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2020

OMB No. 1545-0052

## **Return of Private Foundation**

Form 990-PF

Department of the Treasury

Internal Revenue Service

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

or	caler	ndar year 2020, or tax year beginning 01-01-20	)20 , ar	nd ending 12-31-	-2020	
		indation oundation		A Employer id	entification numbe	r
111	e Lee F	oundation		59-6148803		
		l street (or P.O. box number if mail is not delivered to street address) teltine National Dr No Ste	Room/suite	<b>B</b> Telephone nu	ımber (see instruction	ns)
0.	309 Haz	Lettine National Di No Ste		(407) 857-2835	5	
		, state or province, country, and ZIP or foreign postal code 32822	•	<b>C</b> If exemption	application is pendin	g, check here
						▶ ∟
G Ch	neck al	l that apply: ☐ Initial return ☐ Initial return of a	former public charity	_	ganizations, check he	▶ ∟
		☐ Final return ☐ Amended return ☐ Address change ☐ Name change			rganizations meeting ck here and attach co	
<b>1</b> Ch	neck tv	pe of organization: ✓ Section 501(c)(3) exempt private	foundation		undation status was t	
_			e private foundation	under sectio	on 507(b)(1)(A), chec	k here
Fai	r mark	xet value of all assets at end	☑ Cash ☐ Accru		ation is in a 60-month	
		rom Part II, col. (c), ▶\$ 2,458,942 ☐ Other (specify) _		under sectio	n 507(b)(1)(B), chec	k here 🕨 🗀
		(Part I, column (d) must	be on cash basis.)			
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	income	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach				(casii basis offiy)
		schedule)	7,500			
	2	Check ► ☐ if the foundation is <b>not</b> required to attach Sch. B				
	3	Interest on savings and temporary cash investments	1,083	1,083	1,083	
	4	Dividends and interest from securities	35,269	35,269	35,269	
	5a	Gross rents				
	ь	Net rental income or (loss)				
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	313,194			
	ь	Gross sales price for all assets on line 6a				
Re	7	Capital gain net income (from Part IV, line 2)		313,194		
	8	Net short-term capital gain		·	0	
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less: Cost of goods sold				
	С	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	357,046	349,546	36,352	
	13	Compensation of officers, directors, trustees, etc.	0	0	0	(
	14	Other employee salaries and wages				
ses	15	Pension plans, employee benefits				
ei ei	16a	Legal fees (attach schedule)				
d X	b	Accounting fees (attach schedule)				
<u> </u>	С	Other professional fees (attach schedule)				
ati	17	Interest				
<u> </u>	18	Taxes (attach schedule) (see instructions)				
=	19	Depreciation (attach schedule) and depletion				
5	20	Occupancy				
ב ב	21	Travel, conferences, and meetings				
ਰ	22	Printing and publications	061 000			
Ĕ	23	Other expenses (attach schedule)	280	280	0	280
Operating and Administrative Expenses	24	Total operating and administrative expenses.	200	300	0	30/
<u>ā</u>	25	Add lines 13 through 23	280 56,140		0	280 56,140
-	25		56,140			36,140
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	56,420	280	0	56,420
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	300,626			
	b	Net investment income (if negative, enter -0-)	500,020	349,266		
	С	Adjusted net income (if negative, enter -0-)			36,352	
					i '	

Beginning of year

1,727,093

1,727,093

1,727,093

1,727,093

2,027,719

2,027,719

2,027,719

2,027,719

1

2

3

4

5

6

1,727,093

2,027,719

2,027,719 Form **990-PF** (2020)

0

300,626

Page 2

2,458,942

End of year

- 1	_				
		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 ▶	-151	-151	-151
8	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	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)	1,548,071	1,896,541	2,327,764
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe )			

16

17

18

19

20 21

22

23

24

25

26 27

28

29

30

Part III

Liabilities

Assets or Fund Balances

Net

2

3

Total assets (to be completed by all filers—see the

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 🕨 🗹

Capital stock, trust principal, or current funds . . . . . . . . . .

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 beginning of year—Part II, column (a), line 29 (must agree with end-

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

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

Foundations that follow FASB ASC 958, check here

instructions. Also, see page 1, item I)

Other liabilities (describe >\_

Grants payable

Accounts payable and accrued expenses .

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions .

and complete lines 26 through 30.

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

Add lines 1, 2, and 3 . . . . . . .

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Net assets with donor restrictions .

Form 990-PF (2020)

		ne kind(s) of property sold (e.g., rea nouse; or common stock, 200 shs. N	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1 a	UBS Financial			Р	2020-01-25	2020-04-22	
b	UBS Financial			Р	2019-03-21	2020-04-22	
С	UBS Financial			Р	1996-11-13	2020-10-20	
d	Capital Gains Dividends			Р			
e							
	<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	( <b>h)</b> Gain or (loss) (e) plus (f) minus (g)		
a	4	176		67:	L	-195	
b	90,8	346		127,839	9	-36,993	
С	352,7	<sup>2</sup> 67		19,246	5	333,521	
d	16,8	361				16,861	
e							
	Complete only for assets sh	nowing gain in column (h) and owne	d by the foundation	on 12/31/69		I)	
	(i) F.M.V. as of 12/31/69	Excess	( <b>k)</b> of col. (i) l. (j), if any	col. (k), but not	h) gain minus less than -0-) <b>or</b> om col.(h))		
а						-195	
b						-36,993	
С						333,521	
d						16,861	
e							
2	Capital gain net income or	(net capital loss)	gain, also enter in F (loss), enter -0- in I		2	313,194	
	Net short-term capital gair	_	(loss), enter -0- in l 22(5) and (6): s). If (loss), enter -0	Part I, line 7	2 3	313,194	
2 3 Pari	Net short-term capital gair If gain, also enter in Part I in Part I, line 8  V Qualification Und	(net capital loss) { If n or (loss) as defined in sections 12; t, line 8, column (c) (see instruction	(loss), enter -0- in log (loss), enter -0- in log (loss); and (6): s). If (loss), enter -0- in log (loss), enter -0- in log (loss), enter -0- in loss); and loss (loss); and los	Part I, line 7 }	3		
2 3 Part	Net short-term capital gair If gain, also enter in Part I in Part I, line 8  Qualification Und ION 4940(e) REPEALE	(net capital loss) { If n or (loss) as defined in sections 12; l, line 8, column (c) (see instruction	(loss), enter -0- in log (loss), enter -0- in log (loss); and (6): s). If (loss), enter -0- in log (loss), enter -0- in log (loss), enter -0- in loss); and loss (loss); and los	Part I, line 7 }	3		
2 3 Part	Net short-term capital gair If gain, also enter in Part I in Part I, line 8  V Qualification Und	(net capital loss) { If n or (loss) as defined in sections 12; t, line 8, column (c) (see instruction	(loss), enter -0- in log (loss), enter -0- in log (loss); and (6): s). If (loss), enter -0- in log (loss), enter -0- in log (loss), enter -0- in loss); and loss (loss); and los	Part I, line 7 }	3		
2 3 Part	Net short-term capital gain If gain, also enter in Part I in Part I, line 8  V Qualification Und ION 4940(e) REPEALE Reserved (a)	(net capital loss)  If n or (loss) as defined in sections 12; In ine 8, column (c) (see instruction	(loss), enter -0- in log (loss), enter -0- in log (loss), enter -0- in log (loss). If (loss), enter -0- in log (loss), en	Part I, line 7 }	3 (d)		
2 3 Part	Net short-term capital gain If gain, also enter in Part I in Part I, line 8  V Qualification Und ION 4940(e) REPEALE Reserved (a)	(net capital loss)  If n or (loss) as defined in sections 12; In ine 8, column (c) (see instruction	(loss), enter -0- in log (loss), enter -0- in log (loss), enter -0- in log (loss). If (loss), enter -0- in log (loss), en	Part I, line 7 }	3 (d)	<u> </u>	
2 3 Part	Net short-term capital gain If gain, also enter in Part I in Part I, line 8  V Qualification Und ION 4940(e) REPEALE Reserved (a)	(net capital loss)  If n or (loss) as defined in sections 12; In ine 8, column (c) (see instruction	(loss), enter -0- in log (loss), enter -0- in log (loss), enter -0- in log (loss). If (loss), enter -0- in log (loss), en	Part I, line 7 }	3 (d)		
2 3 Part 1	Net short-term capital gair If gain, also enter in Part I in Part I, line 8  V Qualification Und ION 4940(e) REPEALE Reserved (a) Reserved Reserved	(net capital loss)  If or (loss) as defined in sections 12; In or (loss) as defined in sections 12; In ine 8, column (c) (see instruction	(loss), enter -0- in log (loss), enter -0- in log (22(5)) and (6): s). If (loss), enter -0- uced Tax on Net DO NOT COMPL  (c) Reserved	Part I, line 7  Investment InETE	3 (d)		
2 3 Part 1 1 2 2 3	Net short-term capital gain If gain, also enter in Part I in Part I, line 8  V Qualification Uncomposed (a) Reserved (a) Reserved  Reserved  Reserved  Reserved  Reserved	(net capital loss)  If or (loss) as defined in sections 12: If in or	(loss), enter -0- in log (loss), enter -0- in log (22(5)) and (6): s). If (loss), enter -0- in log (loss), enter -0- in l	Part I, line 7 }    Investment Interest	3 (d)		
2 3 Part 1 1 2 2 3	Net short-term capital gain If gain, also enter in Part I in Part I, line 8  V Qualification Uncomposed (a) Reserved (a) Reserved  Reserved  Reserved  Reserved  Reserved	(net capital loss)  If or (loss) as defined in sections 12; In or (loss) as defined in sections 12; In ine 8, column (c) (see instruction	(loss), enter -0- in log (loss), enter -0- in log (22(5)) and (6): s). If (loss), enter -0- in log (loss), enter -0- in l	Part I, line 7  Investment InETE	3 (d)		
2 3 Part 1 2 2 3 4	Net short-term capital gain If gain, also enter in Part I in Part I, line 8  V Qualification Und ION 4940(e) REPEALE Reserved (a) Reserved  Reserved  Reserved  Reserved  Reserved	(net capital loss)  If or (loss) as defined in sections 12: If in or	(loss), enter -0- in log (loss), enter -0- in log (loss), enter -0- in log (loss). If (loss), enter -0- in log (loss), en	Part I, line 7 }  Investment In  ETE  2	3 (d)		
2 3 Part 5 ECT 1	Net short-term capital gain If gain, also enter in Part I in Part I, line 8  V Qualification Und ION 4940(e) REPEALE Reserved (a) Reserved	(net capital loss)  If or (loss) as defined in sections 12: In or (loss) as defined in sections 12: In ine 8, column (c) (see instruction	(loss), enter -0- in land (loss), enter -0- in land (loss). If (loss), enter -0- in land (loss). If (loss), enter -0- in land (loss), enter -0- in l	Part I, line 7 }  Investment In  ETE  2 2	3 (d)		
2 3 Part 1 2 3 4 5 6	Net short-term capital gair If gain, also enter in Part I in Part I, line 8  V Qualification Und ION 4940(e) REPEALE Reserved (a) Reserved	(net capital loss)  If n or (loss) as defined in sections 12; In ine 8, column (c) (see instruction	(loss), enter -0- in log (loss), enter -0- in log (loss), enter -0- in log (loss). If (loss), enter -0- in log (loss), en	Part I, line 7 }  Investment In  ETE  2 2	3 (d)		
2 3 Feet 1 2 3 4 5 6 7	Net short-term capital gain If gain, also enter in Part I in Part I, line 8  V Qualification Uncomposed (a) Reserved (a) Reserved  Reserved	(net capital loss)  If n or (loss) as defined in sections 12: In or (loss) as defined	(loss), enter -0- in log (loss), enter -0- in log (22(5)) and (6): s). If (loss), enter -0- in log (loss), enter -0- in l	Part I, line 7 }  Investment In  ETE  2  2  4	3 (d)	<u> </u>	

							<u>'</u>	age v
Par		ling Activities for Which	Form 4720 May Be	Required (continued	1)			
ia	During the year did the foundation						Yes	No
	(1) Carry on propaganda, or otherv	vise attempt to influence legisl	ation (section 4945(e))?	Yes	✓ No	,		
	(2) Influence the outcome of any s	pecific public election (see sec	tion 4955); or to carry					
	on, directly or indirectly, any vo	ter registration drive?		· · · Yes	✓ No	,		
	(3) Provide a grant to an individual	for travel, study, or other sim	ilar purposes?		✓ No			
	(4) Provide a grant to an organization	ion other than a charitable, etc	c., organization described					
	in section 4945(d)(4)(A)? See i	nstructions		· · 🗌 Yes	✓ No	,		
	(5) Provide for any purpose other t	han religious, charitable, scien	tific, literary, or					
	educational purposes, or for the	prevention of cruelty to child	ren or animals?	· ·	✓ N			
b	If any answer is "Yes" to $5a(1)-(5)$ ,	did <b>any</b> of the transactions fa	ail to qualify under the ex	ceptions described in		<b>´</b>		
	Regulations section 53.4945 or in a	current notice regarding disas	ter assistance? See instr	ructions		5b		
	Organizations relying on a current r	otice regarding disaster assist	ance check here					
C	If the answer is "Yes" to question 5	a(4), does the foundation clair	n exemption from the					
	tax because it maintained expenditu	ure responsibility for the grant	?	· · 🔲 Yes	□ No			
	If "Yes," attach the statement requi	red by Regulations section 53.	4945-5(d).	□ 1es		'		
a	Did the foundation, during the year,	, receive any funds, directly or	indirectly, to pay premi	ums on				
b	Did the foundation, during the year,	, pay premiums, directly or inc	lirectly, on a personal be		. <b>✓</b> No	6b		No
	If "Yes" to 6b, file Form 8870.	, , ,	,, 1					
'a	At any time during the tax year, wa	s the foundation a party to a r	prohibited tax shelter tra	nsaction?				
	If "Yes", did the foundation receive			∟ res	✓ No	7b		
	Is the foundation subject to the sec				•	1.5		
	excess parachute payment during the	, , , ,						
		<u> </u>			✓ No		<u> </u>	<u> </u>
Par	and Contractors	Officers, Directors, Trust	tees, Foundation Ma	anagers, Hignly Paid	I Emp	ioyees,		
1	List all officers, directors, truste							
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans		<b>e)</b> Expen		
	. ,	devoted to position	· -0-)	deferred compensatio		other al	llowand	ces
ee A	Additional Data Table							
		]						
		1						
		1						
		1						
2	Compensation of five highest-pa	id employees (other than t	hose included on line :	1—see instructions). If	none,	enter "	NONE	."
				(d) Contributions to				
a) [	Name and address of each employee	paid (b) Title, and average hours per week	(c) Compensation	employee benefit		) Expens		
	more than \$50,000	devoted to position	(c) compensation	plans and deferred compensation		other all	owanc	es
ONE	=			Compensation				
ONE	=							
ota	I number of other employees paid ov	er \$50,000 <b></b>	<del></del>					- (
					F	orm <b>99</b> 0	N-DE	(2020

Form 990-PF (2020)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees and Contractors (continued)	s, Foundation Managers, Highly Paid	l Employees,
3 Five highest-paid independent contractors for professional serv	vices (see instructions). If none, enter "N	IONE".
(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 rorganizations and other beneficiaries served, conferences convened, research papers pro		Expenses
1 None	duced, etc.	0
2		
3		
		-
4		
Part IX-B Summary of Program-Related Investments (see	e instructions)	
Describe the two largest program-related investments made by the foundation during	g the tax year on lines 1 and 2.	Amount
1		
2		
All other program-related investments. See instructions.  3		
<u> </u>		
Total. Add lines 1 through 3		0
		Form <b>990-PF</b> (2020)

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

За 3h

4

5

56,420

56,420

Form 990-PF (2020)

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

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

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.

3

4

5

rm 990-PF (2020)				Page <b>9</b>
Part XIII Undistributed Income (see instructi	ons)	-		
	(a) Corpus	(b) Years prior to 2019	<b>(c)</b> 2019	(d) 2020
Distributable amount for 2020 from Part XI, line 7				
Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only				
b Total for prior years: 20, 20, 20	_			
Excess distributions carryover, if any, to 2020:				
a From 2015				
h From 2016		1		

b	From 2016.											
c	From 2017.											
d	From 2018.											
е	From 2019.											
f	Total of lines	За	thr	ouc	ah e	₽.	$\overline{\cdot}$	_	_	_	_	

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

4 Qualifying distributions for 2020 from Part

a Applied to 2019, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . **d** Applied to 2020 distributable amount. . . . e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2020. (If an amount appears in column (d), the

6 Enter the net total of each column as

9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a . . . .

10 Analysis of line 9: a Excess from 2016. . **b** Excess from 2017. . c Excess from 2018. . d Excess from 2019. . e Excess from 2020. .

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract line 4b from line 2b . . . . . . . . . . . . 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 2019. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . . . . . . f Undistributed income for 2021. 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 2015 not applied on line 5 or line 7 (see instructions) . . .

XII, line 4: ▶ \$ \_\_\_

indicated below:

Form **990-PF** (2020)

For	m 990-PF (2020)					Page <b>10</b>
	Part XIV Private Operating Fo	undations (see instruc	ctions and Part VII	I-A, question 9)		
1a	If the foundation has received a ruling of foundation, and the ruling is effective for			ating ▶		
b	Check box to indicate whether the organ	nization is a private operat	ing foundation descr	ribed in section 🗹	4942(j)(3) or	4942(j)(5)
	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	(a) 2020	<b>(b)</b> 2019	(c) 2018	(d) 2017	(e) Total
	year listed	36,352	49,797	51,138	50,758	188,045
b	•	. 30,899	42,327	43,467	43,144	159,838
	Qualifying distributions from Part XII, line 4 for each year listed	56,420	78,190	79,659	74,813	289,082
d	Amounts included in line 2c not used directly for active conduct of exempt activities	. 0	0	0	0	0
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	56,420	78,190	79,659	74,813	289,082
3	Complete 3a, b, or c for the alternative test relied upon:					
а						0
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section 4942(j)(3)(B)(i)</li></ul>	•				0
b	"Endowment" alternative test— enter 2, of minimum investment return shown i Part X, line 6 for each year listed	n	57,114	54,463	51,121	228,525
С				2.7,125	,	
Ĭ	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					0
	(2) Support from general public					
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					0
Рa	Supplementary Informat			oundation had \$	5,000 or more i	n
	Information Regarding Foundation List any managers of the foundation who before the close of any tax year (but or List any managers of the foundation who ownership of a partnership or other ent	Managers: o have contributed more the halp if they have contributed on the own 10% or more of the	nan 2% of the total of more than \$5,000) stock of a corporatio	o. (See section 507( on (or an equally lai	d)(2).)	1
2	Information Regarding Contribution	n, Grant, Gift, Loan, Scho	olarship, etc., Prog	ırams:		
	Check here ▶ ☐ if the foundation only unsolicited requests for funds. If the fo other conditions, complete items 2a, b,	undation makes gifts, gran	ts, etc. to individual			
а	The name, address, and telephone num	ber or e-mail address of th	ne person to whom a	applications should b	pe addressed:	
	Richard T Lee 6509 Hazeltine National Dr Ste6 Orlando, FL 32822 (407) 857-2835 ANN@LEEVISTACENTER.COM					
b	The form in which applications should b	e submitted and information	on and materials the	ey should include:		
	Letter stating purpose of request and if	applicant approved by 50:	L(c)(3)			

c Any submission deadlines:
 January 31 each year
 d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
 Major effort in Central Florida area

Form 990-PF (2020)				Page <b>11</b>		
Part XV Supplementary Informa	ition (continued)					
3 Grants and Contributions Paid	During the Year or Appro	oved for Futur	e Payment			
Recipient	If recipient is an individual, show any relationship to			show any relationship to Foundation Purpose		Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount		
<b>a</b> <i>Paid during the year</i> See Additional Data Table						
Total			▶ 3a	56,140		
<b>b</b> Approved for future payment						
Total			<b>&gt;</b> 3b	0		

Form **990-PF** (2020)

	1-A Analysis of Income-Producing	Activities				rage <b>L</b>
	s amounts unless otherwise indicated.		usiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
<b>1</b> Progra	m service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions.)
_	and contracts from government agencies					
	ership dues and assessments st on savings and temporary cash					
invest						1,083
	nds and interest from securities					35,269
	ntal income or (loss) from real estate: -financed property					
	debt-financed property.					
	ntal income or (loss) from personal property					
	investment income					
invent						313,194
	come or (loss) from special events:					,
10 Gross	profit or (loss) from sales of inventory					
	revenue: a					
	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).		0		3	0 349,546 349,546
(See v	orksheet in line 13 instructions to verify calcu	ılations.)				3 13,3 10
Part XV	I-B Relationship of Activities to th	ne Accomplis	nment of Exem	pt Purposes		
Line No.	Explain below how each activity for which					0
<b>▼</b>	the accomplishment of the foundation's exinstructions.)	xempt purposes	(other than by prov	viding funds for such	purposes). (See	
3	Enables the Foundation to accomplish its cha	aritable purpose				
4	Enables the Foundation to accomplish its cha					
8	Enables the Foundation to accomplish its cha	aritable purpose				

Part XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharit Exempt Organizations	able	
1 Did the organ	sization directly or indirectly engage in any of the following with any other organization described in section E01		

		organization directly or in tr than section 501(c)(3)							tion 501	Yes	No
	. , .	s from the reporting foun	-	′		, , ,	_	10113:			
		h							.  1a(1)		No
(	(2) Oth	er assets							1a(2)		No
b	Other tra	ansactions:									
(	( <b>1)</b> Sale	es of assets to a nonchar	itable exemp	t orga	nization.				1b(1)		No
	-	chases of assets from a r							1b(2)		No
		ital of facilities, equipmer							1b(3)		No
		mbursement arrangemen							. 1b(4)		No
		ns or loan guarantees.							1b(5)		No
		ormance of services or m	•		-				. 1b(6)		No
	_	of facilities, equipment, n			-						No
C	of the go	swer to any of the above ods, other assets, or ser ansaction or sharing arra	vices given b	y the	reporting 1	foundation. If the	foundation rec	eived less than fair ma	rket value		
(a) l	_ine No.	(b) Amount involved	(c) Name of	noncha	aritable exer	mpt organization	(d) Description	on of transfers, transaction	s, and sharing arra	ngemen	nts
	+										
2a I	s the fo	undation directly or indire	L ectly affiliated	d with	or related	d to, one or more	tax-exempt or	rganizations			
		d in section 501(c) (other	•				•	_	res ☑ No		
		complete the following s			-/(-//						
		(a) Name of organization			(E	) Type of organizati	on	(c) Description	n of relationship		
	of	der penalties of perjury, my knowledge and belief ich preparer has any kno	, it is true, co								
Sig	ın	*****	icage.			2021-03-09	. ****	<b>*</b> *	May the IRS d	iscuss th	nis
Нe	re 👠					2021-03-09	\		return with the prepa	rer show	wn
		Signature of officer or t	rustee			Date	Title		below		_
		orginature of officer of t	doce			Date	Title		(see instr.)	. Yes □	□No
	•	Print/Type preparer's	name	Prepa	arer's Sign	nature	Date		PTIN		
		, , , , , , , , , , , , , , , ,			J Jigi		Date	Check if self-		1776	
		Ann B Ishenko EA						employed ▶ 📙	P0141	1226	
Pai	id	AIII D ISHEHKO EA									
Pre	epare	r Firm's name ► Ann	B Ishenko EA	<del></del>					E. 1 E. 1		
Js	e Onl	у							Firm's EIN ▶		
		Firm's address ▶ 65	09 Hazeltine	Natio	nal Dr S6						
		Or	Orlando, FL 32822							) 857-	2835
			,								
										^ ==	/20==

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

	(2) 444444	,	and deferred compensation	
Richard T Lee	Co-Trustee	0	0	0
PO Box 2113 Orlando, FL 32802	0.00			
Kathleen S Lee	Co-Trustee	0	0	0

Thomas G Lee II	Co Trustoo			0
PO Box 2113 Orlando, FL 32802	0.00			
Kathleen S Lee	Co-Trustee	0	0	0
Orlando, FL 32802				

Kathleen S Lee	Co-Trustee 0.00	0	0	0
PO Box 2113 Orlando, FL 32802				
Thomas G Lee II	Co-Trustee	0	0	0
PO Box 2113 Orlando, FL 32802	0.00			
Lorrayne   Barrow	Co-Trustee		0	_

Orlando, FL 32802				
Thomas G Lee II	Co-Trustee	0	0	0
PO Box 2113 Orlando, FL 32802	0.00			
Lorrayne L Barrow	Co-Trustee	0	0	0
PO Box 2113	0.00			

Themas e Ecc 11	Comusiee	l	ľ	ľ
PO Box 2113 Orlando, FL 32802	0.00			
Lorrayne L Barrow	Co-Trustee	0	0	0
PO Box 2113 Orlando, FL 32802	0.00			

Lorrayne L Barrow	Co-Trustee 0.00	0	0	0
PO Box 2113 Orlando, FL 32802				
Michelle L Johnson	Co-Trustee	0	0	n

	Orlando, FL 32802				
	Michelle L Johnson	Co-Trustee	0	0	
1	PO Box 2113	0.00			

Orlando, FL 32802

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)

a Paid during the year				
A Gift of Teaching6501 Magic Way Orlando, FL 32809	N/A	501(c)(3) Entity	Fund Charitable Activities	500
Achievement Academy	N/A	501(c)(3)	Fund Charitable Activities	500

chievement Academy 16 E Bella Vista St akeland, FL 33805	N/A	501(c)(3) Entity	Fund Charitable Activities

or substantial contributor

Total .

Lakeland, FL 33805				
Alzheimer Resource Center 1506 Lake Highland Drive	N/A	501(c)(3) Entity	Fund Charitable Activities	2,000

Lakeland, FL 33805				
Alzheimer Resource Center 1506 Lake Highland Drive	N/A	501(c)(3) Entity	Fund Charitable Activities	2,0

dzheimer Resource Center	N/A	501(c)(3)	Fund Charitable Activities	2,00
506 Lake Highland Drive		Entity		,
Vrlando El 22802		1		

Alzheimer Resource Center	IN/A	5U1(C)(3)	Fund Charitable Activities	ı ∠,
1506 Lake Highland Drive		Entity		1
Orlando, FL 32803				I

oo Lake nigilialiu Diive	Littley	
lando, FL 32803		

56,140

■ 3a

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 husiness)

Name and dadress (nome or business)	or substantial contributor			
a Paid during the year				
American Diabetes Association	N/A	501(c)(3)	Fund Charitable Activities	100

2451 Crystal Drive Arlington, VA 22202		Entity		
American Friends of DVIP O Box 127	N/A	501(c)(3) Entity	Fund Charitable Activities	500

American Friends of DVIP O Box 127 New York, NY 10185	N/A	501(c)(3) Entity	Fund Charitable Activities	500
Bach Festival Society1000 Holt Ave	N/A	501(c)(3)	Fund Charitable Activities	1,000

56,140

New York, NY 10185		Entity		
Bach Festival Society1000 Holt Ave Winter Park, FL 32789	N/A	501(c)(3) Entity	Fund Charitable Activities	1,000

,		•		i .
Bach Festival Society1000 Holt Ave Winter Park, FL 32789	N/A	501(c)(3) Entity	Fund Charitable Activities	1,00

Total . .

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

a Paid during the year				
Bahia Shrine Circus FundPo Box 180864 Casselberry, FL 32718	N/A	501(c)(3) Entity	Fund Charitable Activities	350

Cubbelly, 12 32710		Literay		
Boy Scouts of America 1951 South Orange Blossum Trail Apopka, FL 32703	N/A	501(c)(3) Entity	Fund Charitable Activities	1,000

1951 South Orange Blossum Trail Apopka, FL 32703		Entity		ŕ
Boys & Girls Club Central Florida Po Box 2987	N/A	501(c)(3) Entity	Fund Charitable Activities	2,000

Apopka, FL 32703				
Boys & Girls Club Central Florida Po Box 2987 Orlando Fl. 32802	N/A	501(c)(3) Entity	Fund Charitable Activities	2,000

Total		▶ 3a	56,140
Orlando, FL 32802			
Po Box 2987	Entity	, I	,

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)

Total .

Canina CompanianaPa Roy 690399	N/A	E01(a)(2)	Fund Charitable Activities	FOC
a Paid during the year				
Traine and dual out (nome of pasiness)	or substantial contributor			

Canine CompanionsPo Box 680388 Orlando, FL 32868	N/A	501(c)(3) Entity	Fund Charitable Activities	
Celebration Foundation	N/Δ	501(c)(3)	Fund Charitable Activities	

5.16.14.5) 1 52.555		2,		
Celebration Foundation 610 Sycamore Street	N/A	501(c)(3) Entity	Fund Charitable Activities	
Colobration El 24747				

Celebration Foundation 610 Sycamore Street Celebration, FL 34747	N/A	501(c)(3) Entity	Fund Charitable Activities	1,000

Celebration, FL 34747		Entity		
Central Care Mission4022 Teriwood Ave	N/A	501(c)(3)	Fund Charitable Activities	2,500

eclebration, 12 3 17 17				1
Central Care Mission4022 Teriwood Ave Orlando, FL 32812	N/A	501(c)(3) Entity	Fund Charitable Activities	2,500

Central Care Mission4022 Teriwood Ave Orlando, FL 32812	N/A	501(c)(3) Entity	Fund Charitable Activities	

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				
Christian Service Center	N/A	501(c)(3)	Fund Charitable Activities	400

Orlando, FL 32805		Litticy	
CompactPo Box 1073	N/A	501(c)(3)	Fund Charitable Activities

or substantial contributor

Total .

ı	Oriando, i E 32003				
	CompactPo Box 1073 Orlando, FL 32802	N/A	501(c)(3) Entity	Fund Charitable Activities	

Orlando, FL 32802	IVA	Entity	Turid Chartable Activities	1,300
Council of 101 OMA2416 North Mills Ave	N/A	501(c)(3)	Fund Charitable Activities	1,500

1 500

Orlando, FL 32802		Entity		
Council of 101 OMA2416 North Mills Ave Orlando, FL 32803	N/A	501(c)(3) Entity	Fund Charitable Activities	1,500

Council of 101 OMA2416 North Mills Ave Orlando, FL 32803	N/A	501(c)(3) Entity	Fund Charitable Activities	1,500
---	-----	---------------------	----------------------------	-------

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)

Total .

Edgewater Pon Warner	N/Δ	501(c)(3)	Fund Charitable Activities	500
a Paid during the year				
,	or substantial contributor			

1226 Mount Vernon Street Orlando, FL 32803		Entity	Tana enamable Activides	
Elevate OrlandoPo Box 940633	N/A	501(c)(3)	Fund Charitable Activities	

	Gridita0,1E 32003				
	Elevate OrlandoPo Box 940633 Maitland, FL 32794	N/A	501(c)(3) Entity	Fund Charitable Activities	2,0
1					

Maitland, FL 32794	N/A	Entity	Fund Charitable Activities	2,000
Feeding AmericaPo Box 96849	N/A	501(c)(3)	Fund Charitable Activities	500

Maitland, FL 32794		Entity		
Feeding AmericaPo Box 96849	N/A	501(c)(3)	Fund Charitable Activities	500

Washington, DC 20090 Entity	Feeding AmericaPo Box 96849 Washington, DC 20090	N/A	501(c)(3) Entity	Fund Charitable Activities	500
-----------------------------	---	-----	---------------------	----------------------------	-----

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

	or substantial contributor			
a Paid during the year				
Fighting for our Heroes	N/A	501(c)(3)	Fund Charitable Activities	1,000

763 Scarborough Drive ssissmee, FL 34744	·	Entity	
rst Baptist Church316 Church Street	N/A	501(c)(3)	Fund Charitable Activities

مرحون والموجود والمنوم والمحار

Name and address (home or business)

Kississmee, FL 34744				
First Baptist Church316 Church Street Port Orange, FL 32127	N/A	501(c)(3) Entity	Fund Charitable Activities	

First Baptist Church316 Church Street Port Orange, FL 32127	N/A	501(c)(3) Entity	Fund Charitable Activities	600
Freedom Ride 1905 Lee Road	N/A	501(c)(3)	Fund Charitable Activities	3 000

Port Orange, FL 32127		Entity		
Freedom Ride1905 Lee Road	N/A	501(c)(3)	Fund Charitable Activities	3,000

				III
Freedom Ride1905 Lee Road Orlando, FL 32810	N/A	501(c)(3) Entity	Fund Charitable Activities	3,000

Orlando, FL 32810	IV/A	Entity	Fund Charitable Activities	
Total			▶ 3a	56,140

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

or substantial contributor

Name and address (home or business)

	or substantial contributor			
a Paid during the year				
Golden Retriever RescuePo Box 1449 Goldenrod, FL 32733	N/A	501(c)(3) Entity	Fund Charitable Activities	2,000

Goldenrod, FL 32/33		Entity		
Habitat for Humanity4116 Silver Star Rd Orlando, FL 32806	N/A	501(c)(3) Entity	Fund Charitable Activities	500
Historical Society of Central Fl	N/Δ	501(c)(3)	Fund Charitable Activities	1 000

Habitat for Humanity4116 Silver Star Rd Orlando, FL 32806	N/A	501(c)(3) Entity	Fund Charitable Activities	500
Historical Society of Central FL 65 E Central Blvd	N/A	501(c)(3) Entity	Fund Charitable Activities	1,000

Orlando, FL 32806		Entity		
Historical Society of Central FL 65 E Central Blvd Orlando, FL 32801	N/A	501(c)(3) Entity	Fund Charitable Activities	1,000

historical Society of Central FL	IN/A	201(0)(3)	rund Chantable Activities	1,000
65 E Central Blvd		Entity		I
Orlando, FL 32801				İ

Orlando, FL 32801	Entity		
Total		▶ 3a	56,140

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 contribution status of

Hone 319 S Elm Ave	N/A	501(c)(3)	Fund Charitable Activities	1 000
a Paid during the year				
Name and address (home or business)	or substantial contributor	recipient		

Hope319 S Elm Ave Sanford, FL 32771	N/A	501(c)(3) Entity	Fund Charitable Activities	1,000
Impower3157 N Alafaya Trail	N/A	501(c)(3)	Fund Charitable Activities	1,000

		,		
Impower3157 N Alafaya Trail Orlando, FL 32826	N/A	501(c)(3) Entity	Fund Charitable Activities	1,000

Orlando, FL 32826		Entity	Turid Charitable Activities	1,000
Junior Achievement2121 Camden Road	N/A	501(c)(3)	Fund Charitable Activities	2,000

unior Achievement2121 Camden Road Irlando, FL 32803	N/A	501(c)(3) Entity	Fund Charitable Activities	2,000

56,140

unioi Acinevementzizi Camuen Road	I IV/A	1 201(C)(2)	Fulla Charitable Activities	۷, د
rlando, FL 32803		Entity		

Total .

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

recipient

56,140

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
Lighthouse Central Florida 215 East New Hampshire Street orlando, FL 32804	N/A	501(c)(3) Entity	Fund Charitable Activities	2,000
Mercy Medical Angels	N/A	501(c)(3) Entity	Fund Charitable Activities	500

Mercy Medical Angels 4020 Haygood Road Virginia Beach, FL 23455	N/A	501(c)(3)   Entity	Fund Charitable Activities	
Michelle Puppets 4420 Parkway Commerce Blyd	N/A	501(c)(3) Entity	Fund Charitable Activities	2,7

4020 Haygood Road Virginia Beach, FL 23455		Entity		
Michelle Puppets 4420 Parkway Commerce Blvd	N/A	501(c)(3) Entity	Fund Charitable Activities	2,750

Michelle Puppets 4420 Parkway Commerce Blvd Orlando, FL 32808	N/A	501(c)(3) Entity	Fund Charitable Activities	2,750

Michelle Puppets 4420 Parkway Commerce Blvd Orlando, FL 32808	501(c)(3) Entity	Fund Charitable Activities	2,
---	---------------------	----------------------------	----

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				
Nami Greater Orlando5051 North Lane	N/A	501(c)(3)	Fund Charitable Activities	500

Urlando, FL 32808		Entity		
National Audobon Society 1101 Audubon Way	N/A	501(c)(3) Entity	Fund Charitable Activities	

1101 Audubon Way Maitland, FL 32751		Entity		
Orlando Day Nursery626 Lake Dot Circle	N/A	501(c)(3)	Fund Charitable Activities	2,500

Maitland, FL 32751				
Orlando Day Nursery626 Lake Dot Circle Orlando, FL 32801	N/A	501(c)(3) Entity	Fund Charitable Activities	2,500

Orlando Day Nursery626 Lake Dot Circle N/A Orlando, FL 32801	501(c)(3) Entity	Fund Charitable Activities	2,500
---	---------------------	----------------------------	-------

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

or substantial contributor

Name and address (home or business)

	or substantial contributor			
a Paid during the year				
Orlando Fringe812 E Rollins St	N/A	501(c)(3)	Fund Charitable Activities	1,000

Orlando, FL 32803		Entity		
Orlando Union Rescue Mission Po Box 2791	N/A	501(c)(3) Entity	Fund Charitable Activities	

l '		•		
Orlando Union Rescue Mission Po Box 2791	N/A	501(c)(3) Entity	Fund Charitable Activities	500
Orlando, FL 32802				

Po Box 2791 Orlando, FL 32802	'', '	Entity		
Pathlight Home3200 West Colonial Drive	N/A	501(c)(3)	Fund Charitable Activities	1,000

Orlando, FL 32802		·		
Pathlight Home3200 West Colonial Drive Orlando, FL 32808	N/A	501(c)(3) Entity	Fund Charitable Activities	1,000

,				
Pathlight Home3200 West Colonial Drive Orlando, FL 32808	N/A	501(c)(3) Entity	Fund Charitable Activities	1,000

Orlando, FL 32808	,	Entity	,
Total		▶ 3a	56,140

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

recipient

56,140

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

any foundation manager

or substantial contributor.

Name and address (home or business)

	or substantial continuation			
a Paid during the year				
Pet Alliance2727 Conroy rd Orlando, FL 32839	N/A	501(c)(3) Entity	Fund Charitable Activities	2,000

oriando, FL 32639		Entity		
ETAPo Box 96684 /ashington, DC 20093	N/A	501(c)(3) Entity	Fund Charitable Activities	

PETAPo Box 96684 Washington, DC 20093	N/A	501(c)(3) Entity	Fund Charitable Activities	500
Pine Castle Historical Society Inc	N/A	501(c)(3) Entity	Fund Charitable Activities	100

washington, DC 20093		Entity		
Pine Castle Historical Society Inc 631 Wilks Ave Orlando El 32809	N/A	501(c)(3) Entity	Fund Charitable Activities	10

Pine Castle Historical Society Inc 631 Wilks Ave Orlando, FL 32809	N/A	501(c)(3) Entity	Fund Charitable Activities	100

404 14011	 (-)(-)	 1
631 Wilks Ave	Entity	1
Orlando, FL 32809	-	

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			
1				

Quest500 E Colonial Drive Orlando, FL 32803	N/A	501(c)(3) Entity	Fund Charitable Activities	3,000
Salvation Army416 W Colonial Dr	N/A	501(c)(3)	Fund Charitable Activities	2,000

Salvation Army416 W Colonial Dr Orlando, FL 32804	N/A	501(c)(3) Entity	Fund Charitable Activities	2,000

56,140

Orlando, FL 32804	IN/A	Entity	Fund Charitable Activities	2,000
Southeastern Food BankPo Box 770451	N/A	501(c)(3)	Fund Charitable Activities	1,000

Oriando, i E 32004		Littley		1
Southeastern Food BankPo Box 770451	N/A	501(c)(3)	Fund Charitable Activities	1,00
Winter Carden El 34777		Entity/		ı

Southeastern Food BankPo Box 770451	N/A	501(c)(3)	Fund Charitable Activities	1,0
Winter Garden, FL 34777		Entity		•

Southeastern Food BankPo Box 770451	N/A	501(c)(3)	Fund Charitable Activities	1,0
Vinter Garden, FL 34777		Entity		I

outheastern rood banked box 770431	I IV/A	1 301(0)(3)	Fund Chantable Activities	1 ±,
Vinter Garden, FL 34777		Entity		

Total.

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

N/A

Apopka, FL 32703

Orlando, FL 32801

Total .

The Christ School106 E Church Street

	or substantial contributor			
a Paid during the year				
Sunshine State Superkids 363 Sky Valley Street	N/A	501(c)(3) Entity	Fund Charitable Activities	500

501(c)(3)Entity

363 Sky Valley Street Clermont, FL 34711		Entity		
Temple of Faith Church 1028 S Marvin Zanders Ave	N/A	501(c)(3) Entity	Fund Charitable Activities	

e Activities	700

Fund Charitable Activities	1,000
▶ 3a	56,140

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				
UCP of Central Florida	N/A	501(c)(3)	Fund Charitable Activities	1,000

UCP of Central Florida 1221 W Colonial Drive Orlando, FL 32804	N/A	501(c)(3) Entity	Fund Charitable Activities	1,000
Winter Park Day Nursery	N/A	501(c)(3)	Fund Charitable Activities	2,140

Orlando, FL 32804				
Winter Park Day Nursery 741 S Pennsylvania Ave Winter Park, FL 32789	N/A	501(c)(3) Entity	Fund Charitable Activities	2,140

741 S Pennsylvania Ave Winter Park, FL 32789		Entity	Tund Chartable Activities	2,140
Zebra Coalition911 N Mills Ave Orlando, FL 32803	N/A	501(c)(3) Entity	Fund Charitable Activities	500

▶ 3a

56,140

Winter Park, FL 32789				
Zebra Coalition911 N Mills Ave Orlando, FL 32803	N/A	501(c)(3) Entity	Fund Charitable Activities	500

Total .

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491068007661 TY 2020 Explanation of Non-Filing with Attorney General Statement **Name:** The Lee Foundation **EIN:** 59-6148803 **Statement:** Not required, per Attorney General's office

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491068007661					
TY 2020 Investments - Other Schedule							
_							

200,000

200,000

## **Name:** The Lee Foundation

**EIN:** 59-6148803

Investment Bank Stock

Investments Other Schedule 2					
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value		
Brokerage Account	AT COST	1,696,541	2,127,764		

AT COST

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	- DLN: 93491068007661				
TY 2020 Other Expenses Schedule						
Name: The Lee Foundation						
<b>EIN:</b> 59-6148803						
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

Office Expenses

efile GRAPHIC print - DO NOT PROCESS	DLN: 93491068007661
TY 2020 Other Notes/Loans Receivable Short Schedule	
Name: The Lee Foundation	
<b>EIN:</b> 59-6148803	
Name of 501(c)(3) Organization	Balance Due
Famlee Investment Company	0

efile GRAPHIC print - DO NOT PROCESS As Filed Data -	DLN: 93491068007661
TY 2020 Substantial Contributors Schedule	
Name: The Lee Foundation EIN: 59-6148803	
Name	Address
Independencia Dominica	102 Cherrywood Ct Kissimmee, FL 34743

Schedule B	OO NOT PROCESS	As Filed Data -	-£0::4:11			<b>DLN: 93491068007661</b> OMB No. 1545-0047
(Form 990, 990-EZ,	orm 990, 990-EZ,					
or 990-PF) Department of the Treasury Internal Revenue Service	tof the Treasury ► Go to <u>www.irs.gov/Form990</u> for the latest information.				2020	
Name of the organization The Lee Foundation						dentification number
Organization type (che	eck one):				59-6148803	
Filers of:	Section:					
Form 990 or 990-EZ	☐ 501(c)( ) (d	enter number) orga	nization			
	☐ 4947(a)(1) r	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
	☐ 527 politica	☐ 527 political organization				
Form 990-PF	<b>✓</b> 501(c)(3) ex	kempt private found	lation			
	4947(a)(1) r	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	☐ 501(c)(3) ta	☐ 501(c)(3) taxable private foundation				
	ation filing Form 990, 9 r property) from any on					
Special Rules						
under sections 5 received from an 990, Part VIII, lin	ne 1h, or (ii) Form 990-	n(A)(vi), that checke ng the year, total co EZ, line 1. Complet	d Schedule A (Form 9 ontributions of the grea e Parts I and II.	90 or 990-EZ), P ater of <b>(1)</b> \$5,000	art II, line 13, or <b>(2)</b> 2% of	. 16a, or 16b, and that the amount on (i) Form
during the year,	tion described in section total contributions of m the prevention of cruel	ore than \$1,000 <i>ex</i>	clusively for religious,	charitable, scient		
during the year, If this box is che purpose. Don't o		ely for religious, cha tal contributions tha ts unless the <b>Gene</b>	ritable, etc., purposes, at were received during ral Rule applies to this	, but no such con g the year for an s organization be	tributions tota exclusively re cause it recei	aled more than \$1,000. eligious, charitable, etc.
Caution: An organization 990-EZ, or 990-PF), but or on its Form 990PF, F990-EZ, or 990-PF).	it <b>must</b> answer "No" o	n Part IV, line 2, of	its Form 990; or check	k the box on line	H of its Form	
For Paperwork Reduction of for Form 990, 990-EZ, or 99		tions	Cat. No. 30613X	Schedu	ıle B (Form 990	), 990-EZ, or 990-PF) (2020)

Schedule B (Forn	n 990, 990-EZ, or 990-PF) (2020)		Page 2
Name of organizat The Lee Foundatio		Employer identification 59-6148803	number
Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Festival Independencia Dominicana  102 Cherrywood Ct  Kissimmee, FL 34763	\$ 7,500	Person Payroll Noncash (Complete Part II for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions.) (d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)