

Form 990
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047
2019
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2019, and ending 12-31-2019
B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending
C Name of organization: FLORIDA UNITED METHODIST FOUNDATION INC
Doing business as
Number and street (or P O box if mail is not delivered to street address) Room/suite: PO BOX 3549
City or town, state or province, country, and ZIP or foreign postal code: LAKELAND, FL 338023549
D Employer identification number: 59-1148710
E Telephone number: (863) 904-2970
G Gross receipts \$ 12,702,230
F Name and address of principal officer: MARK BECKER, PO BOX 3549, LAKELAND, FL 338023549
H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
H(c) Group exemption number
I Tax-exempt status: 501(c)(3)
J Website: WWW.FUMF.ORG
K Form of organization: Corporation
L Year of formation: 1966
M State of legal domicile: FL

Part I Summary

Table with 4 columns: Description, Prior Year, Current Year, End of Year. Rows include: 1. Mission statement; 2-7. Activities & Governance; 8-12. Revenue; 13-19. Expenses; 20-22. Net Assets or Fund Balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer (MARK BECKER, PRESIDENT) and Date (2020-08-12)

Paid Preparer Use Only: Preparer's name (BAYLIS & COMPANY PA CPAS), address (53 LAKE MORTON DRIVE, LAKELAND, FL 338015344), and other details.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 5,716,895 including grants of \$ 173,219) (Revenue \$ 6,492,864)
See Additional Data

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 5,716,895

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	Yes	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	Yes	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	Yes	

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		No
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		No
25b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
28a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		No
28b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		No
28c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
35b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Main form area containing questions 2a through 16, including sub-questions like 2b, 3a, 3b, 4a, 4b, 5a, 5b, 5c, 6a, 6b, 7a, 7b, 7c, 7d, 7e, 7f, 7g, 7h, 8, 9a, 9b, 10a, 10b, 11a, 11b, 12a, 12b, 13a, 13b, 13c, 14a, 14b, 15, and 16. Each question has a corresponding box for the answer and a 'Yes/No' column.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (17), 1b (17), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
20 State the name, address, and telephone number of the person who possesses the organization's books and records

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

See instructions for the order in which to list the persons above

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees <i>(continued)</i>										
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
1c Total from continuation sheets to Part VII, Section A										
1d Total (add lines 1b and 1c)							803,765	0	355,557	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ **4**

		Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ **0**

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	137,672		
	g Noncash contributions included in lines 1a - 1f \$	1g			
h Total. Add lines 1a-1f		137,672			

Program Service Revenue			Business Code				
	2a INTEREST - LOANS		525920	5,374,212	5,374,212		
	b TRUST MANAGEMENT FEES		525920	665,217	665,217		
	c INT - UNLOANED CASH		525920	317,270	317,270		
	d EDUCATIONAL CONFERENCES & SEMINAR		525920	13,117	13,117		
	e SERVICE FEES		525920	5,910	5,910		
	f All other program service revenue						
g Total. Add lines 2a-2f.			6,375,726				

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			89,560	89,560			
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6a Gross rents	6a	(i) Real	(ii) Personal				
		b Less rental expenses	6b					
		c Rental income or (loss)	6c					
	d Net rental income or (loss)							
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other	6,086,785	7,700		
		b Less cost or other basis and sales expenses	7b	6,059,207	0			
		c Gain or (loss)	7c	27,578	7,700			
	d Net gain or (loss)				35,278	27,578		7,700
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	8a						
			b Less direct expenses	8b				
c Net income or (loss) from fundraising events								
9a Gross income from gaming activities See Part IV, line 19	9a							
		b Less direct expenses	9b					
c Net income or (loss) from gaming activities								
10a Gross sales of inventory, less returns and allowances	10a							
		b Less cost of goods sold	10b					
c Net income or (loss) from sales of inventory								
Miscellaneous Revenue	Business Code							
11a MISCELLANEOUS INCOME	900099		4,787				4,787	
b								
c								
d All other revenue								
e Total. Add lines 11a-11d			4,787					
12 Total revenue. See instructions			6,643,023	6,492,864	0		12,487	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	173,219	173,219		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,171,324	993,348	177,976	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	423,371	398,379	24,992	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	50,461	47,599	2,862	
9 Other employee benefits	160,532	150,448	10,084	
10 Payroll taxes	72,816	67,440	5,376	
11 Fees for services (non-employees)				
a Management	36,952	22,500	14,452	
b Legal	28,423	24,660	3,763	
c Accounting	35,875	30,355	5,520	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	176,849	176,849		
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion				
13 Office expenses	69,218	59,798	9,420	
14 Information technology	140,417	128,782	11,635	
15 Royalties				
16 Occupancy	48,613	44,238	4,375	
17 Travel	39,050	34,251	4,799	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	18,450	14,923	3,527	
20 Interest	3,054,053	3,054,053		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	122,851	115,015	7,836	
23 Insurance	69,245	62,993	6,252	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CONSTITUENT RELATIONS	112,705	102,376	10,329	
b ASSOCIATION FEES	9,168	7,838	1,330	
c EQUIPMENT RENTAL/MAINT	5,557	5,406	151	
d MISCELLANEOUS	2,948	2,425	523	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	6,022,097	5,716,895	305,202	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	119	1	119
	2 Savings and temporary cash investments	2,296,084	2	12,238,663
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net	124,947,013	7	125,138,772
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	42,715	9	42,169
	10a Land, buildings, and equipment—cost or other basis—Complete Part VI of Schedule D	10a 2,474,410		
	b Less accumulated depreciation	10b 1,107,329	1,442,558	10c 1,367,081
	11 Investments—publicly traded securities	5,056,868	11	5,706,415
	12 Investments—other securities—See Part IV, line 11		12	
	13 Investments—program-related—See Part IV, line 11	13,134,149	13	4,175,894
	14 Intangible assets		14	
	15 Other assets—See Part IV, line 11	186,116,550	15	213,092,689
16 Total assets. Add lines 1 through 15 (must equal line 34)	333,036,056	16	361,761,802	
Liabilities	17 Accounts payable and accrued expenses	174,759	17	378,785
	18 Grants payable	199,221	18	50,000
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability—Complete Part IV of Schedule D	185,144,087	21	211,991,714
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24)—Complete Part X of Schedule D	134,933,141	25	135,388,040
	26 Total liabilities. Add lines 17 through 25	320,451,208	26	347,808,539
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	9,465,338	27	10,709,880
	28 Net assets with donor restrictions	3,119,510	28	3,243,383
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	12,584,848	32	13,953,263	
33 Total liabilities and net assets/fund balances	333,036,056	33	361,761,802	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,643,023
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,022,097
3	Revenue less expenses Subtract line 2 from line 1	3	620,926
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12,584,848
5	Net unrealized gains (losses) on investments	5	671,397
6	Donated services and use of facilities	6	
7	Investment expenses	7	-4,506
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	80,598
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	13,953,263

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 59-1148710

Name: FLORIDA UNITED METHODIST FOUNDATION INC

Form 990 (2019)

Form 990, Part III, Line 4a:

THE FOUNDATION IS A RELATED, BUT SEPARATELY ORGANIZED, ENTITY WITH THE PURPOSE OF SERVING THE FLORIDA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH. ITS PURPOSE IS TO RECEIVE AND ADMINISTER FUNDS FOR RELIGIOUS, CHARITABLE, OR EDUCATIONAL PURPOSES. IT SERVES AS A CHANNEL FOR PHILANTHROPIC GIVING TO LOCAL CHURCHES, AGENCIES AND INSTITUTIONS AFFILIATED WITH THE FLORIDA CONFERENCE THROUGH VARIOUS TRUST VEHICLES. IN ADDITION, FUNDS DEPOSITED WITH THE FOUNDATION MAY BE LOANED TO UNITED METHODIST CHURCHES, AGENCIES AND INSTITUTIONS PRIMARILY WITHIN THE FLORIDA CONFERENCE FOR BUILDING AND OTHER CAPITAL PROJECTS. NUMBER OF UNITED METHODIST CHURCHES AND OTHER AGENCIES WITHIN THE FLORIDA ANNUAL CONFERENCE BENEFITED: CHURCHES 615

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
REV LAWRENCE Q BARRINER BOARD MEMBER	4 30	X						0	0	0
STEPHEN BELL SECRETARY	4 30	X		X				0	0	0
MARKITA COOPER VICE CHAIRPERSON	4 30	X		X				0	0	0
WILLIAM FRYE JR BOARD MEMBER	4 30	X						0	0	0
DANIEL S HAGER CHAIRPERSON	5 00	X		X				0	0	0
LARRY HANNAH BOARD MEMBER	4 30	X						0	0	0
EVANS HUBBARD TO 319 BOARD MEMBER	4 30	X						0	0	0
RONALD C COLEMAN FROM 719 BOARD MEMBER	4 30	X						0	0	0
ROBERT WHITE JR TO 619 BOARD MEMBER	4 30	X						0	0	0
JERRY HARALSON FROM 919 BOARD MEMBER	4 30	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOSPEH HURT FROM 919 BOARD MEMBER	4 30	X						0	0	0
PHYLLIS KLOCK BOARD MEMBER	4 30	X						0	0	0
JANE ZODY BOARD MEMBER	4 30	X						0	0	0
REV DR DENNIS VLASSIS BOARD MEMBER	4 30	X						0	0	0
REV ROBERT BLEDSOE BOARD MEMBER	4 30	X						0	0	0
BRUCE FORD BOARD MEMBER	4 30	X						0	0	0
REV RICHARD NUSSEL BOARD MEMBER	4 30	X						0	0	0
BEN SIMMONS BOARD MEMBER	4 30	X						0	0	0
REV CESAR VILLAFANA BOARD MEMBER	4 30	X						0	0	0
REV MARK BECKER PRESIDENT	37 50			X				118,471	0	103,700

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
J THOMAS WILKINSON VICE PRESIDENT	37 50			X				150,694	0	41,550
ANDREW CRASKE VICE PRESIDENT	37 50			X				115,881	0	42,305
PAMELA W HICKS VICE PRESIDENT	37 50			X				152,380	0	32,006
MARGARET COX TREASURER	37 50			X				97,170	0	15,733
REV JOHN PETERSON VICE PRESIDENT	37 50			X				77,335	0	98,005
ELIZABETH PARHAM VICE PRESIDENT	37 50			X				91,834	0	22,258

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

FLORIDA UNITED METHODIST FOUNDATION INC

Employer identification number

59-1148710

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)
- 11 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
 - f Enter the number of supported organizations 1
 - g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A) UMCAGENCIES WITHIN FLA ANNUAL CONF	590904361	1	Yes		5,716,895	0
Total	1				5,716,895	0

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income (Do not include gain or loss from the sale of capital assets (Explain in Part VI))						
11	Total support. Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) **12**

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) **14**

15 Public support percentage for 2018 Schedule A, Part II, line 14 **15**

16a **33 1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b **33 1/3% support test—2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a **10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b **10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ►

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
1	Yes	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		No
2		No
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		No
3a		No
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3b		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
3c		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		No
4a		No
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
4b		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
4c		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		No
5a		No
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
5b		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
5c		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		No
6		No
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		No
7		No
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		No
8		No
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		No
9a		No
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		No
9b		No
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		No
9c		No
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		No
10a		No
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		
10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		No
b	A family member of a person described in (a) above?		No
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		No

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		No

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2019			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2019 from Section D, line 7			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2020. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Additional Data

Software ID:

Software Version:

EIN: 59-1148710

Name: FLORIDA UNITED METHODIST FOUNDATION INC

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2019

Open to Public Inspection

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization
FLORIDA UNITED METHODIST FOUNDATION INC

Employer identification number
59-1148710

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	14	
2 Aggregate value of contributions to (during year)	47,004	
3 Aggregate value of grants from (during year)	50,428	
4 Aggregate value at end of year	455,126	

- 5** Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No
- 6** Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

- 1** Purpose(s) of conservation easements held by the organization (check all that apply)
- Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area
- Protection of natural habitat Preservation of a certified historic structure
- Preservation of open space
- 2** Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year
- | | Held at the End of the Year |
|---|-----------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register | 2d |
- 3** Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 4** Number of states where property subject to conservation easement is located ▶ _____
- 5** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No
- 6** Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____
- 7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____
- 8** Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No
- 9** In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a** If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items
- b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
- (i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
- (ii) Assets included in Form 990, Part X ▶ \$ _____
- 2** If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items
- a** Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
- b** Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- c** Beginning balance
 - d** Additions during the year
 - e** Distributions during the year
 - f** Ending balance

	Amount
1c	
1d	
1e	
1f	

- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	5,639,817	6,177,361	5,650,699	5,291,696	5,679,034
b Contributions	42,913	82,236	7,929	54,743	55,271
c Net investment earnings, gains, and losses	716,559	-590,800	547,713	333,240	-413,809
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	29,325	28,980	28,980	28,980	28,800
g End of year balance	6,369,964	5,639,817	6,177,361	5,650,699	5,291,696

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a** Board designated or quasi-endowment ▶ 49 080 %
- b** Permanent endowment ▶ 39 350 %
- c** Temporarily restricted endowment ▶ 11 570 %

The percentages on lines 2a, 2b, and 2c should equal 100%

- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)	Yes	
3a(ii)		No
3b		

- b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		1,833,508	560,557	1,272,951
c Leasehold improvements				
d Equipment		462,230	378,093	84,137
e Other		178,672	168,679	9,993
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				1,367,081

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

Part VIII Investments—Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) ACCRUED INTEREST RECEIVABLE	437,240
(2) FUTURE INTEREST IN TRUST ASSETS	663,550
(3) CASH AND INVESTMENTS HELD AS CUSTODIAN, AT MARKET	211,991,714
(4) ACCOUNTS RECEIVABLE	185
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	213,092,689

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
1. (1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	135,388,040

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	7,213,663
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	671,397
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	80,598
e	Add lines 2a through 2d	2e	751,995
3	Subtract line 2e from line 1	3	6,461,668
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	4,506
b	Other (Describe in Part XIII)	4b	176,849
c	Add lines 4a and 4b	4c	181,355
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	6,643,023

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	5,845,248
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	5,845,248
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	176,849
c	Add lines 4a and 4b	4c	176,849
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	6,022,097

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 59-1148710

Name: FLORIDA UNITED METHODIST FOUNDATION INC

Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B	THE FOUNDATION ENTERS INTO SEVERAL AGREEMENTS THAT BENEFIT UNITED METHODIST CHURCHES OR AGENCIES THROUGH THE USE OF THE COMMON FUNDS THESE AGREEMENTS INCLUDE FUMF FUNDS AGREEMENTS (A TOOL FOR THE CHURCHES TO INVEST IN OUR ENDOWMENTS), CHARITABLE REMAINDER TRUSTS (THE FOUNDATION IS THE TRUSTEE), CHARITABLE GIFT ANNUITIES, DONOR ADVISED FUNDS AND MANAGED TRUSTS (THE FOUNDATION IS NOT THE TRUSTEE) THESE ASSETS AND LIABILITIES ARE EQUAL AND SHOWN AS CUSTODIAL THE RELATED REVENUES AND EXPENSES ARE NOT CONSIDERED PART OF THE FOUNDATION'S OPERATIONS AND ARE NOT REFLECTED IN ITS FINANCIAL STATEMENTS

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	DURING 1985 AN ENDOWMENT WAS ESTABLISHED BY THE ORGANIZATION'S BOARD OF DIRECTORS IN ORDER TO PROVIDE THE ORGANIZATION WITH INCOME TO ASSIST IN FUNDING ITS MANAGEMENT AND GENERAL COSTS ADDITIONAL RESTRICTED NET ASSETS WERE ADDED TO THE ENDOWMENT IN 2006, 2010, 2011 AND 2012 FROM TRUSTS THE ENDOWMENT ALSO INCLUDES SPLIT INTEREST AGREEMENTS, CHARITABLE REMAINDER TRUSTS, AND GIFT ANNUITIES CREATED BY DONORS WITH THE ORGANIZATION AS A REMAINDER BENEFICIARY IN 2011 AN ENDOWMENT WAS SET UP FOR A SPECIFIC RESTRICTED PURPOSE AND IS SHOWN IN THE WITH DONOR RESTRICTIONS THE PURPOSE WAS TO ESTABLISH A PERMANENT ENDOWED SCHOLARSHIP FOR THE FLORIDA CONFERENCE CAMPS AND RETREATS SITE ADDITIONAL FUNDS WERE ADDED TO THIS ENDOWMENT IN 2013

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN PRESENT VALUE OF FUTURE INTERESTS IN TRUSTS 80,598

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	INVESTMENT MANAGEMENT FEES WERE NETTED WITH TRUST INCOME IN AUDIT 176,849

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	INVESTMENT MANAGEMENT FEES WERE NETTED WITH TRUST INCOME IN AUDIT 176,849

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

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

OMB No 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization FLORIDA UNITED METHODIST FOUNDATION INC

Employer identification number 59-1148710

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
3 Enter total number of other organizations listed in the line 1 table

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
 Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	THE ADVANCEMENT AND GRANTS COMMITTEE UPDATED POLICIES AND GRANT PROCEDURES THIS YEAR CURRENTLY, THERE ARE THREE GRANT TYPES FUTURE GENERATIONS FUND, EMERGENCY GRANTS AND A SPECIAL GRANTS-PASSING THE TORCH THE FUTURE GENERATIONS WAS ESTABLISHED IN 2016 TO PROVIDE GRANTS TO PROGRAMS AND MINISTRIES THAT FOSTER THE SPIRITUAL DEVELOPMENT OF YOUNG PEOPLE (NEWBORN TO 30 YEARS OLD) AND NURTURE THEIR DEVELOPMENT AS CHURCH LEADERS ANY PROGRAM CONSIDERED FOR GRANT FUNDING IS EXPECTED TO MEET THE FOLLOWING CRITERIA A BE WELL PLANNED AND EFFICIENT IN ITS USE OF FUNDS B HAVE IDENTIFIED ADEQUATE LOCAL AND EXTENDED SUPPORT TO SUSTAIN THE MINISTRY BEYOND THE GRANT PERIOD C INCLUDE EFFORTS TO COLLABORATE WITH OTHER AGENCIES AND GROUPS, SUCH AS LOCAL SCHOOLS AND PROGRAMS, MAXIMIZING REQUESTED FUNDS D INVOLVE VOLUNTEER LEADERSHIP AND STAFFING WHERE APPROPRIATE E PROVIDE MATCHING FUNDS EMERGENCY GRANTS WILL BE CONSIDERED IF THEY ARE INTENDED TO FUND EMERGENCY CAPITAL IMPROVEMENTS ARISING FROM LOCALIZED, EXTERNAL EVENTS BEYOND A CHURCH'S CONTROL AND THAT IF LEFT UNTENDED WOULD HINDER A CHURCH'S LONG-TERM VIABILITY EXAMPLES OF EXTERNAL EVENTS INCLUDE SIGNIFICANT ECONOMIC SHOCKS, SUCH AS LOCAL BUSINESS/PLANT CLOSINGS, AND LOCALIZED WEATHER EVENTS, SUCH AS LIGHTNING STRIKES A EMERGENCY GRANTS WILL NOT BE PROVIDED TO FUND NEGLECTED REPAIRS OR DELAYED, ROUTINE MAINTENANCE OR REPLACEMENT OF ITEMS WITH KNOWN SERVICE LIVES B CHURCHES REQUESTING GRANTS FOR EMERGENCY FUNDS RELATED TO A NATURAL DISASTER, SUCH AS A HURRICANE OR SEVERE WEATHER EVENT, WILL BE DIRECTED FIRST TO THE FLORIDA CONFERENCE TO BE ASSISTED BY ANY CONFERENCE-WIDE FUNDING CAMPAIGNS THAT EXIST WHEN THERE IS AN URGENT NEED DUE TO A WIDESPREAD EMERGENCY OR NATURAL DISASTER, THE FOUNDATION PRESIDENT IS EMPOWERED TO GRANT UP TO \$10,000 AT HIS OR HER DISCRETION, IN CONSULTATION WITH THE COMMITTEE CHAIR, WITHOUT A CALLED MEETING OF THE ADVANCEMENT AND GRANTS COMMITTEE SUCH GRANTS WILL BE IMMEDIATELY DISCLOSED TO THE FULL BOARD AND FOUNDATION STAFF A GRANTS WILL BE MADE TO THE AFFECTED ANNUAL CONFERENCE OR THE UNITED METHODIST COMMITTEE ON RELIEF

Additional Data

Software ID:
Software Version:
EIN: 59-1148710
Name: FLORIDA UNITED METHODIST FOUNDATION INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAC BOARD OF CAMPS AND RETREAT MINISTRIES 450 MARTIN LUTHER KING JR AVENUE LAKELAND, FL 33815	59-0904361		29,325				BELL ENDOWED CAMPING SCHOLARSHIP FUND
UMCOR P O BOX 9068 NEW YORK, NY 10087	13-5562279		50,000				HURRICANE DORIAN BAHAMAS RELIEF

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BETHUNE COOKMAN UNIVERSITY 640 DR MARY MCLEOD BETHUNE BLVD DAYTONA BEACH, FL 321143099	59-0704726	3	10,000				GRANT FOR CHALLENGING CONVERSATIONS
KEY WEST UNITED METHODIST CHURCH 600 EATON STREET KEY WEST, FL 33040	65-0491014		8,000				GRANT FOR TREASURER KEY PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GULF COAST WESLEY FOUNDATION 7587 WOODLAND BEND CIRCLE FT MYERS, FL 33912	46-0632942		25,000				GRANT FOR WESLEY HOUSE PROGRAM
GATOR WESLEY FOUNDATION INC - CAMPUS MINISTRY 1380 W UNIVERSITY AVE GAINESVILLE, FL 32603	27-1841296		7,750				GRANT FOR ACT JUSTLY MINISTRY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST UNITED METHODIST CHURCH OF PORT ORANGE 962 DERBYSHIRE RD HOLLY HILL, FL 32117	59-0974343	3	12,000				GRANT FOR DERBYSHIRE PLACE CHRISTIAN COMMUNITY CENTER
CRAVE 2410 FORREST RD WINTER PARK, FL 32790	84-2795316		9,144				GRANT FOR CRAVE ALUMNIN DEVELOPMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERSON UNITED METHODIST CHURCH 136 W 2ND AVE PIERSON, FL 32180	59-2173440		20,000				GRANT FOR FISH & FERN FAITH COMMUNITY

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
FLORIDA UNITED METHODIST FOUNDATION INC

Employer identification number
59-1148710

Part I Questions Regarding Compensation

	Yes	No
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items</p> <p> <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account </p> <p> <input checked="" type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) </p>		
<p>b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b Yes	
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?</p>	2 Yes	
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III</p> <p> <input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations </p> <p> <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee </p>		
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</p>	4a No 4b No 4c No	
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p>		
<p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III</p>	5a No 5b No	
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III</p>	6a No 6b No	
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	7	No
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	8	No
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 REV MARK BECKER PRESIDENT	(i)	118,471	0	0	45,816	63,129	227,416	0
	(ii)	0	0	0	0	0	0	0
2 J THOMAS WILKINSON VICE PRESIDENT	(i)	150,694	0	0	19,076	24,963	194,733	0
	(ii)	0	0	0	0	0	0	0
3 ANDREW CRASKE VICE PRESIDENT	(i)	115,881	0	0	14,851	28,775	159,507	0
	(ii)	0	0	0	0	0	0	0
4 PAMELA W HICKS VICE PRESIDENT	(i)	152,380	0	0	18,960	15,550	186,890	0
	(ii)	0	0	0	0	0	0	0
5 REV JOHN PETERSON VICE PRESIDENT	(i)	77,335	0	0	25,676	77,038	180,049	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 1A	TOTAL COMPENSATION BUDGET FOR ALL EMPLOYEES IS APPROVED BY THE BOARD OF DIRECTORS AS PERMITTED BY IRC 107, OFFICERS AND KEY EMPLOYEES WHO ARE "MINISTERS OF THE GOSPEL" MAY DESIGNATE A PORTION OF THEIR COMPENSATION AS A HOUSING ALLOWANCE EXCLUSION FOR THE UPCOMING YEAR. THE DESIGNATION OF COMPENSATION IS APPROVED BY THE BOARD OF DIRECTORS AT A DULY CALLED MEETING.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

2019

Open to Public Inspection

Department of the Treasury

Name of the organization

FLORIDA UNITED METHODIST FOUNDATION INC

Employer identification number

59-1148710

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	<p>THE BYLAWS WERE AMENDED AND APPROVED SEPTEMBER 6, 2019 SIGNIFICANT CHANGES TO THE ARTICLES ARE LISTED BELOW ARTICLE II PURPOSES AND POWERS SECTION 2 1 PURPOSES ADDITION OF SECTION V MAKE LOANS TO CHURCHES, SCHOOLS, AGENCIES AND RELIGIOUS ORGANIZATIONS THAT COMPLIMENT AND SUPPORT A WESLEYAN FOCUS ON ABUNDANT GRACE AND SHARE COMMITMENT TO MAKING DISCIPLES OF JESUS CHRIST FOR THE TRANSFORMATION OF THE WORLD ("WESLEYAN MISSION"), ADDITION OF SECTION VI TO ACCEPT DEPOSITS AND OFFER DEBT CERTIFICATES THE PROCEEDS OF WHICH WILL FUND LOANS TO CHURCHES AND MINISTRIES THAT FURTHER THE WESLEYAN MISSION SECTION 2 2 POWERS ADDITION OF THE BOARD OF DIRECTORS SHALL HAVE GENERAL CHARGE OF THE AFFAIRS, PROPERTY AND ASSETS OF THE FOUNDATION IT SHALL BE THE DUTY OF THE DIRECTORS TO CARRY OUT THE AIMS, VISION, MISSION AND PURPOSES OF THE FOUNDATION AND, TO THIS END, TO MANAGE AND CONTROL ALL OF ITS PROPERTY AND ASSETS ARTICLE III MEMBERSHIP SECTION 3 1 MEMBERSHIP REVISED TO INCLUDE AS MEMBERS OR OTHER BODY AS CONSTITUTED BY THE THEN CURRENT BOOK OF DISCIPLINE OF THE UNITED METHODIST CHURCH OR OTHER DESIGNATED RELIGIOUS ORGANIZATION THAT SUPPORTS AND FURTHERS A WESLEYAN MISSION, QUALIFIES AS A SECTION 501(C)(3) ORGANIZATION UNDER THE INTERNAL REVENUE CODE AND HAS BEEN DESIGNATED BY THE FLORIDA ANNUAL CONFERENCE TO BE THE SUCCESSOR MEMBER OF THE FOUNDATION' ARTICLE V BOARD OF DIRECTORS SECTION 5 4 DUTIES OF THE BOARD REVISED A DIRECTOR WILL PERFORM THE DUTIES OF DIRECTOR, INCLUDING THE DUTIES AS A MEMBER OF ANY COMMITTEE OF THE BOARD UPON WHICH SUCH DIRECTOR SERVES IN GOOD FAITH, IN A MANNER REASONABLY BELIEVED TO BE IN THE BEST INTEREST OF THE FOUNDATION, AND WITH SUCH CARE AS AN ORDINARILY PRUDENT PERSON IN A LIKE POSTION WOULD USE UNDER SIMILAR CIRCUMSTANCES BOARD MEMBERS ARE THE FIDUCIARIES WHO STEER THE FOUNDATION TOWARDS A SUSTAINABLE FUTURE BY ADOPTING SOUND, ETHICAL, AND LEGAL GOVERNANCE AND FIANNCIAL MANAGEMENT POLICIES, AS WELL AS MAKING SURE THE FOUNDATION HAS ADEQUATE RESOURCES TO ADVANCE THE MISSION SECTION 5 9 ACTION BY CONSENT INCLUDED 'ACTION BY ELECTRONIC COMMUNICATION' AS AN ACCEPTABLE FORM OF CONSENT</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE FOUNDATION IS A RELATED, BUT SEPARATELY ORGANIZED, ENTITY WITH THE PRIMARY PURPOSE OF SERVING THE FLORIDA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH MEMBERS OF THE FOUNDATION ARE THE LAY AND CLERGY MEMBERS OF THE FLORIDA ANNUAL CONFERENCE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE CORPORATE MEMBERS OF THE FOUNDATION ELECT THE BOARD OF DIRECTORS AT AN ANNUAL MEETING OF THE FLORIDA UNITED METHODIST FOUNDATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE TAX RETURN WAS PREPARED BY AN INDEPENDENT TAX ACCOUNTANT USING THE AUDIT AND INFORMATION FURNISHED BY STAFF. THE AUDIT COMMITTEE OF THE FOUNDATION REVIEWED THE DRAFT OF THE TAX RETURN WITH STAFF AND THE TAX ACCOUNTANT, AND APPROVED THE FINAL DRAFT. THE FINAL DRAFT OF THE TAX RETURN WILL BE PRESENTED BY THE AUDIT COMMITTEE TO THE BOARD OF DIRECTORS AT THEIR NEXT MEETING FOR APPROVAL. UPON APPROVAL BY THE BOARD THE TAX ACCOUNTANT WILL RECEIVE DOCUMENTS SIGNED BY THE BOARD OF DIRECTORS AND THE PRESIDENT OF THE FOUNDATION. THE TAX ACCOUNTANT WILL SUBMIT THE TAX RETURN ELECTRONICALLY.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE FOUNDATION HAS A CONFLICT OF INTEREST POLICY THAT IS PRESENTED ANNUALLY TO BOTH THE STAFF AND BOARD OF DIRECTORS TO REVIEW THE STAFF AND BOARD OF DIRECTORS COMPLETE AND SIGN A FORM INDICATING ANY CONFLICTS AND AN UNDERSTANDING OF THE POLICIES THESE FORMS ARE KEPT ON FILE AS CLARIFIED BY THE CHANGES TO THE BYLAWS IN 2015, IF A BOARD MEMBER OR OFFICER HAS AN INTEREST IN A PARTICULAR TRANSACTION, HE OR SHE IS STILL COUNTED WHEN DETERMINING A QUORUM FOR THE BOARD MEETING HE OR SHE MAY ALSO VOTE ON THE TRANSACTION THE APPROVAL OF THE TRANSACTION WILL NOT BE NULL AND VOID IF THE BOARD MEMBER OR OFFICER DISCLOSED THE CONFLICT OF INTEREST TO THE BOARD PRIOR TO THE VOTE, AND IF THE TRANSACTION WOULD STILL HAVE BEEN APPROVED WITHOUT COUNTING THE INTERESTED PERSON'S VOTE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE COMMITTEE OF THE FOUNDATION SERVES AS THE COMPENSATION COMMITTEE FOR THE PRESIDENT AND OTHER OFFICERS DURING 2015 THE FOUNDATION HIRED AN INDEPENDENT HUMAN RESOURCE CONSULTANT THE CONSULTANT PROVIDED COMPENSATION RANGES FOR ALL STAFF INCLUDING THE PRESIDENT AND KEY EMPLOYEES IN 2015, 2017 AND 2019 THIS REPORT WAS PROVIDED TO THE EXECUTIVE COMMITTEE THE INDEPENDENT CONSULTANT UTILIZED VARIOUS LOCAL, REGIONAL AND NATIONAL SALARY GUIDE DATABASES

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON WRITTEN REQUEST TAX RETURNS AND FINANCIALS ARE AVAILABLE UPON SIGNED WRITTEN REQUEST AND ALSO AVAILABLE UPON EMAIL REQUEST FROM OUR WEBSITE IN AN ATTEMPT TO "GO GREEN," THE FOUNDATION OFFERS THE OFFERING CIRCULAR UPON REQUEST ON THE WEBSITE IN ELECTRONIC FORM THE PRINTED FORM IS AVAILABLE UPON REQUEST-EITHER VERBAL, WRITTEN OR ELECTRONIC THE OFFERING CIRCULAR DESCRIBES THE FOUNDATION'S WORK ASSISTING AGENCIES, DISTRICTS AND CHURCHES PRIMARILY OF THE FLORIDA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH WITH ENDOWMENT INVESTMENTS AND LOANS THROUGH THE FOUNDATION'S DEVELOPMENT FUND IT ALSO INCLUDES THE FOUNDATION'S ANNUAL AUDIT AND PERFORMANCE OF FUNDS THE FOUNDATION ALSO MAILES ITS ANNUAL REPORT OR AN ANNUAL NEWSLETTER TO ALL ACCOUNT HOLDERS, WHICH HIGHLIGHTS ITS FINANCIALS FOR THE YEAR THE ANNUAL REPORT AND NEWSLETTER ARE ALSO AVAILABLE ONLINE AT THE FOUNDATION'S WEBSITE CURRENT AUDITED FINANCIALS ARE PART OF THE PRINTED OFFERING CIRCULAR AND ARE SENT OUT WITH ANY REQUEST OR DISTRIBUTED CIRCULARS EVEN BY EMAIL

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN PRESENT VALUE OF FUTURE INTEREST IN TRUSTS 80,598

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 1 THE ORGANIZATION'S MISSION	<p>THE CORPORATION IS FORMED EXCLUSIVELY FOR CHARITABLE AND RELIGIOUS PURPOSES AND TO PROMOTE AND SUPPORT THE MISSION OF THE FLORIDA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH UNDER THE PROVISIONS OF CHAPTER 617, FLORIDA STATUTES, AND NOT FOR PECUNIARY PROFIT OR FINANCIAL GAIN THE SPECIFIC PURPOSES FOR WHICH THE CORPORATION IS ORGANIZED ARE AS FOLLOWS A TO ACT AS TRUSTEE, TO ADMINISTER TRUSTS, TO RECEIVE AND ADMINISTER FUNDS FOR RELIGIOUS, CHARITABLE, AND EDUCATIONAL PURPOSES, AND TO THAT END TO TAKE TITLE TO AND HOLD, BY CONTRACT, BEQUEST, DEVISE, GIFT, PURCHASE OR LEASE, EITHER ABSOLUTELY OR IN TRUST, ANY PROPERTY, REAL, PERSONAL AND MIXED, WITHOUT LIMITATIONS AS TO AMOUNTS OR VALUE, B TO RECEIVE, ADMINISTER AND PARTICIPATE IN CHARITABLE REMAINDER TRUSTS, UNITRUSTS AND OTHER LIKE TRUSTS, TO THE EXTENT THIS CORPORATION IS LAWFULLY PERMITTED TO DO SO, TO SELL, CONVEY AND DISPOSE OF ANY SUCH PROPERTY AND TO INVEST AND REINVEST THE PRINCIPAL AND INCOME THEREOF, AND TO DEAL WITH AND EXPEND THE PRINCIPAL AND INCOME OF THIS CORPORATION FOR ANY OF THE AFOREMENTIONED OBJECTIVES AND PURPOSES, WITHOUT LIMITATION, EXCEPT AS TO SUCH LIMITATIONS, IF ANY, AS MAY BE CONTAINED IN THE INSTRUMENT UNDER WHICH SUCH PROPERTY IS RECEIVED OR OTHER LIMITATIONS IMPOSED BY LAW, C TO RECEIVE DEPOSITS FROM LOCAL CHURCHES AND OTHER ORGANIZATIONS AND INSTITUTIONS OF THE FLORIDA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH OR FLORIDA RESIDENTS AS MAY BE PERMITTED OR AUTHORIZED BY APPLICABLE LAW, TO PAY INTEREST ON SUCH DEPOSITS, TO OFFER DEBT SECURITIES THE PROCEEDS OF WHICH TO FUND LOANS MADE TO CHURCHES, INDIVIDUALS, ENTITIES, AGENCIES AND OTHER ORGANIZATIONS THE FOUNDATION SERVES, TO LEND MONEY TO LOCAL CHURCHES, ORGANIZATIONS, INSTITUTIONS AND AGENCIES RELATED TO THE FLORIDA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH OR THE UNITED METHODIST CHURCH, OR TO CHURCHES, AGENCIES, DISTRICTS, SCHOOLS, ORGANIZATIONS AND CHARITIES WHOSE MISSION COMPLEMENTS AND SUPPORTS A WESLEYAN FOCUS ON ABUNDANT GRACE AND SHARED COMMITMENT TO MAKING DISCIPLES OF JESUS CHRIST FOR THE TRANSFORMATION OF THE WORLD, D TO RECEIVE ANY PROPERTY, REAL, PERSONAL OR MIXED IN TRUST, UNDER THE TERMS OF ANY WILL, TRUST OR OTHER INSTRUMENT FOR THE FOREGOING PURPOSES OR ANY OF THEM, AND IN ADMINISTERING SAME TO CARRY OUT THE DIRECTIONS AND EXERCISE THE POWERS CONTAINED IN THE TRUST INSTRUMENT UNDER WHICH THE PROPERTY IS RECEIVED, INCLUDING THE EXPENDITURE OF THE PRINCIPAL, AS WELL AS THE INCOME, FOR ONE OR MORE OF SUCH PURPOSES, IF AUTHORIZED OR DIRECTED IN THE TRUST INSTRUMENT UNDER WHICH IT IS RECEIVED, TO RECEIVE, TAKE TITLE TO, HOLD, AND USE THE PROCEEDS AND INCOME OF STOCKS, BONDS, OBLIGATIONS, OR OTHER SECURITIES OF ANY CORPORATIONS OR CORPORATION, DOMESTIC OR FOREIGN, ONLY FOR THE FOREGOING PURPOSES, OR ANY OF THEM, E TO ACQUIRE, RECEIVE AND ACCEPT, BY WAY OF GRANT, GIFT, DEVISE, BEQUEST, PURCHASE, LEASE OR OTHERWISE, MONEY AND REAL AND PERSONAL PROPERTY OF EVERY KIND, NATURE AND DESCRIPTION</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 1 THE ORGANIZATION'S MISSION	<p>TION, WITHOUT LIMITATION AS TO AMOUNT OR VALUE, INCLUDING SECURITIES (WHICH TERM, FOR ALL PURPOSES HEREOF, INCLUDES WITHOUT LIMITING THE GENERALITY THEREOF, SHARES OF STOCK, BONDS DEBENTURES, NOTES, MORTGAGES OR OTHER OBLIGATIONS, AND ANY CERTIFICATES, RECEIPT OR OTHER INSTRUMENTS, REPRESENTING ANY RIGHTS OR INTEREST THEREIN OR WITH RESPECT THERETO) CREATED OR ISSUED BY ANY PERSON, FIRM, ASSOCIATION, CORPORATION OR GOVERNMENT OR SUBDIVISION THERE OF, TO EXERCISE AS OWNER OR HOLDER OF ANY SUCH PROPERTY ANY AND ALL RIGHTS, POWERS AND PRIVILEGES IN RESPECT THEREOF, TO HOLD, ADMINISTER, SELL, CONVEY, DISPOSE OF, INVEST AND REINVEST SUCH PROPERTY AND THE INCOME AND PROCEEDS THEREOF, TO USE, APPLY OR DISBURSE ANY OF ITS PROPERTY OR THE INCOME OR THE PROCEEDS THEREOF, EXCLUSIVELY FOR OR TOWARD ANY ONE OR MORE OF ITS PURPOSES AS LISTED HEREIN, F TO SOLICIT THE DONATION OR INVESTMENT OF FUNDS FROM BOARDS, AGENCIES, AND INSTITUTIONS AFFILIATED WITH THE FLORIDA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH AND FROM DONORS, INDIVIDUALS, FAMILIES AND SUPPORTERS OF THE UNITED METHODIST CHURCH, TO RECEIVE, HOLD, INVEST, REINVEST, AND ADMINISTER SUCH FUNDS AND OTHER PROPERTY WHICH MAY BE GIVEN, TRANSFERRED, CONVEYED OR ENTRUSTED TO IT IN AN INVESTMENT FUND OR MORTGAGE POOL, TO ISSUE RECEIPTS TO SUCH DONORS AND HOLDERS OF PARTICIPATION CERTIFICATES, NOTES OR DEBENTURES FOR THEIR GIFTS, OR AS THE CASE MAY BE, INVESTMENT IN DEBT SECURITIES, AN INVESTMENT FUND OR MORTGAGE POOL, TO INVEST SUCH FUNDS IN MORTGAGE LOANS TO UNITED METHODIST CHURCHES, AND TO THE EXTENT DETERMINED BY THE BOARD OF DIRECTORS, TO INVEST IN STOCKS, BONDS, OR OTHER SECURITIES, WITHOUT BEING LIMITED TO SO-CALLED LEGAL INVESTMENTS FOR FIDUCIARIES, TO COLLECT THE INTEREST OR INCOME THEREOF, TO PAY TO INVESTORS SUCH INTEREST UPON THEIR INVESTMENTS AS MAY BE DETERMINED BY THE CERTIFICATES OF PARTICIPATION, NOTE OR DEBENTURES OR CONTRACTS WITH THE CORPORATION, TO PURCHASE, SELL, EXCHANGE OR OTHERWISE DISPOSE OF, PLEDGE, MORTGAGE, OR HYPOTHECATE, ALL KINDS OF SECURITIES, AND TO EXERCISE ANY AND ALL OF SAID POWERS, EITHER ON ITS OWN ACCOUNT, OR AS AGENT OR TRUSTEE FOR ALL PERSONS, FIRMS, CORPORATIONS, OR OTHER ORGANIZATIONS, G TO PROVIDE, FOR A REASONABLE FEE, CONSULTING, FINANCIAL, STEWARDSHIP AND ADMINISTRATIVE SERVICES FOR LOCAL CHURCHES, ORGANIZATIONS AND INSTITUTIONS OF THE FLORIDA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH, THE UNITED METHODIST CHURCH, OTHER RELIGIOUS ENTITIES ORGANIZED AS A 501(C)(3) NOT FOR PROFIT ORGANIZATION WHOSE MISSION COMPLEMENTS AND SUPPORTS A WESLEYAN FOCUS ON ABUNDANT GRACE AND SHARED COMMITMENT TO MAKING DISCIPLES OF JESUS CHRIST FOR THE TRANSFORMATION OF THE WORLD, H TO EXERCISE ANY, ALL AND EVERY POWER UNDER WHICH A NON-PROFIT CORPORATION ORGANIZED UNDER THE PROVISIONS OF THE FLORIDA NOT-FOR-PROFIT CORPORATION ACT, AS FROM TIME TO TIME MAY BE AMENDED, FOR RELIGIOUS, CHARITABLE OR EDUCATIONAL PURPOSES, CAN BE AUTHORIZED TO EXERCISE NO PART OF THE ACTIVIT</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 1 THE ORGANIZATION'S MISSION	IES OF THIS CORPORATION SHALL BE THE CARRYING-ON OF PROPAGANDA OR OTHERWISE ATTEMPT TO INFLUENCE LEGISLATION, OR THE PARTICIPATION IN ANY POLITICAL CAMPAIGN ON BEHALF OF ANY CANDIDATE FOR PUBLIC OFFICE THE FLORIDA METHODIST FOUNDATION RECEIVED CEFEX (CENTER FOR FIDUCIARY EXCELLENCE) CERTIFICATION IN 2019 CEFEX CERTIFIED FIRMS ADHERE TO A STANDARD REPRESENTING THE BEST PRACTICES IN THEIR INDUSTRY THE STANDARDS INCLUDE SPECIFIC CRITERIA WHICH HAVE BEEN SUBSTANTIATED BY REGULATION OR WRITTEN IN CONSULTATION WITH LEADING FIRMS CEFEX CERTIFIED FIRMS VOLUNTARILY UNDERTAKE ANNUAL AUDITS BY INDEPENDENT EXPERT ANALYSTS THIS CONTINUALLY VERIFIES THEIR ADHERENCE TO THE APPLICABLE STANDARD AND IS SUPPLEMENTAL TO OVERSIGHT PERFORMED BY REGULATORS, OR FINANCIAL AUDITORS

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2019

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
FLORIDA UNITED METHODIST FOUNDATION INC

Employer identification number
59-1148710

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)FLORIDA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH 450 MARTIN LUTHER KING JR AVE LAKELAND, FL 33815 59-0904361	SUPPORT UNITED METHODIST CONGREGATIONS AND THEIR LAY AND CLERGY LEADERS	FL	501(C)(3)	LINE 1	N/A		No

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b Gift, grant, or capital contribution to related organization(s)	Yes	
c Gift, grant, or capital contribution from related organization(s)		No
d Loans or loan guarantees to or for related organization(s)	Yes	
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)		No
l Performance of services or membership or fundraising solicitations for related organization(s)	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		No
o Sharing of paid employees with related organization(s)		No
p Reimbursement paid to related organization(s) for expenses	Yes	
q Reimbursement paid by related organization(s) for expenses		No
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)FLORIDA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH - GRANTS	B	29,325	ACTUAL AMOUNTS
(2)FLORIDA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH - LOANS	D	8,014,522	ACTUAL AMOUNTS
(3)FLORIDA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH - OTHER SVCS	L	5,716,895	ACTUAL COST
(4)FLORIDA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH - BUILDINGS	P	48,613	ACTUAL COST

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
SCHEDULE R, PART V, LINE 2, ITEM(3)	THE FOUNDATION SUPPORTS THE FLORIDA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH (CONFERENCE) AND ITS 615 CHURCHES AND AGENCIES (CHURCHES) PRIMARILY SCHEDULE R REPORTS THE RELATIONSHIP WITH THE CONFERENCE ONLY EXCEPT FOR LINE L THIS LINE INCLUDES THE TOTAL PROGRAM COST FOR THE CONFERENCE AND CHURCHES THE FOUNDATION HAS GRANTED \$93,894 TO THE CHURCHES AND LOANED \$115,575,007