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OMB No. 1545-0052

2019

## **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

Form 990-PF

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

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

Open to Public Inspection

For	caler	ndar year 2019, or tax year be	eginning 10-01-20	19 , aı	nd ending 09-3	0-2020			
		Indation ERSON FOUNDATION INC				A Employer identification number			
					23-7047045				
	ber and O BOX :	d street (or P.O. box number if mail is not de 14096	elivered to street address)	Room/suite	<b>B</b> Telephone	number (see instructio	ns)		
					(954) 764-28	:19			
		n, state or province, country, and ZIP or fore ERDALE, FL 333024096	eign postal code		C If exemption	on application is pendir	ng, check here		
<b>G</b> Cl	neck al	l that apply:	☐ Initial return of a	former public charity	<b>D 1.</b> Foreign	organizations, check h	ere		
		Final return	Amended return			organizations meeting eck here and attach co			
		Address change			<u> </u>	foundation status was	· -		
_	,		(c)(3) exempt private f			tion 507(b)(1)(A), che			
		n 4947(a)(1) nonexempt charitable tru		private foundation					
of	year (f	rom Part II, col. (c), ▶\$ 70.472.645	Accounting method:  Other (specify)  art I, column (d) must	✓ Cash ☐ Accru  be on cash basis.)		ndation is in a 60-mont tion 507(b)(1)(B), chec			
Pa	rt I	Analysis of Revenue and Ex	nenses (The total				(d) Disbursements		
		of amounts in columns (b), (c), and (d) n equal the amounts in column (a) (see ins	may not necessarily	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc., rec schedule)	ceived (attach						
	2	Check ► ✓ if the foundation is <b>not</b>	required to attach						
	_								
	3	Interest on savings and temporary c Dividends and interest from securities		962,153	949,8	70			
	5a	Gross rents	es	902,133	949,0	76			
	b	Net rental income or (loss)							
a)	6a	Net gain or (loss) from sale of assets	s not on line 10	3,195,471	L				
Revenue	b	Gross sales price for all assets on lin		· · ·					
	-	Gross sales price for all assets on his	26,088,885						
	7	Capital gain net income (from Part I'			3,195,4	71			
	8	Net short-term capital gain							
	9	Income modifications							
	10a b	Gross sales less returns and allowan Less: Cost of goods sold	nces						
	C	Gross profit or (loss) (attach schedu	  le		+				
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11		4,157,624	4,145,3	49			
	13	Compensation of officers, directors,		77,800			66,130		
	14	Other employee salaries and wages	, ,	307,245	<u> </u>		291,883		
S	15	Pension plans, employee benefits		74,321	ļ		63,173		
ıse	16a	Legal fees (attach schedule)		2,233	<u> </u>		1,117		
<u>pe</u>	ь	Accounting fees (attach schedule)		27,888	3 13,9	44	13,944		
and Administrative Expenses	c	Other professional fees (attach sche	dule)	325,555	325,5	55	0		
ive	17	Interest							
tra	18	Taxes (attach schedule) (see instruc		90,154	4,4	74	25,680		
inis	19	Depreciation (attach schedule) and o	· · ·		L	0			
E E	20	Occupancy		78,351	3,9	18	74,433		
Ă	21	Travel, conferences, and meetings		48,968	<u> </u>	97	44,071		
anc	22	Printing and publications							
	23	Other expenses (attach schedule)		55,220	2,1	99	52,022		
Operating	24	Total operating and administrati	ve expenses.						
ber		Add lines 13 through 23		1,087,806	394,2	84	632,453		
0	25	Contributions, gifts, grants paid	[	2,454,052			2,454,052		
	26	<b>Total expenses and disbursemen</b> 25	nts. Add lines 24 and	3,541,858	394,2	84	3,086,505		
	27	Subtract line 26 from line 12:							
	a	Excess of revenue over expenses disbursements	s and	615,766	5				
	ь	Net investment income (if negative	ve, enter -0-)	313,700	3,751,0	65			
	c	Adjusted net income (if negative,	enter -0-)						
For	Paper	work Reduction Act Notice, see in	structions.		Cat. No. 1128	9X Fo	rm <b>990-PF</b> (2019)		

13,717,152

48,162,946

**چ** 

25,620

17,913

17.913

350,998

47,794,035

48,145,033

48,162,946

13,465,101

48,767,341

6,542

6,542

350,998

48,409,801

48,760,799 48,767,341

1

2

3 4

5

6

48,145,033

48,760,799

48.760.799

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615,766

25,549

15,838,117

70,472,645

25,549

11

12

13

14

15

16

17

18

19

20

21

22 23

24 25

27

28

30

Part III

2

3

Liabilities

**Fund Balances** 

اة 26

Assets

29 29 Investments—land, buildings, and equipment: basis ► \_\_\_\_
Less: accumulated depreciation (attach schedule) ► \_\_\_\_

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

Land, buildings, and equipment: basis -

instructions. Also, see page 1, item I)

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions . . .

Net assets with donor restrictions . .

and complete lines 26 through 30.

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

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Other assets (describe > \_

Other liabilities (describe >\_

Grants payable

Investments—other (attach schedule) . . . . . .

Less: accumulated depreciation (attach schedule) ▶ 15,582

Foundations that follow FASB ASC 958, check here ▶

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

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . .

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

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

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

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

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

Analysis of Changes in Net Assets or Fund Balances

Paid-in or capital surplus, or land, bldg., and equipment fund

Page **3** 

	ee the kind(s) of property sold (e.g., arehouse; or common stock, 200 sh		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1aSee Additional Data Tabl	e				
b					
С					
d					
e					
	(f)		(g)	(	h)
<b>(e)</b> Gross sales price	Depreciation allowed	Cost or	other basis	Gain d	or (loss)
<u> </u>	(or allowable)	plus exp	ense of sale	(e) plus (f	) minus (g)
a See Additional Data Tabl	e				
b					
С					
d					
e					
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69		(I)
(i) F.M.V. as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	Excess	<b>(k)</b> s of col. (i) l. (j), if any	col. (k), but not	h) gain minus less than -0-) <b>or</b> om col.(h))
a See Additional Data Tabl		0,0,0	(3)//	,	( //
b					
e					
•	gain or (loss) { gain or (loss) as defined in sections ort I, line 8, column (c) (see instructi	ions). If (loss), enter -0	, ,	3	3,195,47
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment In	come	
If section 4940(d)(2) applies, le	ne section 4942 tax on the distributa	ble amount of any year	r in the base period?	,	es 🗹 No
	ot qualify under section 4940(e). Do				
(a)	nount in each column for each year; I	see instructions perore	making any entries	s. (d)	
Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab		Distribution rat (col. (b) divided by d	col. (c))
2018	3,020,100		61,509,731		0.049100
2017	2,914,920		63,396,038		0.045980
2016	2,733,389		58,354,679		0.046841
2015	2,874,023		54,846,038		0.052402
2014	2,784,199		57,884,888	T	0.048099
2 Total of line 1, column (	•		2		0.242422
	o for the 5-year base period—divide ndation has been in existence if less		.0, or by the <b>3</b>		0.048484
	incharitable-use assets for 2019 from		4		64,670,849
<b>5</b> Multiply line 4 by line 3		•	5		3,135,501
• • • • •	ent income (1% of Part I, line 27b)		6		37,511
					3,173,012
	ions from Part XII, line 4 ,				3,086,505
	eater than line 7, check the box in P			g a 1% tax rate. Se	

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Pai	rt VII-B	Statements Regard	ling	Activities for Which	Form 4720 May Be	Required (continued)				
5a	During the	year did the foundation p	ay c	r incur any amount to:					Yes	No
		on propaganda, or otherw		· -	, , , , , , , , , , , , , , , , , , , ,	☐ Yes 🗸	No			
		nce the outcome of any sp		•	•	<u></u>				
	•	ectly or indirectly, any vol		-		· · 🔲 Yes 🛂	No			
		e a grant to an individual e a grant to an organizati		* **	•	」 Yes ⊻	No			
		ion 4945(d)(4)(A)? See ir			· -					
		e for any purpose other th				· · L Yes 🗹	No			
		cional purposes, or for the		- ·	* **	🗌 <sub>Yes</sub> 🗸				
b	If any ans	wer is "Yes" to 5a(1)-(5),	did a	any of the transactions fa	il to qualify under the ex		No			
	Regulation	s section 53.4945 or in a	curre	ent notice regarding disas	ter assistance? See instr	uctions		5b		
	Organizati	ons relying on a current n	otice	regarding disaster assist	ance check here	▶ □				
С	If the answ	ver is "Yes" to question 5a	(4),	does the foundation clain	n exemption from the	_				
		se it maintained expenditu		, ,		· · 🗌 Yes 🗌	No			
	If "Yes," a	ttach the statement requir	ed b	y Regulations section 53.	4945–5(d).					
6a		undation, during the year,			indirectly, to pay premit	ıms on				
		benefit contract?				Yes 🗸	No			
b		undation, during the year, 6b, file Form 8870.	pay	premiums, directly or ind	irectly, on a personal be	nefit contract?	}	6b		No
7a		e during the tax year, was	the	foundation a party to a n	rohibited tay shelter trai	nsaction?				
	-	id the foundation receive a				∟ res 🖭	No	7b		
8	-	idation subject to the sect		•						
_		achute payment during th								
						Yes ☑ anagers, Highly Paid Er		VAAS		
Pai		and Contractors	,,,,,	ers, Directors, Trust	ecs, roundation ric	inagers, riiginiy raia Er	пріо	y ccs,		
1	List all off	ficers, directors, trustee	s. f	oundation managers ar	d their compensation	See instructions				
	List all oil	recis, un eccors, crustee		<b>(b)</b> Title, and average	(c) Compensation (If	(d) Contributions to	(5)			
	<b>(a)</b> Na	me and address		hours per week	not paid, enter	employee benefit plans and			ise acc Ilowano	
500	Additional D	ata Tablo		devoted to position	-0-)	deferred compensation				
<u> </u>	- Additional D	ata Table								
							1			
2	Compensa	ation of five highest-pai	d er	nployees (other than tl	ose included on line 1	l—see instructions). If no	ne, er	nter "	NONE.	."
(-)	NI= =	ddress of each employee		(b) Title, and average		(d) Contributions to	(-)			
(a)		ore than \$50,000	paiu	nours per week	(c) Compensation	employee benefit plans and deferred			se acco	
				devoted to position		compensation				
EDW	ARD GALE			PROGRAM DIRECTOR	127,00	17,962				0
		NCH HILL RD		]40.00						
	NSON, VT 0			SECRETARY & OREDATIO	106,24	21 152				
	N PFEIFFER NE 15TH S			SECRETARY & OPERATIC  40.00	100,22	21,153				U
		LE, FL 33301								
	ICA MENAHI			PROGRAM DIRECTOR	74,00	11,700				0
	NW 113 AV			40.00	<u></u>	·				
	KLAND, FL 3									
				_						
Tota	ı number of	other employees paid over	er \$5	60,000						0
							For	m <b>99</b> 0	U-PF (	(2019)

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Part VIII Information About Officers, Directors, Trus and Contractors (continued)	stees, Foundation Managers, Highly Pa	iid Employees,
3 Five highest-paid independent contractors for professiona	services (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
WILLIAMS JONES & ASSOCIATES	INVESTMENT ADVISORY	231,029
717 FIFTH AVE 1700		·
NEW YORK, NY 10022		
ALESCO ADVISORS LLC	INVESTMENT ADVISORY	94,526
120 OFFICE PARK WAY PITTSFORD, NY 14534		
Total number of others receiving over \$50,000 for professional service	es	•   0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. In organizations and other beneficiaries served, conferences convened, research papers	iclude relevant statistical information such as the number ers produced, etc.	Expenses
1	· ·	
		$\neg$
		$\dashv$
2		<del>-</del>
		$\dashv$
		$\dashv$
2		
3		$\dashv$
		$\dashv$
		<del> </del>
*		$\dashv$
		<del> </del>
Political Commence of December 1997	- / : : : : : : : : :	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation	during the tax year on lines 1 and 2.	Amount
1		
2		
40.00		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		<b>•</b>
Total Add IIICS I tillough 3		
		Form <b>990-PF</b> (2019)

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

75.021

3,158,521

3.158.521

3,158,521

3,086,505

3,086,505

3,086,505

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3

4 5

6

1

2

3

4

5

b

Part XII

Distributable amount before adjustments. Subtract line 2c from line 1. . . . . . . . . . . . . . . .

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

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

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

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

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

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

383.999

2,774,522

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rt	XIII	

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a From 2014. . . . . **b** From 2015. . . . . c From 2016. . . . **d** From 2017. . . . . e From 2018. . . . .

indicated below:

**b** Excess from 2016. . c Excess from 2017. . . . d Excess from 2018. . . . e Excess from 2019. . .

Undistributed Income (see instructions)

1 Distributable amount for 2019 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2019: a Enter amount for 2018 only. . . . . .

3 Excess distributions carryover, if any, to 2019:

(a)

Corpus

0

(b)

Years prior to 2018

(c)

2018

2,702,506

2,702,506

f Total of lines 3a through e. . . . . . . .

4 Qualifying distributions for 2019 from Part

XII, line 4: ▶ \$ a Applied to 2018, 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

**d** Applied to 2019 distributable amount. . . . .

e Remaining amount distributed out of corpus

**5** Excess distributions carryover applied to 2019.

(If an amount appears in column (d), the same amount must be shown in column (a).) 6 Enter the net total of each column as

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract c Enter the amount of prior years' undistributed income for which a notice of deficiency has

e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . . . . . lines 4d and 5 from line 1. This amount must

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 . . . . . . . . . . . . . . . .

f Undistributed income for 2019. Subtract be distributed in 2020 . . . . . .

7 Amounts treated as distributions out of

corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may

be required - see instructions) . . . . . . . . .

8 Excess distributions carryover from 2014 not

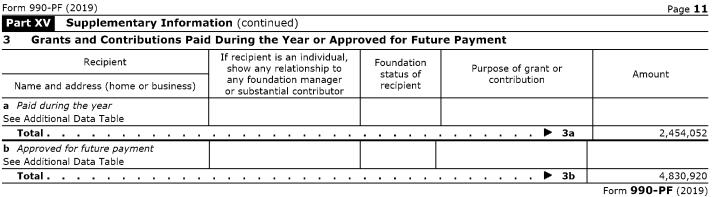
applied on line 5 or line 7 (see instructions) . . . 9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a . . . . 10 Analysis of line 9: a Excess from 2015. . .

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	foundation, and the ruling is effective for 20	19, enter the date	of the ruling	▶∟		
b	Check box to indicate whether the organizati	on is a private oper	ating foundation des	scribed in section $ {\sf L} $	4942(j)(3) or	4942(j)(5)
	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2019	<b>(b)</b> 2018	(c) 2017	(d) 2016	(e) Total
	investment return from Part X for each year listed	(4) 2013	(5) 2010	(0) 2017	(4) 2010	
h	85% of line 2a					
	Qualifying distributions from Part XII,					
·	line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а						
	(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 "Support" alternative test—enter:					
С	(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					
	Supplementary Information	(Complete this	part only if the	foundation had	\$5.000 or more i	n
Pā	assets at any time during the				T - /	
1	Information Regarding Foundation Mana					
	List any managers of the foundation who hav before the close of any tax year (but only if	they have contribut	ted more than \$5,00	0). (See section 50	7(d)(2).)	1
b	List any managers of the foundation who own ownership of a partnership or other entity) of				arge portion of the	
2	Information Regarding Contribution, Gra					
	Check here ▶ ☐ if the foundation only mak	es contributions to	preselected charitab	le organizations and	does not accent	
	unsolicited requests for funds. If the foundar		•	_	•	
	other conditions, complete items 2a, b, c, ar		,			
	The name, address, and telephone number of	or e-mail address of	f the person to whom	annlications should	he addressed:	
-	KAREN PFEIFFER	, c man ada 655 o	the person to mion	r applications should	. De addi essea.	
	PO BOX 14096					
	FORT LAUDERDALE, FL 33302					
	(954) 764-2819					
b	The form in which applications should be sub	omitted and informa	ation and materials t	hey should include:		
	WRITTEN REQUEST INCLUDING NAME, ADD PROGRAM; TYPE OF CHARITABLE ORGANIZA				DESCRIPTION OF TH	E PROJECT OR
C	Any submission deadlines:					
	QUARTERLY					
d	Any restrictions or limitations on awards, sugfactors:	ch as by geographic	cal areas, charitable	fields, kinds of instit	utions, or other	
	THE A.D. HENDERSON FOUNDATION IS DED					
	OF VERMONT THROUGH EARLY LEARNING. \ FULL POTENTIAL.	WE ALSO SUPPORT	OUR COMMUNITIES	TO HELP FAMILIES	ENSURE ALL CHILDRI	EN REACH THEIR

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating



er gross	amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exemp
Program	service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income (See instructions
· ——						
	and contracts from government agencies					
	ship dues and assessments					
	on savings and temporary cash					
Dividen	ds and interest from securities			14	962,153	
	tal income or (loss) from real estate:				·	
Debt-	inanced property					
	ebt-financed property					
	tal income or (loss) from personal property					
	vestment income					
Gain or invento	(loss) from sales of assets other than					
	•			18	3,195,471	
	ome or (loss) from special events:					
Other r	rofit or (loss) from sales of inventory evenue: <b>a</b>					
3	evenue. u					
d						
d e			0		4,157,624	
d e Subtota			0	13	4,157,624 <b>3</b>	
subtota Total. (See wo	I. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  rksheet in line 13 instructions to verify calcu  B Relationship of Activities to th	lations.) le Accomplisi		ot Purposes	3	
d e Subtota <b>Total.</b> / (See wo	II. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu	lations.)  le Accomplisi income is report	nment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
Subtota Total. / See wo rt XVII	I. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  rksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  le Accomplisi income is report	nment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
Subtota Total. / See wo rt XVII	I. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  rksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  le Accomplisi income is report	nment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
Subtota  Fotal. / See wo  Tt XVII  E No.	I. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  rksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  le Accomplisi income is report	nment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
Subtota Fotal. / See wo t XVII	I. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  rksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  le Accomplisi income is report	nment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
Subtota  Fotal. / See wo  Tt XVII  E No.	I. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  rksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  le Accomplisi income is report	nment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
Subtota Total. / See wo rt XVII	I. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  rksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  le Accomplisi income is report	nment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
Subtota  Fotal. / See wo  rt XVII  e No.	I. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  rksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  le Accomplisi income is report	nment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
Subtota Fotal. / See wo t XVII	I. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  rksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  le Accomplisi income is report	nment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
Subtota  Fotal. / See wo  rt XVII  e No.	I. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  rksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  le Accomplisi income is report	nment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
Subtota Total. / See wo rt XVII	I. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  rksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  le Accomplisi income is report	nment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
Subtota  Fotal. / See wo  T XVI	I. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  rksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  le Accomplisi income is report	nment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
Subtota Total. / See wo rt XVII	I. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  rksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  le Accomplisi income is report	nment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	

10	rm 990-PF (20)	19)		
		Information Regarding Transfers To and Transactions and Relationships With Noncharit	able	
Ŀ	Part XVII	Exempt Organizations	шыс	
1		ization directly or indirectly engage in any of the following with any other organization described in section 501 in section 501(c)(3) organizations) or in section 527, relating to political organizations?		Ye

Ŀ	art XVI	Exempt Org.	anizations											
1	Did the o	rganization directly or r than section 501(c)	or indirectly enga (3) organization	ige in any s) or in s	y of the section 5	following with 527, relating to	any o	other or	ganizatio anization	n described in sect s?	ion 501		Yes	No
а	Transfers	from the reporting f	oundation to a n	oncharita	able exe	empt organizati	ion of	f:						
	<b>(1)</b> Casi	h										1a(1)		No
	(2) Oth	er assets										1a(2)		No
b	Other tra	nsactions:												
	` '	s of assets to a nonc		-								1b(1)		No
		chases of assets from		· ·	-					$\cdot \ \cdot \ \cdot \ \cdot \ \cdot$		1b(2)		No
		tal of facilities, equip	· ·									1b(3)		No
	` .	nbursement arranger									•	1b(4)		No
	• •	ns or loan guarantee:									• •	1b(5)		No
_		ormance of services of	· ·		-						•	1b(6)		No
	-	of facilities, equipments wer to any of the ab								vava chavy tha fair	· market	1c		No
u		ods, other assets, or												
	in any tra	ansaction or sharing	arrangement, sh	ów in col	lumn (d	I) the value of t	the g	oods, o	ther asse	ts, or services rece	ived.			
<b>-</b> ->	Lina Na I	( <b>b</b> ) Amount involved	L (a) Name of	n a n ab a rite	مريد ماطم		ı	(d) Dec	avintian af	transfera transaction	- and aba	·in a arva		+-
(a)	Line No.	(B) Amount involved	(c) Name or	noncharita	able exer	mpt organization	+	(a) Des	cription or	transfers, transaction	s, and snai	ing arrar	igemeni	ts
							+							
							-							
							+							
							+							
							+							
2a	Is the fo	ındation directly or ir	ndirectly affiliate	d with, o	r related	d to, one or mo	ore ta	x-exem	ıpt organi	zations	_	=		
	described	l in section 501(c) (c	ther than section	n 501(c)(	(3)) or i	n section 527?				⊔\	∕es 💆	∐ No		
b	If "Yes,"	complete the followir	ng schedule.											
		(a) Name of organi	zation		(b	) Type of organiz	zation			(c) Descriptio	n of relatio	nship		
	Une	der penalties of perju	ırv. I declare tha	t I have	examin	ed this return.	inclu	ding acc	ompanyi	ng schedules and s	tatement	s. and t	o the l	best
	of	my knowledge and be	elief, it is true, c											
c:		ich preparer has any	knowledge.			ı								
	gn	*****				2021-01-25		*	****		May th return	e IRS dis	cuss th	is
П€	ere							— <b>)</b> -			with th	ne prepar	er show	vn
		Signature of officer	or trustee			Date		7	Γitle		below	nstr.) 🔽	l., _	1
										,	(see ir	istr.) 💌	Yes -	NO
		Print/Type prepai	er's name	Prepare	er's Sign	nature		Date			PTIN			
										Check if self-		P00641	484	
		SUSAN MANN								employed ▶ 🎞				
_	iid													
	epare	I II III 3 Hallic F	ISNERAMPER LL	.P							Firm's E	[N ►13-	16308	26
Us	e Only					2.112					THITIS E.	"\ ► T2-	10330	-20
		Firm's address ►	900 SOUTH PII	NE ISLAN	ID ROA	0 110								
			FT LAUDERDAL	.E, FL 33	3324						Phone n	o. (954)	475-3	3199

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired Date sold (mo., day, yr.) (mo., day, yr.) P-Purchase D-Donation MORGAN STANLEY A/C 116434 Ρ 2020-09-30 MORGAN STANLEY A/C 116434 Р 2020-09-30 FIDELITY A/C 735809 - CAP GAIN DISTRIBUTION Р 2020-09-30 FIDELITY A/C 735809 Р 2020-09-30 Ρ FIDELITY A/C 735809 2020-09-30 FIDELITY A/C 735809 - CAP GAIN DISTRIBUTION 2020-09-30 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) (f) 3,056,511 3,044,985 11,526 17,344,394 3,434,839 13,909,555 2,117 5,348,945 5,664,611 -315,666 339,035 390,608 -51,573 114,228 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (i) as of 12/31/69 (k) over col. (j), if any 11,526 3,434,839 2.117 -315,666 -51,573 114,228

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-) employee benefit plans and deferred compensation ALEXANDRA HOLLY FOULADI TRUSTEE 5,400 Ω 2.00 PO BOX 14096 FORT LAUDERDALE, FL 333024096

ALLEN DOUGLAS HENDERSON	TRUSTEE	6,000	3,519	0
PO BOX 14096 FORT LAUDERDALE, FL 333024096	1 2.00			
ANNE W RIDER	VICE PRESIDENT-	14,600	876	0
PO BOX 14096 FORT LAUDERDALE, FL 333024096	TRUSTEE, EXEC COMM 5.00			

ANNE W RIDER	VICE PRESIDENT-	14,600	876	0
PO BOX 14096 FORT LAUDERDALE, FL 333024096	TRUSTEE, EXEC COMM 5.00			
HOWARD A BAKALAR	TRUSTEE, EXEC COMM	11,600	0	0
PO BOX 14096 FORT LAUDERDALE, FL 333024096	5.00			

FORT LAUDERDALE, FL 333024096	3.00			
HOWARD A BAKALAR	TRUSTEE, EXEC COMM	11,600	0	0
PO BOX 14096 FORT LAUDERDALE, FL 333024096	5.00			
JAMES HASSON JR	TRUSTEE	5,600	0	0
PO BOX 14096	2.00			

•				
HOWARD A BAKALAR	TRUSTEE, EXEC COMM	11,600	0	0
PO BOX 14096 FORT LAUDERDALE, FL 333024096	15.00			
JAMES HASSON JR	TRUSTEE	5,600	0	0
PO BOX 14096 FORT LAUDERDALE, FL 333024096	2.00			
KADEN M DEETEER	SEC & OD MCD/SEE	0	0	0

FORT LAUDERDALE, FL 333024096				
KAREN M PFEIFFER	SEC & OP MGR/SEE	0	0	0
PO BOX 14096 FORT LAUDERDALE, FL 333024096	PART VIII 40.00			
LUCIA HENDERSON	PRESIDENT-TRUSTEE,	15,000	10,670	0
PO BOX 14096 FORT LAUDERDALE, FL 333024096	EXEC COMM 6.00			

8,000

11,600

0

0

TREASURER-TRUSTEE

TRUSTEE, EXEC. COMM

3.00

4.00

MAUREEN C TOMPKINS

ROBERT S HINRICHS

FORT LAUDERDALE, FL 333024096

FORT LAUDERDALE, FL 333024096

PO BOX 14096

PO BOX 14096

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 any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

ALL FLORIDA YOUTH ORCHESTRA 1708 NORTH 40 AVENUE HOLLYWOOD, FL 33021	NONE	PUBLIC CHARITY	CONTINUATION OF MUSIC STEPS FOR PRESCHOOL	50,000
STERN CENTER FOR LANGUAGE & LEARNING 183 TALCOTT RD SUITE 101	NONE	PUBLIC CHARITY	STERN CENTER'S BLANCHE PODHAJSKI LEGACY FUND	500

,				
STERN CENTER FOR LANGUAGE & LEARNING 183 TALCOTT RD SUITE 101 WILLISTON, VT 05495	NONE	PUBLIC CHARITY	STERN CENTER'S BLANCHE PODHAJSKI LEGACY FUND	500
BONNYVALE ENVIRONMENTAL EDUCATION CENTER PO BOX 2318	NONE		ABC'S OF A FOREST CLASSROOM	25,000

183 TALCOTT RD SUITE 101 WILLISTON, VT 05495				
BONNYVALE ENVIRONMENTAL EDUCATION CENTER PO BOX 2318 BRATTLEBORO, VT 05303	NONE	PUBLIC CHARITY	ABC'S OF A FOREST CLASSROOM	25,000
Total			▶ 3a	2,454,052

Recipient Foundation Purpose of grant or If recipient is an individual, 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 BUILDING BRIGHT FUTURES NONE PUBLIC SUPPORTING BLDG BRIGHT 50,000 600 BLAIR PARK BLVD SUITE 160 CHARITY **FUTURES AS A BACKBONE** WILLISTON, VT 05495 ORGANZTION FOR EARLY CHILDHOOD

			CHIEDHOOD	
BRIDGEWATER AREA COMMUNITY FOUNDATION 1134 BRIDGEWATER CENTER RD BRIDGEWATER CORNERS, VT 05035	NONE	PUBLIC CHARITY	BRIDGEWATER COMMUNITY CHILDCARE	20,000
CENTER FOR LITERACY ARTS AND SCIENCES	NONE	PUBLIC CHARITY	BROWARD LEARNING PODS PROJECT	20,790

Total			<b>&gt;</b> 3a	2,454,052
CENTER FOR LITERACY ARTS AND SCIENCES 5820 HALLANDALE BEACH BLVD WEST PARK, FL 33023	NONE	PUBLIC CHARITY	BROWARD LEARNING PODS PROJECT	20,790
BRIDGEWATER CORNERS, VI 03035				

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

EXPERIENCE AVIATION INC 14950 NW 44TH CT STE 203 OPA LOCKA, FL 33054	NONE	PUBLIC CHARITY	FOSTERING AND ENCOURAGING STEM+	100,000
FAMILY CENTRAL INC 1415 W CYPRESS CREEK RD SUITE 103	NONE	PUBLIC CHARITY	CONTINUATION OF HOME	92,000

FAMILY CENTRAL INC 1415 W CYPRESS CREEK RD SUITE 103 FORT LAUDERDALE, FL 33309	NONE	PUBLIC CHARITY	CONTINUATION OF HOME INSTRUCTION FOR PARENTS OF PRESCHOOL YOUNGSTERS (HIPPY)	92,000
FLYNN CENTER FOR THE PERFORMING ARTS LTD	NONE	PUBLIC CHARITY	FLYNN HEAD START PROFESSIONAL LEARNING	12,870

1415 W CYPRESS CREEK RD SUITE 103 FORT LAUDERDALE, FL 33309		CHARITY	INSTRUCTION FOR PARENTS OF PRESCHOOL YOUNGSTERS (HIPPY)	· 
FLYNN CENTER FOR THE PERFORMING ARTS LTD 153 MAIN STREET BURLINGTON, VT 05401	NONE	PUBLIC CHARITY	FLYNN HEAD START PROFESSIONAL LEARNING PROGRAM	12,870

			(112111)	
FLYNN CENTER FOR THE PERFORMING ARTS LTD 153 MAIN STREET BURLINGTON, VT 05401	NONE	PUBLIC CHARITY	FLYNN HEAD START PROFESSIONAL LEARNING PROGRAM	12,870
Total			<b>▶</b> 3a	2 454 052

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

	or substantial contributor			
a Paid during the year				
FLORIDA INTERNATIONAL UNIVERSITY 11200 SW 8TH ST MIAMI, FL 33199	NONE	PUBLIC CHARITY	WEFEEL EMOTIONAL INTELLIGENCE PROJECT	191,000

	None	2112122		12.500
INCLUSIVE ARTS VERMONT INC 21 CARMICHAEL STREET SUITE 206 ESSEX JUNCTION, VT 05452	NONE	PUBLIC CHARITY	CONTINUATION OF START WITH THE ARTS	60,000
MIAMI, FL 33199				

INCLUSIVE ARTS VERMONT INC 21 CARMICHAEL STREET SUITE 206 ESSEX JUNCTION, VT 05452	NONE	PUBLIC CHARITY	CONTINUATION OF START WITH THE ARTS	60,000
JANET S MUNT FAMILY ROOM 20 ALLEN ST BURLINGTON VT 05401	NONE	PUBLIC CHARITY	FATHERHOOD MENTORING PROGRAM	12,500

21 CARMICHAEL STREET SUITE 206 ESSEX JUNCTION, VT 05452	NONE	CHARITY	THE ARTS	00,000
JANET S MUNT FAMILY ROOM 20 ALLEN ST BURLINGTON, VT 05401	NONE	PUBLIC CHARITY	FATHERHOOD MENTORING PROGRAM	12,500
Total				2,454,052

				2 454 252
JANET S MUNT FAMILY ROOM 20 ALLEN ST BURLINGTON, VT 05401	NONE	PUBLIC CHARITY	FATHERHOOD MENTORING PROGRAM	12,500
ESSEX JUNCTION, VT 05452				

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

HISPANIC UNITY OF FLORIDA INC 5840 JOHNSON STREET HOLLYWOOD, FL 33021	NONE		CONTINUATION OF UNITY 4 KIDS (U4K)	35,000
MIAMI LIGHTHOUSE FOR THE BLIND	NONE	PUBLIC	EYE CARE FOR YOUNG	50,000

MIAMI LIGHTHOUSE FOR THE BLIND AND VISUALLY IMPAIRED INC 601 SW 8TH AVENUE MIAMI, FL 33130	NONE		EYE CARE FOR YOUNG CHILDREN IN BROWARD COUNTY	50,00
JACK AND JILL CHILDREN'S CENTER	NONE	PUBLIC	CONTINUATION OF EARLY	150,00

601 SW 8TH AVENUE MIAMI, FL 33130			COUNTY	
JACK AND JILL CHILDREN'S CENTER INC 1315 WEST BROWARD BOULEVARD FORT LAUDERDALE, FL 33312	NONE	PUBLIC CHARITY	CONTINUATION OF EARLY CHILDHOOD EDUCATION PROGRAM	150,000

41AM1, FL 33130			
JACK AND JILL CHILDREN'S CENTER INC 1315 WEST BROWARD BOULEVARD FORT LAUDERDALE, FL 33312	NONE	 CONTINUATION OF EARLY CHILDHOOD EDUCATION PROGRAM	150,000
Total	2,454,052		

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

JACK AND JILL CHILDREN'S CENTER INC 1315 WEST BROWARD BOULEVARD FORT LAUDERDALE, FL 33312	NONE	PUBLIC CHARITY	CONTINUATION OF COMPREHENSIVE CAMPAIGN	70,000
LEAHY CENTER FOR LAKE CHAMPLAIN ONE COLLEGE STREET	NONE	PUBLIC CHARITY	ECHO EARLY LEARNING	25,000

	l .			
LEAHY CENTER FOR LAKE CHAMPLAIN ONE COLLEGE STREET BURLINGTON, VT 05401	NONE	PUBLIC CHARITY	ECHO EARLY LEARNING	25,000
LUND FAMILY CENTER INCPO BOX 4009 BURLINGTON, VT 05406	NONE	PUBLIC CHARITY	CONTINUED IMPLEMENTATION OF THE EARLY MULTI-TIERED SYSTEMS OF SUPPORT FRAMEWORK	25,000

BONEINGTON, VI 05401			
LUND FAMILY CENTER INCPO BOX 4009 BURLINGTON, VT 05406	NONE	 CONTINUED IMPLEMENTATION OF THE EARLY MULTI-TIERED SYSTEMS OF SUPPORT FRAMEWORK	25,000
Total		 ▶ 3a	2,454,052

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				
MENTOR VERMONT 19 MARBLE STREET STE 4 BURLINGTON, VT 05401	NONE	PUBLIC CHARITY	CONTINUATION OF VT MENTORING GRANTS & OPERATIONAL SUPPORT	200,000

•				
MIRAMAR UNITED METHODIST	NONE	PUBLIC	BROWARD LEARNING POD	
PRESCHOOL		CHARITY		
2507 UTOPIA DR				
MIRAMAR FL 33023				

Total .

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

MIRAMAR UNITED METHODIST PRESCHOOL 2507 UTOPIA DR MIRAMAR, FL 33023	NONE	PUBLIC CHARITY	BROWARD LEARNING POD	16,660
MUSEUM OF DISCOVERY AND SCIENCE	NONE	PUBLIC	BROWARD LEARNING PODS	34,587

2507 UTOPIA DR MIRAMAR, FL 33023				
MUSEUM OF DISCOVERY AND SCIENCE INC 401 SW SECOND STREET	NONE	PUBLIC CHARITY	BROWARD LEARNING PODS PROJECT	34,587

MIRAMAR, FL 33023				
MUSEUM OF DISCOVERY AND SCIENCE INC	NONE	PUBLIC CHARITY	BROWARD LEARNING PODS PROJECT	34,58
401 SW SECOND STREET FORT LAUDERDALE FL 33312				

JUSEUM OF DISCOVERY AND SCIENCE	NONE	PUBLIC	BROWARD LEARNING PODS	34,58/
NC		CHARITY	PROJECT	
01 SW SECOND STREET				
ORT LAUDERDALE, FL 33312				

2,454,052

3a

FORT LAUDERDALE, FL 33312		

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
SHELBURNE FARMS1611 HARBOR ROAD	NONE	PUBLIC	FARM TO EARLY CARE PROF DEV	25,000

SHELBURNE FARMS1611 HARBOR ROAD SHELBURNE, VT 05482	NONE	PUBLIC CHARITY	FARM TO EARLY CARE PROF DEV	25,000
THE FAMILY PLACE INC 319 US ROUTE 5 SOUTH NORWICH, VT 05055	NONE	PUBLIC CHARITY	BRAIN LAB	15,000
CENTRAL COAST VISITING NURSE	NONE	PUBLIC	MADE IN ALEXANDER D	500

THE FAMILY PLACE INC 319 US ROUTE 5 SOUTH NORWICH, VT 05055	NONE	PUBLIC CHARITY	BRAIN LAB	15,000
CENTRAL COAST VISITING NURSE ASSOC PO BOX 2480 MONTEREY, CA 93942	NONE	PUBLIC CHARITY	MADE IN ALEXANDER D HENDERSON'S MEMORY	500

Total			▶ 3a	2,454,052
CENTRAL COAST VISITING NURSE ASSOC PO BOX 2480 MONTEREY, CA 93942	NONE	PUBLIC CHARITY	MADE IN ALEXANDER D HENDERSON'S MEMORY	500
NORWICH, VT 05055		CHARITY		

Recipient
Recipient
Recipient
If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient

Foundation status of recipient

Foundation status of recipient

Recipient

Foundation status of recipient

THE PERMANENT FUND3 COURT ST MIDDLEBURY, VT 05753	NONE	SO I	LET'S GROW KIDS CAPITAL CAMPAIGN	833,333
UNITED WAY OF BROWARD COUNTY 1300 S ANDREWS AVENUE FORT LAUDERDALE, FL 33316	NONE	PUBLIC CHARITY	CONTINUATION OF READINGPALS	50,000

UNITED WAY OF BROWARD COUNTY 1300 S ANDREWS AVENUE FORT LAUDERDALE, FL 33316	NONE	CHARITY	READINGPALS	50,000
RETREAT FARM45 FARMHOUSE SQUARE BRATTLEBORO, VT 05301	NONE	PUBLIC CHARITY	ROOTED KIDS: GROWING HEALTHY KIDS AND FAMILIES AT RETREAT FARM	25,000
Total			▶ 3a	2,454,052

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	T despication		
a Paid during the year				
VERMONT COMMUNITY FOUNDATION	NONE	PUBLIC	FOUNDATION COVID 19 FUND	20,000

PO BOX 30 MIDDLEBURY, VT 05753		CHARITY		
RUSSELL LIFE SKILLS & READING FDN 499 NW 70TH AVE PLANTATION, FL 33317	NONE	PUBLIC CHARITY	RUSSELL EDUCATION FOUNDATION'S AFTERSCHOOL AND SUMMER PROGRAM	20,000

RUSSELL LIFE SKILLS & READING FDN 499 NW 70TH AVE PLANTATION, FL 33317	NONE	PUBLIC CHARITY	RUSSELL EDUCATION FOUNDATION'S AFTERSCHOOL AND SUMMER PROGRAM	20,000
THE OLD STONE HOUSE MUSEUM 109 OLD STONE HOUSE ROAD BROWNINGTON, VT 05860	NONE	PUBLIC CHARITY	HANDS ON HISTORY AT THE OLD STONE HOUSE MUSEUM	25,000

Total			▶ 3a	2,454,052
THE OLD STONE HOUSE MUSEUM 109 OLD STONE HOUSE ROAD BROWNINGTON, VT 05860	NONE	PUBLIC CHARITY	HANDS ON HISTORY AT THE OLD STONE HOUSE MUSEUM	25,000
499 NW 70TH AVE PLANTATION, FL 33317	NONE	CHARITY	FOUNDATION'S AFTERSCHOOL AND SUMMER PROGRAM	20,000

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

SOUTH FLORIDA INSTITUTE ON AGING 2038 NORTH DIXIE HWY SUITE 201 BUILDING B WILTON MANORS, FL 33305	NONE	PUBLIC CHARITY	ACTIVE PARENTING PROGRAM	38,000
SOUTH FLORIDA SCIENCE CENTER & AQUARIUM INC	NONE	PUBLIC CHARITY	PINT SIZE SCIENCE	50,000

SOUTH FLORIDA SCIENCE CENTER & AQUARIUM INC 4801 DREHER TRAIL N WEST PALM BEACH, FL 33405	NONE	PUBLIC CHARITY	PINT SIZE SCIENCE	50,000
VERMONT COUNCIL ON THE ARTS INC	NONE	PUBLIC CHARITY	HEAD START ARTS	7,130

VERMONT COUNCIL ON THE ARTS INC 136 STATE ST CHARITY MONTPELIER, VT 05633	HEAD START ARTS PROFESSIONAL DEVELOPMENT	7,130

Total .

2,454,052

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

12,832

2,454,052

3a

a Paid during the year				
VERMONT ASSOCIATION OF THE EDUCATION OF YOUNG CHILDREN 145 PINE HAVEN SHORES SHELBURNE, VT 05482	NONE	PUBLIC CHARITY	BUILDING THE T.E.A.C.H. VERMONT BACHELOR DEGREE SCHOLARSHIP PROGRAM	

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

SHELBURNE, VT 05482				
MUSEUM OF DISCOVERY AND SCIENCE INC 401 SW SECOND STREET FORT LAUDERDALE, FL 33312	NONE	PUBLIC CHARITY	SPROUTING STEM	50,000
THE FAMILY PLACE INC	NONE	PUBLIC	VPCCN QUALITY AND	21,350

401 SW SECOND STREET FORT LAUDERDALE, FL 33312				
THE FAMILY PLACE INC 319 US ROUTE 5 SOUTH NORWICH VT. 05055	NONE	PUBLIC CHARITY	VPCCN QUALITY AND INFRASTRUCTURE	21,350

FORT LAUDERDALE, FL 33312				
THE FAMILY PLACE INC 319 US ROUTE 5 SOUTH NORWICH VT 05055	NONE	PUBLIC CHARITY	VPCCN QUALITY AND INFRASTRUCTURE DEVELOPMENT PROJECT	21,3

Total .

THE FAMILY PLACE INC 319 US ROUTE 5 SOUTH NORWICH, VT 05055	NONE	PUBLIC CHARITY	VPCCN QUALITY AND INFRASTRUCTURE DEVELOPMENT PROJECT	21,35

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 any foundation manager recipient

· ·	or substantial contributor			
a Paid during the year				
UNITED WAY OF BROWARD COUNTY	NONE	PUBLIC	BROWARD CNTY COVID19	20 000

2,454,052

<u> </u>				1
UNITED WAY OF BROWARD COUNTY 1300 S ANDREWS AVENUE FORT LAUDERDALE, FL 33316	NONE	PUBLIC CHARITY	BROWARD CNTY COVID19 CAMPAIGN	

Name and address (home or business)

Total .

efile GRAPHIC print - DO NOT F	ROCESS	As Filed D	ata -		D	LN: 93491026015051
TY 2019 Accounting Fo	ees Sche	edule				
	Name:	AD HEND	ERSON FOUNDA	TION INC		
				· · <del>- · · · ·</del>		
	ETIN:	23-70470	J43 			
Category	Amo	ount	Net Investmen Income	Adjuste Incor		Disbursements for Charitable Purposes
ACCOUNTING FEES		27,888	13,9	14		13,944

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## **TY 2019 Depreciation Schedule**

Name: AD HENDERSON FOUNDATION INC

**EIN:** 23-7047045

Depreciation Schedule

	Вергеен	ation Schedule							
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
FILE CABINETS	1993-06-08	2,158	1,849	200DB	7.00000000000	0	0		
MAHOGANY FILE UNIT	1995-05-08	3,950	3,950	200DB	7.000000000000	0	0		
DESK CHAIRS	2006-02-27	2,328	2,328	200DB	7.000000000000	0	0		
OIL PAINTING	2001-12-31	27,000			0 %	0	0		
HP LASERJET PRINTER	2008-07-30	228	114	200DB	5.000000000000	0	0		
OLYMPUS DIGITAL VOICE RECORDER	2008-09-16	137	68	200DB	5.000000000000	0	0		
SHREDDER	2008-05-01	691	345	200DB	7.00000000000	0	0		
CHAIR (ANITA)	2008-09-04	1,232	616	200DB	7.000000000000	0	0		
LAPTOP CASE, STAND, KEYBOARD	2008-09-23	230	115	200DB	7.000000000000	0	0		
KED PRINTER & BACK- UP FOR SERVER	2010-12-03	419	419	200DB	5.000000000000	0	0		
LAPTOP (FOR KAREN)	2010-12-30	1,034	1,034	200DB	7.000000000000	0	0		
COMPUTER (FOR MONICA)	2011-06-01	460		200DB	7.000000000000	0	0		
HP PAVILION COMPUTER AND BATTERY BACKUPS (MAM & KMP))	2016-09-02	1,300	517	200DB	5.000000000000	71	0		

effie GRAPHIC print - DO NOT PROCESS	AS FIIED Data -	DLN: 93491026015051
TY 2019 Investments Corpora	ate Bonds Sched	lule
Name:	AD HENDERSON FO	DUNDATION INC
ETN.	23-7047045	

DIN. 0240102601E0E1

6,072,821

6,037,510

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INVESTMENTS - CORPORATE BONDS (SEE ATTACHMENTS B-C)

End of Year Book	End of Year Fair Market Value
	End of Year Book Value

TY 2019 Investments Corporate	e Stock Schedule	

DLN: 93491026015051

42,032,862

22,715,177

Name:	AD HENDERSON FOUNDATION INC
EIN:	23-7047045

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INVESTMENTS - CORPORATE STOCK (SEE ATTACHMENTS B-C)

Investments Corporation Stock Schedule		
Name of Stock	End of Year Book	End of Year Fair
	Value	Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491026015051
TY 2019 Investments Governments	nent Obligat	ions Schedule	
Name:	AD HENDERSO	ON FOUNDATION INC	
EIN:	23-7047045		
US Government Securities - End of Year Book Value:		4,734,894	
US Government Securities - End of Year Fair Market Value:		4,714,186	
State & Local Government Securities - End of Year Book Value:		0	
State & Local Government Securities - End of Year Fair Market Value:		0	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491026015051					
TY 2019 Investments - Other Schedule							
17 2019 liivestilients - Other s	ciledule						
Namo	AD HENDERSON E	OUNDATION INC					

15,838,117

13,465,101

Hamo	The Heribert Content from the
EIN	: 23-7047045
Investments Other Schedule 2	

INVESTMENTS - OTHER (SEE ATTACHMENTS B-C)

Investments Other Schedule 2			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value

AT COST

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# TY 2019 Land, Etc. Schedule

Name: AD HENDERSON FOUNDATION INC

<b>EIN:</b> 23-7047045					
Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value	
FILE CABINETS	2,158	1,849	309		
MAHOGANY FILE UNIT	3,950	3,950	0		
DESK CHAIRS	2,328	2,328	0		
OIL PAINTING	27,000	0	27,000		
HP LASERJET PRINTER	228	228	0		
OLYMPUS DIGITAL VOICE RECORDER	137	137	0		
SHREDDER	691	691	0		
CHAIR (ANITA)	1,232	1,232	0		
LAPTOP CASE, STAND, KEYBOARD	230	230	0		
KED PRINTER & BACK-UP FOR SERVER	419	419	0		
LAPTOP (FOR KAREN)	1,034	1,034	0		
COMPUTER (FOR MONICA)	460	460	0		
HP PAVILION COMPUTER AND BATTERY BACKUPS (MAM & KMP))	1,300	1,238	62		

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	-	DL	N: 93491026015051	
TY 2019 Legal Fees Schedule					
Nan	ne: AD HENDER:	SON FOUNDATION	I INC		
<b>EIN:</b> 23-7047045					
Category Amount Net Investment Adjusted Net Disbursements					
Category	Amount	Income	Income	for Charitable Purposes	
LEGAL FEES	2,233	1,117		1,117	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491026015051	
TY 2019 Other Expenses Schedule					
Name:	AD HENDERSON	N FOUNDATION I	NC		
EIN:	23-7047045				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
DUES & SUBSCRIPTIONS	14,925	746		14,179	

10,233

18,544

3,011

1,579

4,884

1,044

1,000

927

151

79

244

52

0

10,233

17,617

2,861

1,500

4,640

992

**EDUCATION** 

**INSURANCE** 

SUPPLIES

**POSTAGE** 

**TELEPHONE** 

OFFICE EXPENSE

OTHER EXPENSE

efile GRAPHIC print - DO NOT PROCESS	D	LN: 93491026015051				
TY 2019 Other Liabilities Schedule						
Name: AD HENDERSON I	FOUNDATION INC					
<b>EIN:</b> 23-7047045						
LIN. 25-7047045						
Description	Beginning of Year - Book Value	End of Year - Book Value				
Description  PAYROLL TAXES PAYABLE						
	- Book Value	Book Value				

efile GRAPHIC print - DO NOT PROCE	ESS As Filed Data	-	DLN	N: 93491026015051		
TY 2019 Other Professional Fees Schedule						
Name: AD HENDERSON FOUNDATION INC						
<b>EIN:</b> 23-7047045						
Category	Amount	Net Investment	Adjusted Net	Dishursements		

325,555

325,555

INVESTMENT ADVISORY FEES

efile GRAPHIC print - DO NOT PRO	CESS As Filed Data	-	DL	N: 93491026015051		
TY 2019 Taxes Schedule						
Name: AD HENDERSON FOUNDATION INC EIN: 23-7047045						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
STATE FILING FEES	330	0		330		
PAYROLL TAXES	29,824	4,474		25,350		
FEDERAL TAXES	60,000	0		0		