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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

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2019

OMB No. 1545-0052

Return of Private Foundation

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

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

Open to Public Inspection

For	caler	ndar year 2019, or tax year beginning	07-01-20)19 , aı	nd er	nding 06-30-	2020		
		Indation FAMILY FOUNDATION INC				A Employer identification number			
						59-3613920			
		d street (or P.O. box number if mail is not delivered to s ERGREEN AVENUE	treet address)	Room/suite		B Telephone number (see instructions)			
						(904) 739-1311			
		n, state or province, country, and ZIP or foreign postal c LLE, FL 322063127	ode			C If exemption	application is pendin	g, check here	
G Cł	neck al	that apply: Initial return Initial	return of a	former public charity		D 1. Foreign org	ganizations, check he	ere	
		Final return Ame	nded return				ganizations meeting		
		Address change Nam	e change				k here and attach co	· -	
H C	neck ty	vpe of organization: \blacksquare Section 501(c)(3) exe	mpt private 1	foundation			ındation status was t n 507(b)(1)(A), chec		
	Section	n 4947(a)(1) nonexempt charitable trust \Box	Other taxable	e private foundation					
		ket value of all assets at end from Part II, col. (c),	method:	☑ Cash ☐ Accru	ıal		tion is in a 60-montl n 507(b)(1)(B), chec		
		▶\$ 2.465.023 Under		be on cash basis.)		under section	1 307(b)(1)(b), chec	Kilele	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and	I			(d) Disbursements	
		of amounts in columns (b), (c), and (d) may not neceequal the amounts in column (a) (see instructions).)	essarily	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc., received (attaschedule)	ach						
	2	Check ▶ ✓ if the foundation is not required t	o attach						
	_	Sch. B Interest on savings and temporary cash invest		832	,	832			
e e	3	Dividends and interest from securities	illelits	70,648		70,648			
	- Ба	Gross rents		7 070 10	1-	7 6 7 6 10			
	ь	Net rental income or (loss)							
	6a	Net gain or (loss) from sale of assets not on lin	ne 10	247,317	7				
e IX	b	Gross sales price for all assets on line 6a							
Revenue	_	·	783,612			247.247			
ш.	7 8	Capital gain net income (from Part IV, line 2) Net short-term capital gain				247,317			
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	ь	Less: Cost of goods sold							
	С	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11		318,797	7	318,797			
	13	Compensation of officers, directors, trustees, e	etc.	()	0		0	
	14	Other employee salaries and wages							
es	15	Pension plans, employee benefits							
ens	16a	Legal fees (attach schedule)							
and Administrative Expenses	b	Accounting fees (attach schedule)			_				
Ve	_ c	Other professional fees (attach schedule)			-				
ati	17	Interest							
isti	18	Taxes (attach schedule) (see instructions)			_				
Ξ	19	Depreciation (attach schedule) and depletion							
Ad	20 21	Occupancy			1				
pu	22	Printing and publications							
	23	Other expenses (attach schedule)		24,207	7	24,207		0	
Operating	24	Total operating and administrative expens			+	·			
Der.		Add lines 13 through 23		24,207	,	24,207		0	
Ō	25	Contributions, gifts, grants paid		125,500				125,500	
	26	Total expenses and disbursements. Add lin	nes 24 and	149,707	,	24,207		125,500	
	27	Subtract line 26 from line 12:		115,707		21,207		125,500	
	a	Excess of revenue over expenses and							
	ь	disbursements Net investment income (if negative, enter -	0-)	169,090	1	294,590			
	c	Adjusted net income (if negative, enter -0-)			\vdash	254,330			
For		work Reduction Act Notice, see instruction		I	1 (Cat. No. 11289X	For	l m 990-PF (2019)	

Beginning of year

Page 2

2,465,023

End of year

1,946,760

1,946,760

1,946,760

1,946,760

1

2

3

4

5

6

1,777,670

1,946,760

1,946,760 Form **990-PF** (2019)

169,090

1,777,670

1,777,670

1,777,670

		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶	'		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less: allowance for doubtful accounts ▶	'		
S	8	Inventories for sale or use			
set	8 9 10a	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	1,116,020	1,044,228	1,552,057
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶	'		
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	660,586	902,181	912,615

14 Land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule) ▶ ____ Other assets (describe > _ 15 Total assets (to be completed by all filers—see the 16 instructions. Also, see page 1, item I) 1,777,670 17 Accounts payable and accrued expenses . . .

Foundations that follow FASB ASC 958, check here

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Total net assets or fund balances at beginning of year-Part II, column (a), line 29 (must agree with end-

Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds

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Grants payable

Other liabilities (describe ▶_

and complete lines 24, 25, 29 and 30. Net assets without donor restrictions . . .

Net assets with donor restrictions .

and complete lines 26 through 30.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

18

19

20 21

22

23

24 25

26 27

28

29

30

Part III

Liabilities

Assets or Fund Balances

Net

2

3

Part II

Page **3**

	be the kind(s) of property sold (e.g., varehouse; or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a FROM K-1S					
b PUBLICLY TRADED SEC	URITIES				
c CAPITAL GAINS DIVIDE	NDS		Р		
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain ò	r (loss)) minus (g)
a	274				274
b 7	77,809		536,295		241,514
c	5,529				5,529
d					
e					
Complete only for asse	ts showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(I)
(i) F.M.V. as of 12/31/6	(j)	Excess	(k) of col. (i) . (j), if any	Gains (Col. (l col. (k), but not	h) gain minus less than -0-) or om col.(h))
a					274
b					241,514
c					5,529
d					
e					
•	gain or (loss) as defined in sections 1 art I, line 8, column (c) (see instruction) . }	3	247,317
Part V Qualification	Under Section 4940(e) for Re	duced Tax on Net	Investment In	come	
(For optional use by domestic If section 4940(d)(2) applies,	private foundations subject to the sec leave this part blank.	tion 4940(a) tax on ne	et investment incom	e.)	
If "Yes," the foundation does r	the section 4942 tax on the distributation of qualify under section 4940(e). Do	not complete this part	·		es 🗹 No
••••	mount in each column for each year;	see instructions before	making any entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab		(d) Distribution rati (col. (b) divided by c	ol. (c))
2018	127,474		2,419,607		0.052684
2017	123,999		2,471,956		0.050162
2016	118,521		2,367,015		0.050072
2015	118,334		2,263,990		0.052268
2014	86,000		2,430,840	I	0.035379
2 Total of line 1, column	` '				0.240565
number of years the fou	io for the 5-year base period—divide t undation has been in existence if less t oncharitable-use assets for 2019 from	than 5 years 🔒 🗓			0.048113 2,430,440
5 Multiply line 4 by line 3		,	5		116,936
• • •	nent income (1% of Part I, line 27b)		6		2,946
			7		119,882
	tions from Part XII, line 4 ,				125,500
	reater than line 7, check the box in Pa			g a 1% tax rate. Se	

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Pai	rt VII-B S	tatements Regard	ling	Activities for Which	Form 4720 May Be	Required (continu	ıed)				
5a	During the ye	ear did the foundation p	oay o	r incur any amount to:						Yes	No
	(1) Carry on	propaganda, or otherw	ise a	ttempt to influence legisla	ation (section 4945(e))?	∏ Ye	s 🗸	No			
	(2) Influence	the outcome of any sp	pecific	public election (see sect	tion 4955); or to carry		,				
	on, direct	ly or indirectly, any vo	ter re	gistration drive?		· · 🗌 Ye	, /	No			
	(3) Provide a	grant to an individual	for tr	avel, study, or other sim	ilar purposes?	☐ Ye		No			
		-		her than a charitable, etc ctions	· -		. .	N-			
				eligious, charitable, sciententer and childrenter and cruelty to childrenter and cruelty to childrenter and control of the con							
b			•	iny of the transactions fa		L Ye	s 🗸	No			
	•			nt notice regarding disas					5b		
	-			regarding disaster assist		_					
c	If the answer	is "Yes" to question 5a	a(4),	does the foundation claim	n exemption from the		ш				
	tax because i	t maintained expenditu	ire re	sponsibility for the grant?	2	· · 🔲 Ye		No			
	If "Yes," attac	ch the statement requi	red b	y Regulations section 53.	4945-5(d).	□ те	5 🗀	NO			
6a	Did the found	lation, during the year,	rece	ive any funds, directly or	indirectly, to pay premiu	ıms on					
	a personal be	nefit contract?						N.			
b	b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							6 b		No	
7a		•	s the	foundation a party to a p	rohibited tax shelter trar	nsaction?	s 🗸				
b	If "Yes", did t	he foundation receive	any p	roceeds or have any net	income attributable to th	e transaction?	s <u>\</u> .	No	7b		
8	Is the founda	tion subject to the sect	ion 4	.960 tax on payment(s) o	f more than \$1,000,000	in remuneration or					
	excess parach	nute payment during th	ne ye	ar?		· · □ va	s 🗸	No			
				ers, Directors, Trust		<u> </u>			ees.		
Pai		d Contractors		,,	,	g,g, .		,	,		
1	List all office	ers, directors, truste	es. fo	oundation managers an	d their compensation	See instructions					
		,		b) Title, and average	(c) Compensation (If	(d) Contributions	to	(2)			
	(a) Name	and address		hours per week	not paid, enter	employee benefit pla				se acc Iowano	
- POCI	IELLE D CTODDAR	16	DDEC	devoted to position	-0-)	deferred compensa		<u> </u>			
	IELLE B STODDAR EVERGREEN AVE		0.00	IDENT	0		0	1			0
	SONVILLE, FL 32										
REBE	CCA JANSSON			ETARY	0		0				0
	EVERGREEN AVE		0.00								
	SONVILLE, FL 32	206	VP								
	BERMAN EVERGREEN AVE	NITE	0.00		0		0	1			0
	SONVILLE, FL 32										
DAVI	O STODDARD		VICE	PRESIDENT	0		0				0
	EVERGREEN AVE		0.00								
2	SONVILLE, FL 32		id on	nployees (other than th	osa includad on lina 1	coo instructions)	Tf no		tor "I	NONE	"
	Compensacio	on or rive ingliest-pa	iu eii	ipioyees (other than ti		(d) Contributions		iie, eii	tei i	NOIL.	
(a)		ress of each employee than \$50,000	paid	(b) Title, and average hours per week devoted to position	(c) Compensation	employee bene plans and deferr compensation	it ed			se acco	
NON	 E					,					
Tota	I number of otl	her employees paid ov	er \$5	0,000		 •	.				0
		. ,	,,,	· · · ·			1_	Form	າ 99 0	D-PF	2019)

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

4 4 5 5

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

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

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

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

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

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

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

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

6

1

2

3

4

5

b

Part XII

118.576

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

6

7

1a

1b

2

За 3h

4

5

118.576

125,500

125,500

2.946

122,554

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Part XIII Undistributed Income (see instructions)

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. **d** Subtract line 6c from line 6b. Taxable amount —see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount-see instructions f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must

be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2014 not

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

10 Analysis of line 9: a Excess from 2015. . **b** Excess from 2016. . c Excess from 2017. . d Excess from 2018. . e Excess from 2019. .

applied on line 5 or line 7 (see instructions) . . .

		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				118,576
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only			14,890	
b	Total for prior years: 20		0		
3	Excess distributions carryover, if any, to 2019:				
а	From 2014				
b	From 2015				
С	From 2016				
d	From 2017				
	From 2018				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2019 from Part				
	XII, line 4: ► \$125,500				
а	Applied to 2018, but not more than line 2a			14,890	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2019 distributable amount				110,610
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2019.	0			0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				

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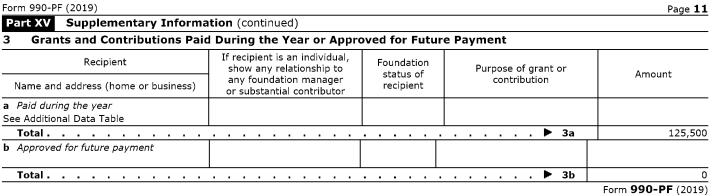
7,966

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b	Applied to undistributed income of prior years (Election required—see instructions)		0	
С	Treated as distributions out of corpus (Election required—see instructions)	0		
d	Applied to 2019 distributable amount			110,610
е	Remaining amount distributed out of corpus	0		
5	Excess distributions carryover applied to 2019.	0		0
	(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:			

0

4	Qualifying distributions for 2019 from Part				
	XII, line 4: ► \$125,500				
а	Applied to 2018, but not more than line 2a			14,890	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2019 distributable amount				110,610
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2019.	0			0
	(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:				



iter gross	s amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section		(e) Related or exempt
_	n service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
f						
g Fees	and contracts from government agencies					
	ership dues and assessments					
Interes	t on savings and temporary cash nents					
	nds and interest from securities			14 14	832	
	nas and interest from securities			14	70,648	
	financed property					
	lebt-financed property.					
	ntal income or (loss) from personal property					
	nvestment income					
	r (loss) from sales of assets other than					
invento	,			18	247,317	
	come or (loss) from special events:					
	profit or (loss) from sales of inventory revenue: a_					
	revenue. u					
d						
е						
Subtot	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0		318,797	
	Add line 12, columns (b), (d), and (e),			1	3	318,797
				· · · · · •	<u> </u>	310,737
	orksheet in line 13 instructions to verify calcu	lations.)				310,737
art XV	orksheet in line 13 instructions to verify calcu	lations.) le Accomplis income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	uted importantly to	
art XV ne No.	rksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	uted importantly to	
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irt XV. ne No.	rksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	uted importantly to	
irt XV. ne No.	rksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	uted importantly to	
irt XV. ne No.	rksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	uted importantly to	
irt XV. ne No.	rksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	uted importantly to	
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irt XV. ne No.	rksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	uted importantly to	
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rt XV e No.	rksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	uted importantly to	
irt XV. ne No.	rksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	uted importantly to	
irt XV. ne No.	rksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	uted importantly to	
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rt XV ne No.	rksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	uted importantly to	
rt XV ne No.	rksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	uted importantly to	
rt XV. ne No.	rksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	uted importantly to	
irt XV. ne No.	rksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	uted importantly to	
irt XV. ne No.	rksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	uted importantly to	
art XV ne No.	rksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	uted importantly to	

Form 990-F	PF (2019)				Pa	ge 13
Part XV	Information Re Exempt Organi		ions and Relationships With Nonchari	table		
		directly engage in any of the following with a organizations) or in section 527, relating to	any other organization described in section 501 political organizations?		Yes	No
a Transfe	rs from the reporting foun	dation to a noncharitable exempt organization	on of:			
(1) Ca	ısh .			1a(1)		No
(2) Ot	her assets			1a(2)		No
b Other t	ransactions:					
(1) Sales of assets to a noncharitable exempt organization						
				1b(2)		No
(3) Re	ental of facilities, equipmen	nt, or other assets		1b(3)		No
(4) Re	(4) Reimbursement arrangements					
	(5) Loans or loan guarantees					
(6) Performance of services or membership or fundraising solicitations						No
c Sharing	of facilities, equipment, r	nailing lists, other assets, or paid employees		1c		No
of the g	joods, other assets, or ser	vices given by the reporting foundation. If th	olumn (b) should always show the fair market be foundation received less than fair market valu he goods, other assets, or services received.			
(a) Line No.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sha	ring arra	ngemen	its
				-		

2a Is the fo	oundation directly or indire	ectly affiliated with	, or related to, one or moi	e tax-exem	ot organizations
describe	ed in section 501(c) (other	r than section 501(c)(3)) or in section 527? .		Yes 🗹 No
	complete the following s				
(a) Name of organization			(b) Type of organiza	ition I	(c) Description of relationship
	, ,		, , , , , ,		, , , , , , , , , , , , , , , , , , , ,

described in	2a 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?							
,	(a) Name of organization	(1	(b) Type of organization (c) Descript			(c) Description	on of relationship	
Sign of my which			xamined this return, including accompanying schedules and complete. Declaration of preparer (other than taxpayer) is 2021-02-05					
l s	Signature of officer or trustee		Date	′ ٦	Γitle		(see instr.) 🗹 Yes 🗆 No	
Paid	Print/Type preparer's name MARGARET R CONOVER	Preparer's Sign	nature	Date		Check if self- employed ▶ ☐	PTIN P00702532	
Preparer Use Only	Firm's name ► SHORSTEIN & S	HORSTEIN PA		•		•	Firm's EIN ▶59-2701990	
ĺ	Firm's address ► 8265 BAYBER JACKSONVILL						Phone no. (904) 739-1311	
							Form 990-PF (2019)	

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

ERIC BERMAN

than \$5,000).

ROCHELLE B STODDARD

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

N/A

ACLU FOUNDATION

125 BROAD STREET 18TH FLOOR NEW YORK, NY 10004				
ALZHEIMER'S ASSOC NORTH FL 2180 WEST STATE ROAD 434 STE 1100 LONGWOOD, FL 32779	N/A	PC	MEDICAL RESEARCH AND SUPPORT	2,000

PC

DEFEND CIVIL LIBERTIES

1,000

ALZHEIMER'S ASSOC NORTH FL 2180 WEST STATE ROAD 434 STE 1100 LONGWOOD, FL 32779	N/A	PC	MEDICAL RESEARCH AND SUPPORT	2,000
AMERICAN FRIENDS OF MAGEN DAVID ADOM 20 W 36TH STREET SUITE 1100 NEW YORK, NY 10018	N/A	PC	VOLUNTEER MEDICAL SERVICES	1,000
Total			▶ 3a	125,500

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CANINE COMPANIONS N/A PC TRAINS DOGS FOR DISABLED 1,000

8150 CLARCONA OCOEE ROAD ORLANDO, FL 32818			PEOPLE	
CIVIC ORCHESTRA OF JACKSONVILLE 3305 RIVERSIDE AVENUE JACKSONVILLE, FL 32205	N/A	PC	TO SUPPORT THE ARTS	1,000
COMMUNITY FOUNDATION FOR NE FLORIDA	N/A	PC	COMMUNITY SERVICE	1,000

3305 RIVERSIDE AVENUE JACKSONVILLE, FL 32205	N/A	PC	TO SUPPORT THE ARTS	1,000
COMMUNITY FOUNDATION FOR NE FLORIDA 245 RIVERSIDE AVENUE STE 310 JACKSONVILLE, FL 32202	N/A	PC	COMMUNITY SERVICE	1,000
Total			▶ 3a	125,500

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

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
COMMUNITY HOSPICE FDN	N/A	PC	MEDICAL SUPPORT FOR THE	1,00

4266 SUNBEAM RD JACKSONVILLE, FL 32257			TERMINALLY ILL	
DOCTORS WITHOUT BORDERS	N/A	PC	PROVIDE MEDICAL CARE	1,000

DOCTORS WITHOUT BORDERS 40 RECTOR STREET 16TH FLOOR NEW YORK, NY 10006	N/A	PC	PROVIDE MEDICAL CARE	1,000
DREAMS COME TRUE	N/A	PC	BENEFIT SERIOUSLY ILL	5,000

NEW YORK, NY 10006				
DREAMS COME TRUE 6803 SOUTHPOINT PARKWAY JACKSONVILLE, FL 32216	N/A	PC	BENEFIT SERIOUSLY ILL CHILDREN	5,000

Total			▶ 3a	125,500
DREAMS COME TRUE 6803 SOUTHPOINT PARKWAY JACKSONVILLE, FL 32216	N/A	PC	BENEFIT SERIOUSLY ILL CHILDREN	5,0
NEW TORK, NT 10000				

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

FEEDING NE FLORIDA	N/A	PC	FOOD BANK	1 000
a Paid during the year				
mame and dad out (name or basiness)	or substantial contributor			

1116 EDGEWOOD AVENUE N D/E JACKSONVILLE, FL 32254	IN/A	1	TOOD BANK	1,000
FIRST COAST NO MORE HOMELESS PETS	N/A	PC	ANIMAL WELFARE	1,000

FIRST COAST NO MORE HOMELESS PETS 6817 NORWOOD AVENUE JACKSONVILLE, FL 32208	N/A	PC	ANIMAL WELFARE	1,000
HUBBARD HOUSERO BOY 4000	N/A	DC.	HELD VICTIMS OF DOMESTIC	2 000

6817 NORWOOD AVENUE JACKSONVILLE, FL 32208				
HUBBARD HOUSEPO BOX 4909 JACKSONVILLE, FL 32201	N/A	PC	HELP VICTIMS OF DOMESTIC VIOLENCE	2,000

JACKSONVILLE, FL 32208				
HUBBARD HOUSEPO BOX 4909 JACKSONVILLE, FL 32201	N/A	PC	HELP VICTIMS OF DOMESTIC VIOLENCE	2,000

125,500

HUBBARD HOUSEPO BOX 4909	N/A	PC	HELP VICTIMS OF DOMESTIC	
JACKSONVILLE, FL 32201			VIOLENCE	

Total .

JACKSONVILLE, FL 32201			VIOLENCE	
HOBBARD HOUSEPO BOX 4909	IN/A	r C	HELF VICTIMS OF DOMESTIC	

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

or substantial contributor

a Paid during the year				
I M SULZBACHER CENTER	N/A	PC	COMMUNITY SERVICE	1,000

JACKSONVILLE, FL 32202				
JAX SYMPHONY ORCHESTRA 300 WATER ST STE 200	N/A	PC	SUPPORT THE ARTS	

JAX SYMPHONY ORCHESTRA 300 WATER ST STE 200 JACKSONVILLE, FL 32202	N/A	PC	SUPPORT THE ARTS	1,000
JEWISH COMMUNITY ALLIANCE	N/A	PC	SPORTS, RECREATION AND	42,000

300 WATER ST STE 200 JACKSONVILLE, FL 32202	147.1			2,000
JEWISH COMMUNITY ALLIANCE 8505 SAN JOSE BLVD	N/A	PC	SPORTS, RECREATION AND EARLY CHILDHOOD EDUCATION	42,000

JACKSONVILLE, FL 32202			
JEWISH COMMUNITY ALLIANCE 8505 SAN JOSE BLVD JACKSONVILLE, FL 32217	N/A	SPORTS, RECREATION AND EARLY CHILDHOOD EDUCATION	42,000
Total		 ▶ 3a	125,500

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

or substantial contributor

Total .

a Paid during the year				
JEWISH FAMILY & COMMUNITY SERV 8540 BAYCENTER ROAD JACKSONVILLE, FL 32256	N/A	PC	COMMUNITY SERVICES	30,000
JEWISH FEDERATION OF JACKSONVILLE	N/A	PC	RELIGIOUS	15,000

JEWISH FEDERATION OF JACKSONVILLE 8505 SAN JOSE BLVD STE A JACKSONVILLE, FL 32217	N/A	PC	RELIGIOUS	15,0
OREN MARGOL FOUNDATION	N/A	PC	SUPPORT CANCER RESEARCH	1,0

8505 SAN JOSE BLVD STE A JACKSONVILLE, FL 32217	IN/A	FC	RELIGIOUS	13,0
OREN MARGOL FOUNDATION 8777 SAN JOSE BOULEVARD STE 901	N/A	PC	SUPPORT CANCER RESEARCH	1,0

JACKSONVILLE, FL 32217				
OREN MARGOL FOUNDATION 8777 SAN JOSE BOULEVARD STE 901 JACKSONVILLE, FL 32217	N/A	PC	SUPPORT CANCER RESEARCH	1,000

8777 SAN JOSE BOULEVARD STE 901 JACKSONVILLE, FL 32217		SOTT ON CANCEL RESEARCH	1,000

125,500

JACKSONVILLE, FL 32217		
8777 SAN JOSE BOULEVARD STE 901		

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

or substantial contributor

Total .

a Paid during the year				
RONALD MCDONALD HOUSE 824 CHILDRENS WAY JACKSONVILLE, FL 32207	N/A	PC	SUPPORT FOR FAMILIES OF SERIOUSLY ILL CHILDREN	1,000

SALVATION ARMY OF NE FLORIDA 328 NORTH OCEAN STREET JACKSONVILLE, FL 32202	N/A	PC	COMMUNITY SERVICE	1,000
SEATTLE COLLEGES FOUNDATION	N/A	PC	SUPPORT INDIVIDUALS WITH	10,000

SALVATION ARMY OF HE FLORIDA 328 NORTH OCEAN STREET JACKSONVILLE, FL 32202	N/A	PC	COMMUNITY SERVICE	1,0
SEATTLE COLLEGES FOUNDATION 1500 HARVARD AVENUE	N/A	PC	SUPPORT INDIVIDUALS WITH DISABILITIES IN EMPLOYMENT	10,00

JACKSONVILLE, FL 32202				
SEATTLE COLLEGES FOUNDATION 1500 HARVARD AVENUE SEATTLE, WA 98122	N/A	PC	SUPPORT INDIVIDUALS WITH DISABILITIES IN EMPLOYMENT	10,000

125,500

1500 HARVARD AVENUE SEATTLE, WA 98122		DISABILITIES IN EMPLOYMENT	

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

LINITED WAY OF NE FLORIDA	N/Δ	PC	COMMUNITY SERVICES	1 000
a Paid during the year				
Name and address (home or business)	or substantial contributor	1 001,5110		

UNITED WAY OF NE FLORIDA PO BOX 41428 JACKSONVILLE, FL 32203	N/A	PC	COMMUNITY SERVICES	1,000
UNIVERSITY OF NORTH CAROLINA PO BOX 309	N/A	PC	EDUCATION	2,000

JACKSONVILLE, FL 32203				
UNIVERSITY OF NORTH CAROLINA PO BOX 309 CHAPEL HILL, NC 27514	N/A	PC	EDUCATION	2,000
UNIVERSITY OF NORTH FLORIDA	N/A	PC	EDUCATION	1,000

PO BOX 309 CHAPEL HILL, NC 27514				
UNIVERSITY OF NORTH FLORIDA 1 UNF DRIVE JACKSONVILLE, FL 32224	N/A	PC	EDUCATION	1,000

CHAPLE HILL, NC 27314				
UNIVERSITY OF NORTH FLORIDA 1 UNF DRIVE JACKSONVILLE, FL 32224	N/A	PC	EDUCATION	1,000
Total			> 3a	125,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
URJ CAMP COLEMAN	N/A	PC	SUPPORT CAMP PROGRAMS FOR	1,500

	1580 SPALDING DRIVE	N/A	PC	SUPPORT CAMP PROGRAMS FOR CHILDREN	
П	ATLANTA, GA 30350				

any foundation manager

Name and address (home or business)

1580 SPALDING DRIVE ATLANTA, GA 30350		CHILDREN	
Total	 	▶ 3a	125,500

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TY 2019 Investments Corporate Stock Schedule

Name: BERMAN FAMILY FOUNDATION INC

EIN: 59-3613920

Name of Stock	End of Year Book Value	End of Year Fair Market Value	
ALIBABA GRP HOLDING ADR	6,800	21,570	
ALTRIA GROUP INC.	53,889	65,120	
AT&T INC.	44,855	43,764	
EXXON MOBIL CORP	43,203	23,603	
FACEBOOK INC	34,985	81,745	
INVESCO TR II S&P SR LN BKLN	18,845	16,533	
ISHARES CORE US AGGREGATE BOND	86,534	90,314	
ISHARES INC ETF CORE MSCI EMERGING MKTS	31,321	27,618	
ISHARES S&P 500 GROWTH INDEX FD	58,853	112,721	
ISHARES S&P 500 VALUE INDEX FD	59,866	72,219	
ISHARES TIP BOND	26,056	31,458	
ISHARES TR MSCI EAFE INDEX FD	31,298	27,303	
ISHARES TRUST S&P 400 MIDCAP VALUE INDEX	26,691	50,863	
ISHARES TRUST S&P MIDCAP 400 GROWTH	18,863	53,195	
ISHARES TRUST S&P SMALLCAP 600 GROWTH	23,064	64,658	
ISHARES TRUST S&P SMALLCAP 600 VALUE	23,024	38,690	
JOHNSON & JOHNSON	58,944	113,197	
LINDE PLC	39,504	51,072	
MICROSOFT CORP	41,703	169,720	
PEPSICO INC	56,323	98,546	
PIMCO ACTIVE BOND FUND	31,902	33,101	
PROCTER & GAMBLE CO	52,668	89,626	
SPDR BLOOMBERG ET BARCLAYS HY	17,527	15,665	
VANGUARD REIT ETF	19,693	26,095	
VANGUARD TOTAL STOCK ETF MARKET	84,400	94,205	
WISDOMTREE EMERGING ETF MKTS HI DIV FD	53,417	39,456	

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TY 2019 Investments - Other Schedule

Name: BERMAN FAMILY FOUNDATION INC

EIN: 59-3613920

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
FRANKLIN CUSTODIAN FDS INCOME CL AD	AT COST	93,250	78,468
HANCOCK JOHN PREMIUM DIV FUND	AT COST	35,110	33,809
METROPOLITAN WEST TOTAL RETURN BOND FD	AT COST	54,700	59,951
PIMCO FDS PAC INVT MGMT SER EMERG MKT	AT COST	60,398	54,934
PIMCO FDS PAC INVT MGMT SER TOTAL RETURN FD	AT COST	102,695	105,628
PIMCO TOTAL RETURN BOND CL Z	AT COST	103,791	101,797
TCW EMERGING MARKETS INCOME FD I SHARES	AT COST	26,902	23,755
TEMPLETON GLOBAL BOND FD ADVISOR CLASS	AT COST	23,002	16,790
THORNBURG INCOME TR LTD TERM INC FD CL I	AT COST	26,253	27,412
VAN ECK FUNDS EMERGING MARKETS FUND	AT COST	31,000	28,390
VANGUARD FD WELLESLEY INC.	AT COST	200,628	217,771
VANGUARD FUNDS DIV GRWTH	AT COST	41,894	58,065
WESTERN ASSET FDS INC CORE BD FUND	AT COST	102,558	105,845

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TY 2019 Other Expenses Schedule					
Name:	BERMAN FAMIL	Y FOUNDATION II	NC		
EIN: 59-3613920					
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
INVESTMENT EXPENSE	24.142	24.142		0	

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ANNUAL FILING FEES

INVESTMENT INTEREST