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.

1912



_	-F01	catet	idar year 2019 or tax year beginning		, and endin	U		
•			foundation				A Employer identification	number
			LE FOUNDATION					
			CHRISTOPHER COILE		·····		26-6001829	<del></del>
			nd street (or P O box number if mail is not delivered to street a	address)	Roc	m/suite	B Telephone number	00
	-		SOUTH DRIVE		<u></u>		410-804-10	
	•		own, state or province, country, and ZIP or foreign p ERNA PARK, MD 21146–21			VY	C If exemption application is po	ending, check here
						77 (	), -	
12	G (	neck	all that apply: Initial return	Initial return of a f	orther phone/cultu	<sup>ty</sup> /	1. Foreign organizations	s, check here
			Final return Address change	Name onange			Foreign organizations me check here and attach co	eting the 85% test,
516	н (	hack	type of organization: X Section 501(c)(3) ex					
D4	Ϊ,	_	<u> </u>	Other taxable private found	ation	04	E If private foundation sta under section 507(b)(1)	
	l Fa		arket value of all assets at end of year   J   Accounting		Accrual			
			·	ther (specify)		·	F If the foundation is in a under section 507(b)(1)	
	-	\$	171,126. (Part I, colur		is.)		2331 333	(5), 01.001 1.010
		art I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net invest	ment	(c) Adjusted net	(d) Disbursements
			(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) )	expenses per books	income		income	for charitable purposes (cash basis only)
		1	Contributions, gifts, grants, etc., received		15 cm at 1 car		N/A	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
		2	Check Tall if the foundation is not required in attack Site R	I to the beat the total and the first of the	નવું મુક્તિ મુક્તિ હોલ્યું છે. (દુ		And the state of the state of	·····································
		3	Interest on savings and temporary cash investments					The second the said and
73		4	Dividends and interest from securities	3,092.	3,	092.		STATEMENT 1
202		5a	Gross rents					La Maria Carallette Com
<b>6</b> 3		b	Net rental income or (loss)	in all hall the the company		30	- 1	Barrell Barrell
0	<b>e</b>	62	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	3,717.		7 W X 3	The speciality of the	and the state of the state of
$\mathbf{\alpha}$	ن ن	b	assets on line 6a 0,0 J1.	A Transport of the State of the	1 46 34 178 18 19 18			British Walter
FEB	ۆ قىر	7	Capital gain net income (from Part IV, line 2)	\$ 25.57 FEBRUAR &		717.	一般に 一名の かいいい	Carlo Carlos Carlos Carlos
7	) <del>"</del>	8	Net short-term capital gain	TENNE STREET	的智能部			Estimated to the
h	)	9	Income modifications Gross sales less returns	· 在 19 19 19 19 19 19 19 19 19 19 19 19 19		3.00	CHI PROPERTING NO STORY	English of No. 2002
99	-	10 a	and allowances	まっている。 でんしょうい	ELECTRICAL CO		The state of the state of the	The state of the s
500	_	ŀ	Less Cost of goods sold	A STANCE OF THE PLANT	THE CASE IN		CROCKLETTIZE OF THE TEXT	The state of the state of
2/	_		Gross profit or (loss)	<del></del>	1997 of Was 1 Ma	1241 - 100.		Marine Sandan Caran
W A	١	11	Other income	6,809.	6	809.		7. 5.7 1265 162 1 11 Bit. 11
~		12	Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc.	0.	· · · ·	0.	<del></del>	0.
0.4		14	Other employee salaries and wages					
	j	15					>~(V)	
202	گ د		Pension plans, employee trenefits ED Legal fees RECEIVED		121		U) \\	
	, <u>v</u>	Ь	Accounting fees		1/10		-	
<del></del>	Expens	c	Accounting fees Other professional fees 7 0 6 2020					
<u>ر</u> الا	ש ש	17	Interest & UCI & CE					
<u>ה</u>	Administrative	18	Taxes Depreciation and demand of the part 2 Decuments	36.		36.		0.
C		19	Depreciation and deprending		: 			Mile Buckey
ñ		20	Occupancy					
1	<b>₽</b>	21	Travel, conferences, and meetings					<del></del>
	and T	22	Printing and publications					
CHAIRIE	Š Š	23	Other expenses STMT 3	1,498.	1,	498.		0.
ξ,	ر Perating	24	Total operating and administrative	4 4	4			•
	Ope		expenses. Add lines 13 through 23	1,534.		534.	AMERICAN CONTRACTOR	10 000
	٥	25	Contributions, gifts, grants paid	10,000.	The state of the state of	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	The second second	10,000.
		26	Total expenses and disbursements.	11,534.	4	534.		10 000
		27	Add lines 24 and 25	11,334.	<u> </u>	JJ4.	1	10,000.
		27		-4,725.	13 S. C. C.			
		ľ	Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	-4,723.	5	275.		15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		ŀ	Adjusted net income (if negative, enter -0-)	2 - 12-6 - 12/20 1 4 - 26/20			N/A	3. 5. 8. 2
				<del> </del>	<u>-</u>			

Form 990-PF Department of the Treasury Internal Revenue Service

Page 2

Clash - non-interest-bearing    2 Savings and temporary cash investments   824	- 		Balance Sheets Allached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	of year
2 Savings and temporary cash mestments 3 Accounts receivable 4 Proteops receivable Less allowance for doubtful accounts ▶ Less allowance for doubtful accounts ▶ 6 Grains receivable 8 Receivable due from officers, directors, frustres, and other designation of the designation of the doubtful accounts ▶ 10 Town texas access receivable 10 Investments - Cush or state of country and the designation of the designat	8,78	<u>art</u>	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
Less allowance for doubtful accounts ▶  4 Pledges receivable  5 Carsians receivable  6 Receivables due from officers, directors, Trustees, and other department of the depart	•	1	Cash - non-interest-bearing			
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Prodogs receivable   Less allowance for doubtful accounts   Socials receivable due from officers, directors, trustees, and other discapabled persons   Trustees are described persons   Trustees are		3	Accounts receivable	<b>的复数人名约约约</b>	<b>一个是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个</b>	Sally to the Control of the Sally of the
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20   Loans from officers, directors, trustees, and other disqualified persons   1   Mortgages and other notes payable   22   Other liabilities (describe	σ.	ł				が一般なる はいい はい
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Total net assets or fund balances  Total net assets or fund balances  Total net assets or fund balances  Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)  Example 10	٩	1				
Total liabilities (add lines 17 through 22)  7 Foundations that follow FASB ASC 956, check here and complete lines 24, 25, 29, and 30.  24 Net assets with donor restrictions 25 Net assets with donor restrictions 26 Capital stock, trust principal, or current funds 27 Paid-in or capital surplus, or land, bidg and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds 29 Total net assets or fund balances  1 Total liabilities and net assets/fund balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) 20 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize)  3 Decreases not included in line 2 (itemize)  5 Decreases not included in line 2 (itemize)  5 Decreases not included in line 2 (itemize)  5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 7 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 8 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 8 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 8 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 9 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 9 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 9 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 9 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 9 Total net assets or fund ba	۳		• •			大学というというできましていると
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Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30.  Net assets without donor restrictions  Net assets with donor restrictions  Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30.  Capital stock, trust principal, or current funds  Pad-in or capital strock, trust principal, or current funds  Retained earnings, accumulated income, endowment, or other funds  Total net assets or fund balances  Total liabilities and net assets/fund balances  Total net assets or fund balances at beginning of year - Part II, column (a), line 29  (must agree with end-of-year figure reported on prior year's return)  Enter amount from Part I, line 27a  Add lines 1, 2, and 3  Decreases not included in line 2 (itemize)   Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29  Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29  Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29  Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29  Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29  Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29  Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29  Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29		23	Total liabilities (add lines 17 through 22)	0.	0.	
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Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5 Oc.  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29  6 108,857.	ž					San
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1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5 Oc.  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29  6 108,857.	F	ait	Analysis of Changes in Net Assets or Fund B	alances		
(must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29  6 108,857.	_		•		<del></del>	<u> </u>
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5 Decreases not included in line 2 (itemize) ► 5 0. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 6 108,857.			<del></del>		·····	
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29			· · · · · · · · · · · · · · · · · · ·		<del></del>	
				-1 (1) 1 (2)		
	6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 29		

Form 990-PF (2019) C/O CHRISTOPHER COILE **Part IV** Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (a) List and describe the kind(s) of property sold (for example, real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (mo., day, yr.) (mo., day, yr.) D - Donation SHS BERKSHIRE HATHAWAY 02/22/16 P 12/17/19 b d e (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale ((e) plus (f) minus (g)) 5,134 3.717. 8.851 a þ C đ e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (I) Gains (Cot. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) FMV as of 12/31/69 as of 12/31/69 over col. (1), if any 3,717. b d If gain, also enter in Part I, line 7 3,717. If (loss), enter -0- in Part i, line 7 2 Capital gain net income or (net capital loss) 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). N/A If (loss), enter -0- in Part I, line 8 Part Val Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year, see the instructions before making any entries. (d)
Distribution ratio (a) Base period years (c) Adjusted qualifying distributions Net value of noncharitable-use assets (col. (b) divided by col. (c)) Calendar year (or tax year beginning in) 6,983. 144,277. .048400 2018 140,476. 7,000. .049831 2017 5,500. 129,533. 2016 .042460 327. 135,382 .054121 2015 000 142.792 .049022 2014 .243834 2 Total of line 1, column (d) 2 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years .048767 153,691. Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 7,495. Multiply line 4 by line 3 5 53. 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 7,548. 7 7 Add lines 5 and 6 10,000. 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

COILE FOUNDATION 2	•			
Form 990-PF (2019) C/O CHRISTOPHER COILE	/	<u> 26-6001</u>	L829 Page 4	
Part VI Excise Tax Based on Investment Income (Section 4940	<del> </del>	48 - see II	nstructions)	
1a Exempt operating foundations described in section 4940(d)(2), check here  and e		The state of the second	dis atomicalities	
- Date of ruling or determination letter: (attach copy of letter if nec		150 1 190 V	1.35.35.35.75.75	
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► X and enter 1%	1	53.	
of Part I, line 27b	i i		The state of the s	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4%		4.38	To be the state of the state of the state of	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, of	hers, enter -0-)	2		
3 Add lines 1 and 2		3	53.	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; of	thers, enter -0-)	4	0.	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	·	5 (\$680) \$570.0	53.	
6 Credits/Payments:	1 . 1	<b>第四条</b>		
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a 0.	The same of the sa		
b Exempt foreign organizations - tax withheld at source				
c Tax paid with application for extension of time to file (Form 8868)	<del></del>			
d Backup withholding erroneously withheld	6d 0.	Million House	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
7 Total credits and payments. Add lines 6a through 6d		<del>-(- </del>	0.	
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	.cnea	8	53.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	33.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	Refunded >	10		
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶  Part VII-A Statements Regarding Activities	Nerunded	-!!-	<del></del>	
1a During the tax year, did the foundation attempt to influence any national, state, or local legis	lation or did it participate or intervene		Yes No	
any political campaign?	lation of the it participate of intervene	11	1a X	
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpor	ses? See the instructions for the defini	ion	1b X	
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies (			334 7387 PAS	
distributed by the foundation in connection with the activities.	or any materials positioned or			
c Did the foundation file Form 1120-POL for this year?			1c X	
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the		••	<b>经验证证据</b>	
(1) On the foundation. > \$ (2) On foundation managers				
e Enter the reimbursement (if any) paid by the foundation during the year for political expendi				
managers. > \$ 0.			<b>公理经验</b>	
2 Has the foundation engaged in any activities that have not previously been reported to the If	RS?		2 X	
If "Yes," attach a detailed description of the activities.	• •		<b>三国黎派 游泳</b>	
3 Has the foundation made any changes, not previously reported to the IRS, in its governing is	nstrument, articles of incorporation, or		17 14 18 18 18 18 18 18 18 18 18 18 18 18 18	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3 X	
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year	?		4a X	
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5 X	
If "Yes," attach the statement required by General Instruction T.	•	·	25 SE SE	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied er	ther:			
By language in the governing instrument, or				
By state legislation that effectively amends the governing instrument so that no mandator	y directions that conflict with the state	aw		
remain in the governing instrument?			6 X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	lete Part II, col. (c), and Part XV		7 X	
			1881 1871 TO	
8a Enter the states to which the foundation reports or with which it is registered. See instruction	ns. ►		Contract of the	
MD			<b>社会協議 36</b>	
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorney General (or designate)		· 1000 1000 1000 1000 1000 1000 1000 10	
of each state as required by General Instruction G? If "No," attach explanation			8b X	
9 Is the foundation claiming status as a private operating foundation within the meaning of se	ction 4942(j)(3) or 4942(j)(5) for calen	dar	15 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," com			9 X	4
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedu			10 X	
		Fo	rm <b>990-PF</b> (2019)	

Form 990-PF (2019) C/O CHRISTOPHER COILE
Part VIFA Statements Regarding Activities (continued)

		12.22	Yes	No
- 11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address NONE			
14	The books are in care of ► CHRISTOPHER COILE Telephone no. ► 410-8		002	
	Located at ► 393 SOUTH DRIVE, SEVERNA PARK, MD ZIP+4 ►2	1146		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			•
	and enter the amount of tax-exempt interest received or accrued during the year		/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country	<b>建物</b>	2007	THE STATE OF
P	art VII-Bij Statements Regarding Activities for Which Form 4720 May Be Required			<b></b>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<b>1000</b>	Yes	No
18	During the year, did the foundation (either directly or indirectly):			10 m
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			Gen "12
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			16.27
	a disqualified person? Yes X No	100	Sept.	1. 7.
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	40		روز آن از
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	383		300 (0.00
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1.00		1. 25°
	for the benefit or use of a disqualified person)?	19 11		22123 2223
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	7 1 2 2	遊戲	18 19.
	if the foundation agreed to make a grant to or to employ the official for a period after			1000
	termination of government service, if terminating within 90 days.)			
t	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	150		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	16		<u> </u>
	Organizations relying on a current notice regarding disaster assistance, check here	\$25.55 \$150.55		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2019?	1c		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)):		West C	
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines		25.	د موروع د موروع د موروع
	6d and 6e) for tax year(s) beginning before 2019?	1300	196	1
	If "Yes," list the years $\blacktriangleright$ ,,,,	100		12. 57
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	13.73	100	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	-44.16	138	£4550
	statement - see instructions.) N/A	2b		
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		BANK!	100
	<b>&gt;</b>	13.43		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			4
	during the year? Yes X No			300
b	olf "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after	167.07	18.3	18.15
	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	F 185	1.57.7. 1 1.4.7.7. 1	1000
	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,	1. M.	المالية والمر	遊門
	Schedule C, to determine if the foundation had excess business holdings in 2019.)  N/A	3b		L
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	2.83	Tay of 3	1, 7, 7
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	46		X

		<u> 26-60018</u>	29 Page 6
orm 4720 May Be Re	equired (continu	ued)	
			Yes No
	•	s X No	
to carry on, directly or indire			The Partie of
•			
	. L Y	s X No	<b>"这种是是一个</b>
described in section			
		es 🗶 No 🎇	10 10 10 10 10 10 10 10 10 10 10 10 10 1
or educational purposes, or fo	or —		
		s X No	
	n Regulations	/  *	833 CENT 1400
		N/A	5b
			是對於對於
Ņ	/A Ye	B8 LNo ∫∰	
pay premiums on		. Lead	
	Ye		QUESTA CAR
ersonal benefit contract?			6b X
		<u>[</u>	
_	L Ye		新 <i>巴斯 的第</i> 名的图象学的基本
		. N/A.	7b
1 NAN ANN in romunoration or		403	<b>第4個學家學園學</b>
1,000,000 in remuneration or		regra. 🕅	<b>发生的自己的现在分词</b>
	Yessers Highly	es X No	
es, Foundation Man	nagers, Highly	es X No	
es, Foundation Man	nagers, Highly	es X No	
es, Foundation Man	nagers, Highly (c) Compensation		(e) Expense
ees, Foundation Man eir compensation.  (b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ees, Foundation Man	agers, Highly (c) Compensation	(d) Contributions to employee benefit plans and deferred	account, other
ees, Foundation Man eir compensation.  (b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	account, other
ees, Foundation Man eir compensation.  (b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	account, other
ees, Foundation Man eir compensation.  (b) Title, and average hours per week devoted to position  TRUSTEE	(c) Compensation (lf not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
ees, Foundation Man eir compensation.  (b) Title, and average hours per week devoted to position  TRUSTEE  0.00	(c) Compensation (lf not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
ees, Foundation Man eir compensation.  (b) Title, and average hours per week devoted to position  TRUSTEE  0.00	(c) Compensation (lf not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
ees, Foundation Manager compensation.  (b) Title, and average hours per week devoted to position  TRUSTER  0.00  TRUSTEE	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
ees, Foundation Manager compensation.  (b) Title, and average hours per week devoted to position  TRUSTER  0.00  TRUSTEE	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
ees, Foundation Manager compensation.  (b) Title, and average hours per week devoted to position  TRUSTER  0.00  TRUSTEE	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
ees, Foundation Manager compensation.  (b) Title, and average hours per week devoted to position  TRUSTER  0.00  TRUSTEE	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
ees, Foundation Manager compensation.  (b) Title, and average hours per week devoted to position  TRUSTER  0.00  TRUSTEE	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
ees, Foundation Manager compensation.  (b) Title, and average hours per week devoted to position  TRUSTEE  0.00  TRUSTEE  0.00	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
ees, Foundation Manager compensation.  (b) Title, and average hours per week devoted to position  TRUSTEE  0.00  TRUSTEE  0.00	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  O .	account, other allowances  0.
ees, Foundation Manager compensation.  (b) Title, and average hours per week devoted to position  TRUSTEE  0.00  TRUSTEE  0.00	(c) Compensation (If not paid, enter -0-)  0.  0.	(d) Contributions to employee benefit plans and deferred compensation  O  O  Contributions to employee benefit plans and deferred compensation	account, other allowances  O.
ees, Foundation Manager compensation.  (b) Title, and average hours per week devoted to position  TRUSTEE  0.00  TRUSTEE  0.00	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  O .	account, other allowances  0.
ees, Foundation Man  eir compensation.  (b) Title, and average hours per week devoted to position  TRUSTEE  0.00  TRUSTEE  0.00	(c) Compensation (If not paid, enter -0-)  0.  0.	(d) Contributions to employee benefit plans and deferred compensation  O .  O .	account, other allowances  O.  Ce) Expense account, other
ees, Foundation Man  eir compensation.  (b) Title, and average hours per week devoted to position  TRUSTEE  0.00  TRUSTEE  0.00	(c) Compensation (If not paid, enter -0-)  0.  0.	(d) Contributions to employee benefit plans and deferred compensation  O .  O .	account, other allowances  O.  Ce) Expense account, other
ees, Foundation Man  eir compensation.  (b) Title, and average hours per week devoted to position  TRUSTEE  0.00  TRUSTEE  0.00	(c) Compensation (If not paid, enter -0-)  0.  0.	(d) Contributions to employee benefit plans and deferred compensation  O .  O .	account, other allowances  O.  Ce) Expense account, other
ees, Foundation Man  eir compensation.  (b) Title, and average hours per week devoted to position  TRUSTEE  0.00  TRUSTEE  0.00	(c) Compensation (If not paid, enter -0-)  0.  0.	(d) Contributions to employee benefit plans and deferred compensation  O .  O .	account, other allowances  O.  Ce) Expense account, other
ees, Foundation Man  eir compensation.  (b) Title, and average hours per week devoted to position  TRUSTEE  0.00  TRUSTEE  0.00	(c) Compensation (If not paid, enter -0-)  0.  0.	(d) Contributions to employee benefit plans and deferred compensation  O .  O .	account, other allowances  O.  Ce) Expense account, other
ees, Foundation Man  eir compensation.  (b) Title, and average hours per week devoted to position  TRUSTEE  0.00  TRUSTEE  0.00	(c) Compensation (If not paid, enter -0-)  0.  0.	(d) Contributions to employee benefit plans and deferred compensation  O .  O .	account, other allowances  O.  Ce) Expense account, other
ees, Foundation Man  eir compensation.  (b) Title, and average hours per week devoted to position  TRUSTEE  0.00  TRUSTEE  0.00	(c) Compensation (If not paid, enter -0-)  0.  0.	(d) Contributions to employee benefit plans and deferred compensation  O .  O .	account, other allowances  O.  Ce) Expense account, other
	n 4945(e))? r to carry on, directly or indire r to carry on, directly or indire r described in section or educational purposes, or for der the exceptions described in actions here rom the tax because it maintain N pay premiums on hersonal benefit contract? shelter transaction?	orm 4720 May Be Required (continued 4945(e))?  If to carry on, directly or indirectly,  If to carry on, directly or ind	r to carry on, directly or indirectly,  r to carry on,  r to carry on, directly or indirectly,  r to carry on  r to carry on,  r to carry on,  r to carry on,  r to carry on,  r to carry on  r

0

Total number of other employees paid over \$50,000

Form 990-PF (2019) C/O CHRISTOPHER COILE	26-6	001829 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundati Paid Employees, and Contractors (continued)	on Managers, Highly	
.3 Five highest-paid independent contractors for professional services. If none, enter	'NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	4	
	<u> </u>	
	4	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part X-A Summary of Direct Charitable Activities	· · · · · · · · · · · · · · · · · · ·	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
1 N/A		· · · · · · · · · · · · · · · · · · ·
2		
		<del></del>
3		
4		
		······································
Rank X-B Summary of Program-Related Investments		A
Describe the two largest program-related investments made by the foundation during the tax year on li	nes 1 and 2.	Amount
1 N/A		
2		· · · · · · · · · · · · · · · · · · ·
<u> </u>		
All other program-related investments. See instructions.		
3		
	·	
Total. Add lines 1 through 3		0.
TARREST CONTRACTOR OF THE PROPERTY OF THE PROP	· · · · · · · · · · · · · · · · · · ·	Form 990-PF (2019)

Minimum Investment Heturn (All domestic foundations must complete	[2.65m]	e instructions.)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purpose	es:	
a Average monthly fair market value of securities	. 18	155,002.
b Average of monthly cash balances .	1b	1,029.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	10	156,031.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	156,031.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instruction	ns) 4	2,340.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	153,691.
6 Minimum investment return. Enter 5% of line 5	6	7,685.
Part XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(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	7,685.
2a Tax on investment income for 2019 from Part VI, line 5	53.	
b Income tax for 2019. (This does not include the tax from Part VI.)	1	
c Add lines 2a and 2b	2c	53.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	7,632.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	7,632.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	7,632.
		<del></del>
RartXIII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	25.37	
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	. <u>1a</u>	10,000.
b Program-related investments - total from Part IX-B	<u>1</u> b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purpos	ses 2	
3 Amounts set aside for specific charitable projects that satisfy the:	2.5%	
a Suitability test (prior IRS approval required)	. 3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line	e 4 4	10,000.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
income. Enter 1% of Part I, line 27b	5	53.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	. 6	9,947.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	whether the foundation qualifies for th	e section
4940(e) reduction of tax in those years.	•	

Page 9

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2018	(c) 2018	( <b>d</b> ) 2019
	histributable amount for 2019 from Part XI, ne 7				7,632.
<b>2</b> U	indistributed income, if any, as of the end of 2019	16 - 18 1 Mar 1 1 1 1	the state of the state of	_	S
	nter amount for 2018 only	Landing to the state of	the state of the s	0.	
bΤ	otal for prior years:		0.	a september of	
3 Ē	xcess distributions carryover, if any, to 2019:		0.		
	rom 2014	The state of the s	Silver and the state of	the state of the s	
	rom 2015 152.	and the state of t	2. 2 A. 1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.		The state of the s
c F	rom 2016		7.		
<b>d</b> F	rom 2017 426.	The state of the s			
e F	rom 2018	16 13 15 15 15 15 15 15 15 15 15 15 15 15 15		,	STATE OF THE STATE
f T	otal of lines 3a through e	578.			このが、一般の
4 0	lualifying distributions for 2019 from				
Р	art XII, line 4: ►\$ 10,000.				Control of the contro
a A	pplied to 2018, but not more than line 2a	The state of the s		0.	14.
ЬA	pplied to undistributed income of prior			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	the grant of the same of the s
у	ears (Election required - see instructions)		0.	y be in Butter	1000
c T	reated as distributions out of corpus		The state of the s		· · .
(1	Election required - see instructions)	0.			`\&\
d A	pplied to 2019 distributable amount	The state of the state			7,632.
e R	temaining amount distributed out of corpus	2,368.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
5 E	xcess distributions carryover applied to 2019 I an amount appears in column (d), the same amount aust be shown in column (a) )	0.			0.
	nter the net total of each column as				
ac	orpus Add lines 3f, 4c, and 4e Subtract line 5	2,946.			A Maria Cara Cara Cara Cara Cara Cara Cara
	rior years' undistributed income. Subtract				4
	ne 4b from line 2b		0.		
u đ	nter the amount of prior years' ndistributed income for which a notice of eficiency has been issued, or on which				
	ne section 4942(a) tax has been previously ssessed		0.		The state of the s
_	ubtract line 6c from line 6b. Taxable	1 3 4 5 1 4 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		The state of the s	1. 10 2 3 44. 14
	mount - see instructions		0.	The state of the s	
	Indistributed income for 2018. Subtract line		a succession		which the second
	a from line 2a. Taxable amount - see instr.	E. Santa		0.	The state of the s
	Indistributed income for 2019. Subtract	Charles Street Street	4 , 2 , 2 , 2 , 2 , 2 , 2 , 2 , 2 , 2		
li	nes 4d and 5 from line 1. This amount must	27 - 27		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
b	e distributed in 2020	Lo granding		المراجع والمراجع المراجع	0.
7 A	mounts treated as distributions out of		•		
C	orpus to satisfy requirements imposed by				) [2]
S	ection 170(b)(1)(F) or 4942(g)(3) (Election			, ,	
n	nay be required - see instructions)	0.			· · · · · · · · · · · · · · · · · · ·
8 E	xcess distributions carryover from 2014		, sa s		
n	ot applied on line 5 or line 7	0.	<u> </u>		
9 E:	xcess distributions carryover to 2020.				the same of the same of
	ubtract lines / and 8 from line 6a	2,946.	1. 5. 11. 15.	- 10	Mary Williams
10 A	nalysis of line 9:			The state of the s	South the state of the
a E	xcess from 2015 152.				
b E	xcess from 2016				
c E	xcess from 201/ 426.	1. 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			M. S.
	xcess from 2018	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
e E	xcess from 2019 2,368.	" na" a		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5 900-PE (2010)

	STOPHER CO	ILE		26-60	01829 Page <sup>-</sup>
Part XIV Private Operating For	undations (see in:	structions and Part V	II-A, question 9)	N/A	
1 a if the foundation has received a ruling or o	letermination letter that	it is a private operating			
foundation, and the ruling is effective for 2		-	▶		
<b>b</b> Check box to indicate whether the foundate	ion is a private operatin	g foundation described		4942(j)(3) or 49	142(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1110040	/ <del>.</del>
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed			<u> </u>		
b 85% of line 2a	<del> </del>		<u></u>		
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					
e Qualifying distributions made directly					-
for active conduct of exempt activities.		Į		1	
Subtract line 2d from line 2c			Y		
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:		<del></del>	<del>-  </del>		
(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 Supplementary Informat any time during the			if the foundation	had \$5,000 or mor	e in assets
		ucuons.,	<del></del>		· · · · · · · · · · · · · · · · · · ·
Information Regarding Foundation     a List any managers of the foundation who is year (but only if they have contributed mo	nave contributed more t		tributions received by th	e foundation before the close	e of any tax
SEE STATEMENT 5					
b List any managers of the foundation who other entity) of which the foundation has a			(or an equally large port	ion of the ownership of a par	rtnership or
NONE	<b>5</b>				
2 Information Regarding Contribution	Grant Gift Loan	Scholarship etc. Pr	ourame.		
Check here X if the foundation only the foundation makes gifts, grants, etc., to	y makes contributions t	o preselected charitable	organizations and does		sts for funds. If
a The name, address, and telephone number			····		···
b The form in which applications should be	submitted and informat	ion and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards,	such as by geographica	l areas, charitable fields	, kinds of institutions, or	other factors:	

Form 990-PF (2019)

C/O CHRISTOPHER COILE

Part XV Supplementary Information	on (continued)			
3 Grants and Contributions Paid During the		Payment		
• Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Ooma Source	
a Paid during the year				
BIG ARTS	N/A	PUBLIC	GENERAL CHARITY	
900 DUNLOP ROAD				
SANIBEL, PL 33957		<del> </del>		1,000.
COMMUNITY HOUSING & RESOURCES	N/A	PUBLIC	GENERAL CHARITY	
2401 LIBRARY WAY SANIBEL, FL 33957				5,000.
SATEL, 11 3337				3,000.
DING DARKING WILDLIER	N/A	PUBLIC	GENERAL CHARITY	
DING DARLING WILDLIFE ONE WILDLIFE DR	N/A	FOREIC	SENERAL CHARITI	
SANIBEL, FL 33957				1,000.
F.I.S.H. OF SANIBEL, INC	N/A	PUBLIC	GENERAL CHARITY	
1630 PERIWINKLE WAY, UNIT B	,,,,			
SANIBEL, FL 33957				1,000.
SCCF	N/A	PUBLIC	GENERAL CHARITY	
3333 SANIBEL CAPTIVA RD				
SANIBEL, FL 33957		<u> </u>		1,000.
· · · · · · · · · · · · · · · · · · ·	ONTINUATION SHEE	T(S)	<u>▶ 3a</u>	10,000.
b Approved for future payment				
NONE				
	}			
Total		<u> </u>	<b>▶</b> 3b	0.
10/81	<del></del>			990 PE (0040)

Form 990-PF (2019)

Part XVI-A Analysis of Income-Producing Activities

<u> </u>					
Enter gross amounts unless otherwise indicated.	(a) Business	ed business income (b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt
1 Program service revenue:	code	Amount	code	Airiouit	function income
8			ļ		
b			-		
C	-		ļ		
d			<u> </u>		
e			↓		
f	.		<u> </u>		<del></del>
g Fees and contracts from government agencies			ļ		
2 Membership dues and assessments	ļ		<b>_</b>		
3 Interest on savings and temporary cash					
investments			<u> </u>		
4 Dividends and interest from securities			14	<u> </u>	
5 Net rental income or (loss) from real estate:	發換性觀	<b>不是这些是不是是不是</b>	發展的		THE PROPERTY OF THE
a Debt-financed property			<u> </u>		
b Not debt-financed property			<u> </u>		
6 Net rental income or (loss) from personal	1				
property .			ļ		
7 Other investment income			ļ		
8 Gain or (loss) from sales of assets other			l		
than inventory			18	3,717.	
9 Net income or (loss) from special events			<del>                                     </del>		
10 Gross profit or (loss) from sales of inventory	. <u> </u>		↓	<u> </u>	
11 Other revenue:				1	
8			↓		
b			<del> </del>		····
C			↓		
d	.		↓		
e			100000		
12 Subtotal. Add columns (b), (d), and (e)	THE STATE	0.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	6,809.	0.
13 Total. Add line 12, columns (b), (d), and (e)	-			. 13 <u> </u>	6,809.
(See worksheet in line 13 instructions to verify calculations.)  Part XVI-B  Relationship of Activities 1					
Line No. Explain below how each activity for which income the foundation's exempt purposes (other than			A contrit	outed importantly to the accom	plishment of
	<u> </u>				<del></del>
		<del></del>		<del></del>	
	<u> </u>				
		<u> </u>		<del></del>	<del></del>
	<del> </del>				
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	· · · · · · · · · · · · · · · · · · ·	<del> </del>			
		······································			<del></del>
	<del></del>				<del></del>
	··· · · ·	<del></del>			<del></del>
	<del></del>			····	<del></del>
•	·····				
					······

Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or scontribution	Amount
Name and address (home or business)	or substantial contributor	status of recipient	Contribution	Amount
LINIC FOR THE REHABILITAITON OF	N/A	PUBLIC	GENERAL CHARITY	
ILDLIFE				
883 SANIBEL CAPTIVA RD				1 0
ANIBEL, PL 33957				1,00
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Form 990-PF (2019) C/O CHRISTOPHER COILE

Part XV	II Information Re Exempt Organ		s to a	nd Transactions an	d Relationsh	ips With Nonchar	table	· · · · ·	.go 10
1 Did the	e organization directly or indi		followin	no with any other organizatio	n described in secti	on 501(c)	18.33	Yes	No
	than section 501(c)(3) organ						198	ES FO	
	ers from the reporting founda						1		160
(1) C				<b>6</b>			1a(1)		X
	ther assets		•				1a(2)		X
. 1	ransactions:		•			• •	24.75	The control	<u> </u>
	ales of assets to a noncharital	hle everant organization					1b(1)	Par. Cake ANY	X
• •	urchases of assets from a noi	, ,	ration	•			1b(2)		X
٠,		, ,	Lation						X
	ental of facilities, equipment,		•				1b(3)	-	X
	eimbursement arrangements	•		•		•	1b(4)		X
	oans or loan guarantees	hh fd				- •	1b(5)		X
• •	erformance of services or me	•		-	•		1b(6)		
	g of facilities, equipment, ma						1c	لــــا	X
or serv	inswer to any of the above is rices given by the reporting for	oundation. If the foundatio	n receiv	ed less than fair market value		_		et3 <b>,</b>	
,	(b) Amount involved				(d) Description	al transfer transactions and			
a) Line no	(b) Amount involved	<del></del>		e exempt organization	(U) Description	of transfers, transactions, and	snaring arra	ingemen	is .
			A\N		<del></del>		<del></del>		
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ın sect	oundation directly or indirect ion 501(c) (other than section complete the following school	n 501(c)(3)) or in section :		e or more tax-exempt organiz	zations described	. [	Yes	X	] No
	(a) Name of org			(b) Type of organization		(c) Description of relations	hip		
	N/A								
	· · · · · · · · · · · · · · · · · · ·								
Sign an Here	der penatties of perjury, I declare to de belief, it is true correct and com	pint Decaration of preparer (c	including other than	taxpayer) is based on all information   07-06-20	TRUSTE	as any knowledge ret sh	y the IRS durn with the own below?	prepare	r
	ignature of officer or trustee	<del></del>	2	Date	Title	Check Control			
	Print/Type preparer's na	ime V Prep	er's s	signature	Date /	Check if PTIN			
Daid	JEFFREY S.	<i>x</i>	/	Maria	16.6	self- employed	A A F = -		
Paid Broposs	REINHARDT,		OLD	MON, TAIBEL &	6/27/26		0256		
Prepare Use Onl	у		MOGÓL P	Firm's EIN ► 52-1	3654: 	13			
		15 DEERECO R	-	]					
	TI:	MONIUM, MD 2		Phone no. (410)	308-	<u>-03</u> 0	10		

FORM 990-PF DI	VIDENDS	AND INTER	EST FROM SECUR	ittes s	entender a
	GROSS AMOUNT	CAPITAL GAINS		(B) NET INVEST-	
SANIBEL CAPTIVA TRUST CO	3,092.		0. 3,092.	3,092.	
TO PART I, LINE 4	3,092.		3,092.	3,092.	
FORM 990-PF		TAX	ES	S	FATEMENT 2
DESCRIPTION		EXPENSES	(B) NET INVEST- MENT INCOME	ADJUSTED	CHARITABLE
FOREIGN TAXES PAID ON SECURITIES		36.	36.		0.
TO FORM 990-PF, PG 1, I	LN 18	36.	36.		O.
FORM 990-PF		OTHER E	XPENSES	Sī	PATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
FEES - SANIBEL TRUST		1,498.	1,498.		0.
TO FORM 990-PF, PG 1, I	 _N 23	1,498.	1,498.		0.

FORM 990-PF	OTHER INVESTMENT	.s	STATEMENT 4
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
VARIOUS EQUITIES-SANIBEL	COST	107,624.	169,893.
TOTAL TO FORM 990-PF, PART II,	LINE 13	107,624.	169,893.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 5

NAME OF MANAGER

CHRISTOPHER C. COLLE SUSAN S. COTTE