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

2020

OMB No 1545-0047

Open to Public inspection

For	cale	nda	year 2020 or ta	x year beginniı	ng :	12/16 , <b>202</b> 0	, and ending 12	2/3	<b>,20</b> 2020	
			-			<u></u>		Α	Employer identification nu	mber
			AND JANIO	CE GOLD FA	MILY	\		<u>_</u>	<u>85-4351428</u>	<del></del>
			ON INC.		_			В	Telephone number (see ins	tructions)
			DADELAND E	BLVD. #170	1	ì		<u> </u>	352-256-9502	
MIF	7M I	., t	EL 33156		•	•		C	If exemption application is	pending, check here > X
G	`ha	ck al	I that apply	X Initial return	]	Initial return of a for	mer public charity	┪		
G	J116	ch ai	i tilat apply	Final return	}	Amended return	mer public charity	P	1 Foreign organizations, che	ck here
			-	Address char		Name change		ł	2 Foreign organizations mee	ting the 85% test, check
<del>11 7</del>		-1. A			J .	1(c)(3) exempt private	foundation (())	╣	here and attach computation	on P
п	-ne		pe of organization					1_	If any oto foundation atotic	
	ــــــــــــــــــــــــــــــــــــــ					trust Other taxable		E	If private foundation status under section 507(b)(1)(A	
			t value of all assets a II, column (c), line 1		) Acc	counting method X	Sash Accrual	1		··
`	\$	i i ai t				Other (specify)		F	If the foundation is in a 60	
Positive Control		#el ▲	1,900,		(Part I,	column (d), must be on	cash basis )	1	under section 507(b)(1)(B	), check here
Rar	Til:		nalysis of Re			(a) Revenue and	(b) Net investme	nt	(c) Adjusted net	(d) Disbursements
		CO	<b>(penses</b> (The lumns (b), (c), a	total of amount	s in	expenses per books	income		income	for charitable purposes
		ne	cessarily equal t	the amounts in						(cash basis only)
		co	lumn (a) (see inst	<del></del>			an a develope and the contract of	F 4 - 4 - 1 - 1 - 1	A A ALM - N and in the part of the last of	
	- }	1	Contributions, gifts, grants			1,900,000.				TO THE OWNER OF THE PARTY OF TH
•		2	Check Lif the four	ndation is not required to	attach Sch E	TO THE PARTY OF TH	MANAGE WELL	NO. WE	NAME OF THE PERSON OF THE PERS	Designation of the second
١\.	-	3	Interest on savings and te	mporary cash investments	;	1.		1.	1	
Ч.	-	4	Dividends and intere	, -		<u> </u>			<del> </del>	A CONTRACTOR OF THE CONTRACTOR
, )		5 a	Gross rents							STATE OF THE PARTY
_		b	Net rental income or (loss)					<b>ONLY</b>	THE CONTRACTOR OF THE CONTRACT	
-		6 a	Net gain or (loss) from sa	le of assets not on line 10		Method and anti-market and letter midt	TANKE SHELL WAS	7		
อี	!		Gross sales price for					W16		
Revenue		7	assets on line 6a Capital gain net inco	ome (from Part IV, II	ne 2)			***************************************		
Š		8	Net short term capital		•				COMPLEX MENT OF CHANGE AS SECTION ASSESSED.	
8	!	9	Income modifications	s		PARTICIONAL PROPERTY AND A STATE OF THE PARTICIPATION OF THE PARTICIPATI	NO PERMIT	100	, ,	THE PERSON NAMED IN THE PE
	- 1	1 <b>0</b> a	Gross sales less returns and			THE STATE OF	10 May 10	183		
			allowances Less Cost of				The state of the s	A STATE		Total Market State Control of the Co
	l	L	goods sold				MILE TO BE A STATE	N.A.		
	1		Gross profit or (loss) (atta				THE PROPERTY OF THE PARTY OF TH		100	<b>经工程数据的</b>
(n		11	Other income (attack	h schedule)					191	
Ö								<del></del> ,	101/ 101	
<u>}</u> —			Total Add lines 1 th			1,900,001.	-//	احدا ہے۔	1.	
SCANNED	,	13	Compensation of off		lees, etc	0.				
MED W	3	14 15	Other employee sala Pension plans, empl	_			<del>                                     </del>			
	5		Legal fees (attach so	•						
				•				- · ·		<del></del>
> m	! [		Accounting fees (atta Other professional fees (a	attach sch)		-		_	<u></u>	<del></del>
§		17	Interest	ST SOIL		-				
		18	Taxes (attach scheduleXs	ee instre)			<del>                                     </del>		<del>  ( -                                  </del>	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	!	19	Depreciation (attach	_			116	Ų		
2005 Tinist			schedule) and deple					)	N- / )\	
ٽ E	:	20	Occupancy				111	/	1	
þ	•	21	Travel, conferences,	-			1,1			
7		22	Printing and publicat							
Ž		23	Other expenses (atta	ach schedule)						
Ö	n	_				<u></u>				
Operating and Administrative E	,	24	Total operating and expenses. Add lines							
Ğ	!	25	Contributions, gifts, grants	_			TO SHIELD EAR SAUCE			
8							BUTCHER TO THE PROPERTY OF THE PARTY OF THE	ATT TO	THE RESERVE OF THE PERSON OF T	
( Õ	)	26	Total expenses and Add lines 24 and 25			0.		0.	· 0.	0.
	$\dashv$	27	Subtract line 26 from			†		(1) A		
	J	a	Excess of revenue of	over expenses						
	ł		and disbursements			1,900,001.	DIRECTION OF THE PARTY.	<b>HEAL</b>		
			Net investment inco		-	Mary Mary Ann Ann Ann Ann Ann Ann Ann Ann Ann An	PROPERTY AND THE PROPERTY OF THE PARTY OF TH	1.	ALL PROPERTY OF THE PARTY OF TH	AND THE PROPERTY OF THE PROPER
		C	Adjusted net incom	e (if negative, enter	-0-)			接线	1.	<b>元帅的国家公司</b>

Page 2

Dar	F II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	of year
rar	L II	Dalatice Sticets	(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	-bearing			
	2	Savings and tempor	ary cash investments		1,900,001.	1,900,001.
	3	Accounts receivable	<b>-</b>		4 /	
		Less allowance for	doubtful accounts ►			
	4	Pledges receivable	·		•	1
		Less allowance for	doubtful accounts ►			
	5	Grants receivable				
	6	Receivables due from offic disqualified persons (attac	cers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans rec	eivable (attach sch)	<u> </u>		
		Less: allowance for	doubtful accounts >			
	8	Inventories for sale	or use			
	9	Prepaid expenses ai	nd deferred charges			
Assets	10:	a Investments – U S obligations (attach s	and state government chedule)			
SS	1	<b>b</b> Investments — corporate	stock (attach schedule)			
ď	(	c Investments — corporate	bonds (attach schedule)			
	11	Investments – land, equipment basis.	buildings, and			
		Less accumulated deprec (attach schedule)	lation			
	12	Investments - morto	gage loans.			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and	equipment basis►	* 20 r		1
		Less accumulated deprec (attach schedule)	iation •			
	15 16	Total assets (to be	be   completed by all filers —  Also, see page 1, item I).	0.	1,900,001.	1,900,001.
	17		nd accrued expenses		2,300,001.	1,300,001.
	18	Grants payable	•		· <del></del> -	1
ΧN	19	Deferred revenue				
Liabilities	20	Loans from officers, direct	tors, trustees, & other disqualified persons			
<u>ā</u>	21	Mortgages and other notes	s payable (attach schedule)		-	****
<u></u>	22	Other liabilities (des	cribe► )			4.
	23	Total liabilities (add	lines 17 through 22)	0.	0.	
88		Foundations that fo and complete lines	llow FASB ASC 958, check here ►X 24, 25, 29, and 30.			
Net Assets or Fund Balance	24	Net assets without d			1,900,001.	
8	25	Net assets with done	or restrictions			
Ĕ	23		not follow FASB ASC 958, check here		<del></del>	<del>                                     </del>
ĭ.		and complete lines	26 through 30.			
Š	26		orincipal, or current funds			<u>                                     </u>
Set	27		or land, bldg, and equipment fund			
A.S.	28		ulated income, endowment, or other funds			
ਲ	29		und balances (see instructions)	0.	1,900,001.	
Ž	30	(see instructions)	net assets/fund balances	0.1	1,900,001.	
Par	till		ges in Net Assets or Fund Balanc		_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			alances at beginning of year - Part II, colu		aree with	
	end-	of-year figure reported	d on prior year's return).	anni (a), iiile 29 (iiiust d	gree with	0.
2	Ente	er amount from Part I,	line 27a		2	1,900,001.
3		increases not included in li	ne 2 (Itemize) 🟲		3	
4		lines 1, 2, and 3			4	1,900,001.
5		ases not included in line 2 (		<del>_</del>	5	
_6_	Tota	I net assets or fund ba	alances at end of year (line 4 minus line 5)	– Part II, column (b), I	ine 29 <b>6</b>	1,900,001.

Par	(a) List and describe	LOSSES FOR Lax ON INVESTME the kind(s) of property sold (for examparehouse, or common stock, 200 si	ple, real estate,	(b) How acquired P — Purchase D — Donation	(mo , day, yr )	(d) Date sold (mo , day, yr )
1 a	N/A				1	
t				<del></del>		
	;					
c						
e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain or ((e) plus (f) m	
а						
<u>t</u>	)				<u> </u>	·
	:				<u> </u>	
	<u> </u>					
e		<u> </u>	<u> </u>		<del></del>	
	Complete only for assets showing	g gain in column (h) and owned by the			(I) Gains (Col	(h)
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		gain minus col (k), t han -0-) <b>or L</b> osses (fi	
a						
t						
	<del></del>					
	· · · · · · · · · · · · · · · · · · ·				· <del></del>	
					T -	
2	Capital gain net income or (ne	If (loss), er	o enter in Part I, line 7 nter -0- in Part I, line 7	2		
3	Net short-term capital gain or	(loss) as defined in sections 1222(	5) and (6) <sup>.</sup>			
	If gain, also enter in Part I, lin	e 8, column (c) See instructions 1	f (loss), enter -0-	_   _		
	ın Part I, line 8			3		
Par		r Section 4940(e) for Reduce				<del>-</del>
		940(e) REPEALED ON DECE	<u> MBER 20, 2019 – DO</u>	NOT COM	PLETE.	
_1	Reserved	<del>,                                      </del>				
	<b>(a)</b> Reserved	<b>(b)</b> Reserved	(c) Reserved		<b>(d)</b> Reserve	d
	Reserved	,		-	10.	,
	Reserved	*				****
	Reserved	* 4	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			<del></del>
-	Reserved	The state of the s	a manifesta frame of an en-Air of			
	Reserved			77	•	• • •
			<del></del>			
2	Reserved			2		
3	Reserved			3	•	
4	Reserved			4		
5	Reserved			5	1-	<del></del>
6	Reserved			6		- , ,
•						
7	Reserved			7	, , , , , , , , , , , , , , , , , , ,	
8	Reserved			8		2 1 2 4
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Par		1331420		<u> </u>	-9-	•
$\overline{}$	Exempt operating foundations described in section 4940(d)(2), check here	.				i
	Date of ruling or determination letter. (attach copy of letter if necessary – see instructions)	<del></del>	: •	_		Į.
b	Resèrved	1 1			0.	
	All other domestic foundations enter 1 39% of line 27b Exempt foreign organizations, enter 4% of	<del>                                     </del>			<del></del> i	İ
	Part I, line 12, col (b)	<u>.</u>			4 .	ļ
2						
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			0.	•
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			0.	•
6	Credits/Payments	,		*	-	İ
а	2020 estimated tax pymts and 2019 overpayment credited to 2020 6 a	1 ,   ·	_	•	. 1	
b	Exempt foreign organizations — tax withheld at source 6b	] .			٠.	
С	Tax paid with application for extension of time to file (Form 8868)	] •	•	•		l
d	Backup withholding erroneously withheld 6 d			•		ļ
7	Total credits and payments Add lines 6a through 6d	7			0.	_
8	Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached	8				_
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0.	_
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be Credited to 2021 estimated tax Refunded	11				_
Par	t VII-A Statements Regarding Activities					
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No	_
	participate or intervene in any political campaign?		1 a		X	_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?		, 			
	See the instructions for the definition		1 b		_X_	3
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published			· . *	•	
	or distributed by the foundation in connection with the activities					į
	Did the foundation file <b>Form 1120-POL</b> for this year?  Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		1 c		X	
u	(1) On the foundation >\$ 0. (2) On foundation managers >\$	0.			٠	l
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on		[	ĺ	ĺ	ĺ
	foundation managers •\$0.				`	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X	
	If 'Yes,' attach a detailed description of the activities			· 1		l
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		<u> </u>			ļ
_	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3		<u>X</u>	-
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X	
	If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N	<u>'A</u>	-
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		<u> X</u>	i
_	If 'Yes,' attach the statement required by <i>General Instruction T</i>					l
ь	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			٠	, ,	l
	By language in the governing instrument, or		ļ., l	.]		ĺ
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict     with the obtaining the government of the governme		6		• •	į
7	with the state law remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV		7	Х	Χ	•
7	Enter the states to which the foundation reports or with which it is registered. See instructions		<del>                                     </del>	-^-	_	i
oa	N/A		•			1
L						
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G?</i> If 'No,' attach explanation		8ь	Х		
Ω	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) o	r /10/12/11/EN	.		ا د پر	1
9	for calendar year 2020 or the tax year beginning in 2020? See the instructions for Part XIV If 'Yes,' complete	Part XIV	9		X	· -
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names					•
	and addresses SEE STATEMENT		10	Х		
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	_ <del></del>			
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	Yes	No X
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address  N/A  Talabase as a second of MARY C. COLD			
14	The books are in care of MARK S GOLD  Located at PO BOX 2877 PONTE VEDRA BEACH FL  ZIP + 4 MARK S GOLD  ZIP + 4 MARK S GOLD	<u> 56-9</u>	<u>5</u> 02_	- <b>-</b> -
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here.	N/A	,	<u> </u>
	and enter the amount of tax-exempt interest received or accrued during the year			N/A
16	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country	<u>.</u>	•	-
Par	t 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
1 8	a 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 X No	ļ.		
			,	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No		* <u></u> *	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No	1 1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes XNo	,",	•	- 1
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X No	. 3		
	(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 )  Yes  X No	15. 17.	1 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Ė	b If any answer is 'Yes' to 1a(1)–(6), did <b>any</b> 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	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance, check here		4	1
(	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 2020?	1 c		X
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))			·
ā	At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2020?   Yes   X   No	7.		. ,
	If 'Yes,' list the years ▶ 20 _ , 20 _ , 20 , 20		,	
ŀ	Are there any years listed in 2a for which the foundation is <b>not</b> 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).	2 b	N	/A
(	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	•	·	
	► 20 , 20 , 20 , 20	~		,
3 a	2 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No			
ŧ	of Yes,' did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969 (2) the lapse of the 5-year period (or longer period approved	,		
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to	<i>&gt;</i> √	,	4
	determine if the foundation had excess business holdings in 2020)	3 b	N.	/A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		_X
ŀ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could	£,	رد	
	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?	4 b	- m -	. ! X
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Total number of other employees paid over \$50,000

	and Contractors (continued)		
3	Five highest-paid independent contractors for professional services. See inst		
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NOV	JE		
Tota	number of others receiving over \$50,000 for professional services	<b>&gt;</b>	0
Par	t IX-A Summary of Direct Charitable Activities		
List th organi	ne foundation's four largest direct charitable activities during the tax year. Include relevant statistical i zations and other beneficiaries served, conferences convened, research papers produced, etc	nformation such as the number of	Expenses
1	N/A		
•			
2		<b>-</b>	
	~		
3			
4	~		
Day	t IV B. Comment of December Deleted Investments (see material		
	TIX-B: Summary of Program-Related Investments (see instruct tribe the two largest program-related investments made by the foundation during the tribe		Amount
1	N/A	ax year on mes i and z	Amount
-	N/M		
2			
	*		
	other program-related investments. See instructions	1	
3	*		
	~		
Tota	I. Add lines 1 through 3		0.
BAA			Form <b>990-PF</b> (2020)
			(2020)

RartX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes a Average monthly fair market value of securities. 1 a b Average of monthly cash balances 1 b 1,900,001 c Fair market value of all other assets (see instructions) 1 c d Total (add lines 1a, b, and c) 1 d 1,900,001 e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1 e 0. Acquisition indebtedness applicable to line 1 assets 2 0. Subtract line 2 from line 1d 3 1,900,001. Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions) 28,500. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 1,871,501 SHORT YEAR MODIFIED PERCENTAGE 0.2186 % Minimum investment return. Enter 5% of line 5 4,091 RartXI■ Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.) 1 Minimum investment return from Part X, line 6 1 4,091. 2a Tax on investment income for 2020 from Part VI, line 5 2 a b Income tax for 2020 (This does not include the tax from Part VI) 2 b c Add lines 2a and 2b 2 c 3 Distributable amount before adjustments, Subtract line 2c from line 1 3 4,091. 4 Recoveries of amounts treated as qualifying distributions. Add lines 3 and 4 5 4,091 Deduction from distributable amount (see instructions) 6 7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 4,091 Part XIII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1 a **b** Program-related investments — total from Part IX-B 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3 a **b** Cash distribution test (attach the required schedule) 3 b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 0. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions 5 Adjusted qualifying distributions. Subtract line 5 from line 4 0.

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

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Form 990-PF (2020)

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

Page 9

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2019	<b>(c)</b> 2019	<b>(d)</b> 2020
Distributable amount for 2020 from Part XI, line 7				4,091.
2 Undistributed income, if any, as of the end of 2020		<del></del>		4,051.
a Enter amount for 2019 only			0.	
<b>b</b> Total for prior years 20 , 20 , 20	<del>- · · -</del> -·	0.		
3 Excess distributions carryover, if any, to 2020				· · · · · · · · · · · · · · · · · · ·
a From 2015				
<b>b</b> From 2016				
c From 2017				
<b>d</b> From 2018				
e'From 2019				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2020 from Part				
XII, line 4· ► \$				
a Applied to 2019, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)		0.		<del></del>
c Treated as distributions out of corpus	0	,		
(Election required — see instructions)	0.			
d Applied to 2020 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2020 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as				
indicated below:			1	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.		i	
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0.		
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		0.		
<b>d</b> Subtract line 6c from line 6b Taxable				
amount — see instructions		0.		
e Undistributed income for 2019 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2020 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2021				4,091.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(h)(1)(F) or 4942(g)(3) (Fliction) may be required — see instructions)	0.			
8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions)	0.			-
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9,				
a Excess from 2016				
<b>b</b> Excess from 2017				
c Excess from 2018				
d Excess from 2019				
e Excess from 2020				•
BAA		<del></del>	<del></del>	Form <b>990-PF</b> (2020)

Form 990-PF (2020) THE MARK AND JAM				85-435142		
Part XIV - Private Operating Foundations (see instructions and Part VII-A, question 9)  N/A  1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling						
is effective for 2020, enter the date of the	ruling	, ,		· · · · · ·		
b Check box to indicate whether the foundation		erating foundation		4942(j)(3) or	4942(1)(5)	
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total	
investment return from Part X for each year listed	(a) 2020	<b>(b)</b> 2019	(c) 2018	(d) 2017		
b 85% of line 2a.						
c 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						
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>						
3 Complete 3a, b, or c for the alternative test relied upon						
a 'Assets' alternative test — enter						
(1) Value of all assets						
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed						
c '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).						
(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						
Part XV <sup>*</sup> Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more	in	
assets at any time during the				. 40,000	•	
Information Regarding Foundation Mana a List any managers of the foundation who has close of any tax year (but only if they has SEE STATEMENT 3	ve contributed more th	nan 2% of the total of than \$5,000) (See	contributions received a section 507(d)(2)	by the foundation bef	ore the	
b List any managers of the foundation who ow a partnership or other entity) of which the NONE	n 10% or more of the e foundation has a 1	stock of a corporation of a corporation of greater interest.	on (or an equally large rest	e portion of the owner	ship of	
2 Information Regarding Contribution, Grant, Check here ► X if the foundation only m requests for funds If the foundation mak 2a, b, c, and d. See instructions	akes contributions to es gifts, grants, etc	preselected charitat , to individuals or o	ole organizations and operations under o	other conditions, co		
<b>a</b> The name, address, and telephone number of	or email address of th	e person to whom a	pplications should be	addressed		
<b>b</b> The form in which applications should be	submitted and infor	mation and materi	als they should inclu	de		
c Any submission deadlines.						
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	able fields, kinds of i	nstitutions, or other	factors	
BAA	TEI	EA0310L 09/28/20	<del></del>	F	form <b>990-PF</b> (2020)	

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Grants and Contributions Paid During the	If recipient is an individual	<u> </u>		N/A
. Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
Paid during the year				
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Total	<del></del>		3	a►
Approved for future payment				
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Part XVI	-A Analysis of Income-Producing	Activities				
	s amounts unless otherwise indicated		ed business income	Exclude	d by section 512, 513, or 514	(e)
	•	(a) Business	<b>(b)</b> Amount	(c) Exclu-	(d) Amount	Related or exempt function income
1 Progr	ram service revenue	code		sion		(See instructions )
a	<del>-</del>					
b						
c						
d						
е						
f						
g Fees	and contracts from government agencies					
2 Mem	bership dues and assessments					
3 Interes	st on savings and temporary cash investments					1.
4 Divid	ends and interest from securities					
5 Net re	ental income or (loss) from real estate:		•	•		
a Debt-	financed property					
<b>b</b> Not d	lebt-financed property					
6 Net rea	ntal income or (loss) from personal property					
7 Other	r investment income					
<b>8</b> Gain o	r (loss) from sales of assets other than inventory					
9 Net in	ncome or (loss) from special events					
10 Gross	s profit or (loss) from sales of inventory					
11 Other	r revenue·	,	v-			
а						
ь						
С						
d						
e						
		5	<u> </u>			
12 Subto	otal Add columns (b), (d), and (e)	l'		·•		1.
	otal Add columns (b), (d), and (e)  1. Add line 12, columns (b), (d), and (e)	<u>'</u>		<u> </u>	13	$\frac{1}{1}$
13 Total (See works	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated	ons )				
13 Total (See works	. Add line 12, columns (b), (d), and (e)	ons )	ishment of Exemp	ot Purp		
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	ons )	<u>`</u>		oses	1.
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated	ons )	<u>`</u>		oses	1.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	ons )	<u>`</u>		oses	1.
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13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	ons )	<u>`</u>		oses	1.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	ons )	<u>`</u>		oses	1.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	ons )	<u>`</u>		oses	1.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	ons )	<u>`</u>		oses	1.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	ons )	<u>`</u>		oses	1.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	ons )	<u>`</u>		oses	1.
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13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	ons )	<u>`</u>		oses	1.
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13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	ons )	<u>`</u>		oses	1.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	ons )	<u>`</u>		oses	1.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	ons )	<u>`</u>		oses	1.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	ons )	<u>`</u>		oses	1.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	ons )	<u>`</u>		oses	1.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	ons )	<u>`</u>		oses	1.
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13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	ons )	<u>`</u>		oses	1.

# PartiXVIII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did deş rela	the organization directly cribed in section 501(c) (ting to political organizat	or indirectly engliother than sections?	gage in any of the following w on 501(c)(3) organizations) o	oth any other in section	r organization 527,		Ye	S NO
			noncharitable exempt organiz					
(1)	Cash		**** **** ***				1 a (1)	X
(2)	Other assets	******					1 a (2)	X
<b>b</b> Oth	er transactions.							
(1)	Sales of assets to a non	charilable exem	ipt organization				1 b (1)	X
(2)	Purchases of assets from	n a noncharitab	le exempt organization				1 b (2)	X
(3)	Rental of facilities, equip	ment, or other	assets				1 b (3)	X
(4)	Reimbursement arrange	ments					1 b (4)	X
(5)	Loans or loan guarantee	s					1 b (5)	X
(6)	Performance of services	or membership	or fundraising solicitations .				. 1 b (6)	X
<b>c</b> Sha	iring of facilities, equipmo	ent, mailing lists	s, other assets, or paid emplo	yees		<del> </del>	1 c	X
the	goods, other assets, or ser transaction or sharing a	vices given by th rrangement, sho	omplete the following scheduli te reporting foundation. If the follow in column (d) the value of noncharitable exempt organization	undation receithe goods, o	eived less than other assets, o	fair market value i	in ed.	<del> </del>
N/A	(0) / (1) (1)	(0) //ш/// 0	The state of the s	1 (4) -		10,0, (10,000,00,00,00,00,00,00,00,00,00,00,00,		
11/ 21			· · · · · · · · · · · · · · · · · · ·	<del></del>				
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des	ne foundation directly or inc cribed in section 501(c) ( 'es,' complete the followi	other than secti	with, or related to, one or more on 501(c)(3)) or in section 52	tax-exempt of 7?.	organizations		Yes	ΧNο
<b>D</b> 11 1	(a) Name of organizati	<del></del>	(b) Type of organizatio	n	(c)	Description of re	lationshin	
NT / 2	(a) Name or organizati	-	(b) Type of Organizatio		(0)	Description of re		
N/A			<u> </u>					<del></del>
· · · · · · · · · · · · · · · · · · ·					<del> </del>			<del></del>
1.	Index panelting of parties. I donlar	ra that I have overnin	and the roturn uncluding accompanying	schodules and s	Internante and to	he hart of my knowled	and helpet it is to	
Sign	orrect, and complete. Declaration	of preparer (other th	ed this return, including accompanying an taxpayer) is based on all information			dge	May the IRS d	iscuss of the
Here	VIVV 🐼	7 41	15/	21 PR	ESIDENT		preparer show See instruction	n below?
	Signature of officer or trustee	4	Date	Titlo			X Yes	No
	Print/Type preparer's nar	me	Preparer's standure		Date /	Check If	PTIN	
Paid	ALEX BINSTOC	CK	14//		1/9/2021	self employed	P0001442	0
Prepare		INSTOCK R	JBIN SBAR GARCÍA &	ELLZEY	PA	Firm's EIN - 20-	4183255	
Use On			CLAND BLVD STE 1701					<del></del>
JJC 011			33156			Phone no. (30	5) 670-198	34
BAA				······································		100	Form 990-PI	<del></del>

#### Schedule B

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2020

Name of the organization THE MAR	K AND JANICE GOLD FAMILY	Employer identification number				
FOUNDAT	85-4351428					
Organization type (check one)						
Filers of: Section:						
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation						
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
, ,	red by the <b>General Rule</b> or a <b>Special Rule</b> . , (8), or (10) organization can check boxes for both the General Rule and a S	Special Rule See instructions.				
General Rule						
X For an organization fill	ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totalione contributor. Complete Parts I and II. See instructions for determining a contribu					
Special Rules						
under sections 509(a)( received from any or	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, Iir ne contributor, during the year, total contributions of the greater of (1) \$5,000 line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	ne 13, 16a, or 16b, and that				
during the year, total purposes, or for the	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I (entering 'N/A' in column (b) instead of the contributor name and address), II, and III					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
	isn't covered by the General Rule and/or the Special Rules doesn't file Schec lo' on Part IV, line 2, of its Form 990, or check the box on line H of its Form					

Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Employer identification number

THE	MARK	עונע ע	JANICE	COID	FAMTIV

85-4351428

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	MARK & JANICE GOLD PO BOX 2877 PONTE VEDRA BEACH, FL 32004	\$1,900,000.	Person X 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 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		
DAA		Sahadula D (Fauss 00)	(Complete Part II for noncash contributions )		

Employer identification number

THE MARK AND JANICE GOLD FAMILY

85-4351428

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional sp	pace is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	N/A		
		  \$	 
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$ 	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<u>-</u>		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<b>-</b>		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		  \$	
BAA	Sche	edule B (Form 990, 990-E	Z, or 990-PF) (2020

Name of organ	nization RK AND JANICE GOLD FAMILY		Employer identification number 85-4351428		
		to contributions to organi	zations described in section 501(c)(7), (8),		
	or (10) that total more than \$1,000 for t				
	the following line entry. For organizations of	ompleting Part III, enter the total	of exclusively religious, charitable, etc.,		
	contributions of \$1,000 or less for the year	(Enter this information once See	instructions) •\$N/A		
(a)	Use duplicate copies of Part III if additional				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	N/A				
		(e) Transfer of gift	<u> </u>		
	Transferee's name, addres	•	Relationship of transferor to transferee		
		· - <del></del>			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
			<del>-</del>		
		(e) Transfer of gift			
	Transferee's name, addres	ss, and ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
			<b>-</b>		
			- <b>-</b>		
		<b>-</b>	<del>-</del>		
	(e) Transfer of gift				
	Tronsferen's norms address	•			
	Transieree's name, addres	ss, and zir + 4	Relationship of transferor to transferee		
			- <b>-</b>		
	<u> </u>	· <del>-</del>			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	<del> </del>				
		/a\ T			
		(e) Transfer of gift			
	Transferee's name, addres	ss, and ZIP + 4	Relationship of transferor to transferee		
		. <b> </b>			

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2020

## **FEDERAL STATEMENTS**

THE MARK AND JANICE GOLD FAMILY FOUNDATION INC.

PAGE 1

85-4351428

STATEMENT 1 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR . ADDRESS OF SUBSTANTIAL CONTRIBUTOR

MARK & JANICE GOLD

PO BOX 2877 PONTE VEDRA BEACH, FL 32004

#### STATEMENT 2 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED			ACCOUNT/
MARK S GOLD 4116 PONTE VEDRA BLVD JACKSONVILLE BEACH, FL 32250	PRESIDENT 0	\$ 0.	\$ 0.	\$ 0.
JANICE R GOLD 4116 PONTE VEDRA BLVD JACKSONVILLE BEACH, FL 32250	VICE PRESIDENT 0	0.	0.	0.
KYLE GOLD 4116 PONTE VEDRA BLVD JACKSONVILLE BEACH, FL 32250	TREASURER 0	0.	0.	0.
STEVEN T GOLD 421 PONTE VEDRA BLVD PONTE VEDRA BEACH, FL 32082	SECRETARY 0	0.	0.	0.
KIMBERLY BLUMENTHAL 10 TAYLOR ROAD WELLESLEY HILLS, MA 02481	DIRECTOR 0	0.	0.	0.
JESSICA GOLD PO BOX 16164 CLAYTON, MO 63105	DIRECTOR 0	0.	0.	0.
	TOTAL	\$ 0.	\$ 0.	\$ 0.

STATEMENT 3
FORM 990-PF, PART XV, LINE 1A
FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

MARK S GOLD JANICE R GOLD