART INTERNATIONAL MINISTRY, INC.		PC	PROGRAM SUPPORT	2,500.
6409 ANNO AVENUE		-	TROOMER BOTTORT	2,300.
ORLANDO, FL 32809				
SPINA BIFIDA ASSOCIATION OF CENTRAL FLORIDA, INC.		PC	PROGRAM SUPPORT	1,000.
1000 W LUCERNE CIRCLE, STE 100G				-,
ORLANDO, FL 32801				
STEINWAY SOCIETY OF CENTRAL FLORIDA, INC.		PC	PROGRAM SUPPORT	2,000.
520 WEST HIGHWAY 436, # 1140				
ALTAMONTE SPRINGS, FL 32714				
SUNSYSTEM DEVELOPMENT CORP dba ADVENTHEALTH FOUNDATION		PC	HEATH FOR	15,000.
550 EAST ROLLINS STREET, 6TH FLOOR			CHILDREN & BABIES	
ORLANDO, FL 32803		DG	DIGUE DOVEDNIA	20.000
UNITED AGAINST POVERTY, INC.		PC	FIGHT POVERTY DURING COVID	20,000.
150 W MICHIGAN STREET			BORTING COVID	
ORLANDO, FL 32806				
UNITED ARTS OF CENTRAL FLORIDA, INC.		PC	CAPITAL IMPROVEMENTS	507,500.
2450 MAITLAND CENTER PARKWAY, STE 201 MAITLAND, FL 32751			THI KOV BIABRIS	
UNITED CEREBRAL PALSY OF CENTRAL FLORIDA, INC		PC	EMPOWER CHILDREN	10,000.
4780 DATA COURT		• •	WITH DISABILITIES	10,000.
ORLANDO, FL 32817			TO REACH THEIR	
•			POTENTIAL	
UNIVERSITY OF CENTRAL FLORIDA FOUNDATION, INC		PC	EDUCATION SUPPORT	2,500.
12424 RESEARCH PARKWAY, STE 250				
ORLANDO, FL 32826				
URBAN THINK FOUNDATION, INC.		PC	STAFF DEVELOPMENT	47,500.
P.O. BOX 533709			a footh Literact	
ORLANDO, FL 32853				
WEST ORANGE FOUNDATION, INC.		PC	PROGRAM SUPPORT	350.
12184 W. COLONIAL DRIVE				
WINTER GARDEN, FL 34787				
YOUNG LIFE, INC.		PC	PROGRAM SUPPORT	3,500.
450 S ORLANDO AVENUE, 11TH FLOOR				
ORLANDO, FL 32801			<u> </u>	

Part XV, Line 3a: Grants and Contributions Paid During the Year

Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
YOUNG SURVIVIAL COALITION, INC.		PC	PROGRAM SUPPORT	1,000
80 BROAD STREET, STE 1700				
NEW YORK, NY 10004				
				2,201,258

THE DR. P. PHILLIPS FOUNDATION Form 990-PF: Return of Private Foundation

Part VIII: Information about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors	Foundation Managers, Hig	ghly Paid Employees, a		Continuation Statement
Name and address	Title, and average hours per week devoted to position	Compensation	Contributions to employee benefit plans and deferred compensation	Expense account, other allowances
H.L. BURNETT	EVP/SEC/ASST TREAS/DIR	1,625.	0	0.
P.O. BOX 692709	0.00			
ORLANDO, FL 32869				
MARGARET G. MILLER	DIRECTOR	1,125.	0	0.
P.O. BOX 692709	2.00			
ORLANDO, FL 32869				
JOHN W. HILLENMEYER	DIRECTOR	1,125.	0	0.
P.O. BOX 692709	2.00			
ORLANDO, FL 32869				
ROBIN K. KELLEY	DIRECTOR	875.	.0	0.
P.O. BOX 692709	2.00			
ORLANDO, FL 32869				
		4,750.	0.	0.

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Other Income

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income
OTHER INCOME	1,347.	1,347.	
Total	1,347.	1,347.	

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
EXCISE TAX	15,227.			15,227.
TAXES & LICENSES	61.	61.		
Total	15,288.	61.		15,227.

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
INSURANCE	2,897.	1,449.		1,448.
OFFICE EXPENSE	48,499.	132.		48,367.
DUES & SUBSCRIPTIONS	5,175.			5,175.
MISCELLANEOUS	1,870.			1,870.
REPAIRS & MAINTENANCE	25,131.	···		25,131.
COMMUNICATIONS	10,600.			10,600.
Total	94,172.	1,581.		92,591.

Form 990-PF: Return of Private Foundation

Part X, Line 4, Cash Deemed Held For Charitable Activities

Explanation Statement

Cash Deemed Charitable

ACTUAL ADMINISTRATIVE AND OTHER NORMAL AND CURRENT DISBURSEMENTS DIRECTLY CONNECTED WITH THE FOUNDATION'S CHARITABLE ACTIVITY EXCEED THE 1 1/2%

OF THE FAIR MARKET VALUE OF ALL ASSETS.

FYE 5/31/2016 \$ (747,959) FYE 5/31/2017 \$778,551 FYE 5/31/2018 \$1,786,600 FYE 5/31/2019 \$1,996,844 FYE 5/31/2020 \$2,009,374 AVERAGE \$1,164,682

CASH DEEMED HELD FOR CHARITABLE ACTIVITIES

90% OF AVERAGE \$1,048,214

Net Gain or Loss From Sale of Assets

Form 990-PF

me E DR. P. PHILLIPS	S FOUNDATION	Employer Identification No. 59-6135403
Asset Information		
Pueses Code	Evaluation Code	
	Exclusion Code	
Date Acquired	How Acquired Name of Buyer	
Check Box, if Buyer is a	Rusinoss	
• •	_	duce by depreciation)
Sales Frice	Cost or other basis (do not red	duce by depreciation)
Total Coun (Lass)	Valuation Method	
Description of Property	Accumulated Deprec	nation
Description of Property	Fuclusian Code	
	Exclusion Code	
Date Acquired	How Acquired	
Date Sold	Name of Buyer .	
Check Box, if Buyer is a		
Sales Price	Cost or other basis (do not rec	duce by depreciation)
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulated Depred	ation
Description of Property .		
	Exclusion Code	
Date Acquired	How Acquired	
Date Sold	Name of Buyer	
Check Box, if Buyer is a	Business	
Sales Price	Cost or other basis (do not red	duce by depreciation)
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulated Deprec	ciation
Description of Property .		
Business Code	Exclusion Code	
	How Acquired	
Date Sold	Name of Buyer .	
Check Box, if Buyer is a		
Sales Price	Cost or other basis (do not red	duce by depreciation)
	Valuation Method	
		ation

Date Acquired . ____ How Acquired . _____ Date Sold . . . ___ Name of Buyer . _____

Sales Price. . . _ _ _ Cost or other basis (do not reduce by depreciation). . _ _ _ _ Valuation Method. . .

Totals:

Total Gain (Loss) of all assets . . . 1,069,392.

Gross Sales Price of all assets . . . 6,687,675.

Unrelated Business Income Business Coo

Unrelated Business Income Business Code . Excluded by section 512, 513, 514 Exclusion Code .

Related/Exempt Function Income . . _____

Check Box, if Buyer is a Business . . .

Legal and Professional Fees

2019

Name Employer Identification No THE DR. P. PHILLIPS FOUNDATION 59-6135403

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
HASSON LAW GROUP	LEGAL RESEARCH	2,161.			2,161.
Total to Form 990-	PF, Part I, Line 16a	2,161.			2,161.

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BDO	AUDIT SERVICES	6,000.	2,400.		3,600.
Total to Form 990	-PF, Part I, Line 16b	6,000.	2,400.		3,600.

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	-PF, Part I, Line 16c				

Form 990-PF Part II, Lines 6 and 7

Receivables

Name	Employer Identification No
THE DR. P. PHILLIPS FOUNDATION	59-6135403
Landau Information	
Lender Information:	
Loan Receivable Type 3	
Borrowers Name LIFT ORLANDO, INC.	
Borrower's Title NOT-FOR-PROFIT	
Check Box, if Borrower is a Business . X	
· · · · · · · · · · · · · · · · · · ·	ORTGAGE RECEIVABLE
Repayment Terms OVER THREE YEAR PERI	IOD
Borrower's Security LAND	
Purpose of Loan <u>NEIGHBORHOOD TRANSFO</u>	DRMATION
Description of Consideration Lns	
Original Amount 3,100,000.	
Beginning Year Balance 1,750,000.	Year End Balance 981,322.
FMV at Year End 981,322.	FMV of Consideration 981,322.
Allowance for Doubtful Accounts(other loans only)	0 <u>.</u>
Date of Note 05/01/15 Maturity Date	06/30/21 Interest Rate 1.00
Loan Receivable Type	
Borrowers Name	
Borrower's Title	
Check Box, if Borrower is a Business .	
Relationship of Borrower (Other loans only)	
Repayment Terms	·
Borrower's Security	
Purpose of Loan	
Description of Consideration	
Original Amount	
Beginning Year Balance	Year End Balance
FMV at Year End	FMV of Consideration
Allowance for Doubtful Accounts(other loans only)	
Date of Note Maturity Date	
Loan Receivable Type	
Borrowers Name	
Borrower's Title	
Check Box, if Borrower is a Business .	_
Relationship of Borrower (Other loans only)	
Repayment Terms	
Borrower's Security	
Purpose of Loan	
Description of Consideration	
Original Amount	
Beginning Year Balance	Year End Balance
FMV at Year End	FMV of Consideration
Allowance for Doubtful Accounts(other loans only)	
Date of Note Maturity Date	
Date of Note Maturity Date	IIILEIEST NATE
QuickZoom to Form 990-PF, Page 2	

Name THE DR. P. PHILLIPS FOUN	NDATION				yer Identification No
Line 10a - Investments - US and State Government Obligations: End of Year State and Local Obligations Obligations Book Value FMV		End o US Government Obligations Book Value		f Year US Government Obligations FMV	
Tot to Fm 990-PF, Pt II, Ln 10a					
Line 10b - Investme	ents - Corporate	Stock:	Bool Value	K	f Year Fair Market Value
INTERNATIONAL GROWTH LARGE CAP VALUE MID-CAP INDEX See L-10b Stmt Totals to Form 990-PF, Part II, L	ine 10b		3,037 1,662 536 28,353 33,590	,239. ,924. ,447.	
Line 10c - Investme	ents - Corporate I	Bonds:	Bool Valu	k	f Year Fair Market Value
Totals to Form 990-PF, Part II, I	ine 10c				
Line 12 - Investme	ents - Mortgage I	oans:	Bool Valu	k	f Year Fair Market Value
Totals to Form 990-PF, Part II, I	ine 12				
Line 13 - Inve	estments - Other	:	Boo Valu	k	f Year Fair Market Value
Totals to Form 990-PF, Part II, I	_ine 13				

Investments — Land, Buildings, and Equipment

2019

Name	е				Employer Identification No
THE	DR.	Р.	PHILLIPS	FOUNDATION	59-6135403

(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value

Form 990-PF Part II, Line 14

Land, Buildings, and Equipment

Line 14b - Description of Land, Buildings, and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
LAND	177,414.	0.	177,414.
MACHINERY & EQUIPMENT	176,949.	0.	176,949.
LAND IMPROVEMENTS	190,325.	0.	190,325.
HEADQUARTERS BUILDING	8,224,252.	0.	8,224,252.
Totals to Form 990-PF, Part II, Line 14	8,768,940.	0.	8,768,940.

Part II			
Name THE DR. P. PHILLIPS FOUNDATION			ployer Identification No
Line 15 - Other Assets:	Beginning Year Book Value	En Book Value	d of Year Fair Market Value
Totals to Form 990-PF, Part II, line 15			
Line 22 - Other Liabilities:		Beginning Year Book Value	Ending Year Book Value
LEASE DEPOSITS		3,00	0. 3,000.
			Ī

3,000.

3,000.



The Dr. P. Phillips Foundation 59-6135403 Form 990-PF Year ended May 31, 2020

PART XV LINE 2(a), (b), (c), (d) - INFORMATION REGARDING CONTRIBUTION, GRANT, GIFT LOAN, SCHOLARSHIP, ETC., PROGRAMS:

Grant Program:

HECEIVED IN 66RRES

a. The Dr. P. Phillips Foundation
 P.O. Box 692709
 Orlando, FL 32869-2709
 (407) 422-6105

APR 0 2 2021

Attn: Kenneth D. Robinson, President

OGDEN, UTAH

- A two-step process is followed. First, a Letter of Intent is submitted through the b. drphillips.org website. Access to the Letter of Intent may be obtained by request to the address in item 2(a), or through the drphillips.org website. If The Dr. P. Phillips Foundation is interested learning more to determine if grant funding could be awarded, the organization is invited to submit a grant proposal using an online grant application. made available through a link that is emailed to the organization Only organizations who have been invited through the above process may submit a grant application. Required attachments to the application include: (1) a copy of most recent 501(c)(3) certification from the IRS, (2) a signed statement that the 501(c)(3) certification from the IRS for your organization has not been revoked, (3) a signed statement that you are aware that any grant dollars received from this foundation cannot be used to lobby government officials or attempt to influence legislation or public policy. (4) a signed statement that your organization is not currently involved in any lawsuit either filed against it or filed on it's behalf, (5) an independent audit for the most recently completed fiscal year, (6) a management letter from your auditor, (7) if request is for equipment purchase, provide documentation that at least three bids have been obtained and justify selection of vendor, (8) if request is for facility construction or renovation, provide copy of project budget, plans, and documentation that at least three bids have been obtained and justify selection of vendor. (9) a copy of IRS Form 990 for the most recently completed fiscal year, and (10) directions to the location where you would like to hold a site visit for our board members to review and discuss the grant request with representatives from your organization. The application must be completed and mailed or delivered to the Foundation. It must be signed by the chief paid staff member and the Chairman or Vice-Chairman of the Board who is not a paid staff member, signifying board approval of the request.
- c. Grant Proposals are generally accepted three times a year and will be considered at subsequent Board Meetings generally scheduled in January, May, and September after it is verified that all required information has been provided. Grant Proposals should be received by the specific due dates which are generally at least 45 days prior to the scheduled meetings.
- d. Principally to respond to the needs of Orange and Osceola County, Florida organizations tax-exempt under Section 501(c)(3) of the Internal Revenue Code. The Foundation does NOT make grants:
 - to individuals or private foundations

- to social, religious, fraternal or veterans groups that primarily benefit their own members or adherents
- to private schools for projects, other than scholarships that use a notionally accepted screening criteria to determine financial need
- to retire accumulated debt
- for legislative lobbying or other political purposes
- to purchase vehicles.