

Charles Alkire, President Edward O'Sheehan, Vice President Foundation for Indigent Guardianship, Inc. 4040 Esplanade Way, Suite 280.08 Tallahassee, FL 32399-7000

Melinda Coulter, Treasurer

HAND DELIVERED

July 29, 2022

Michelle Branham, Secretary Department of Elder Affairs 4040 Esplanade WayBranham Tallahassee, FL 32399

RE: Annual DSO Report

Dear Secretary Branham:

As required by Section 20.058, Florida Statutes, enclosed is the 2021-2022 Annual Report for the Foundation for Indigent Guardianship, Inc., the direct support organization for the Office of Public and Professional Guardians.

Additionally, attached is a copy of the Financial Statements, and letters from the auditors documenting the Foundation's requirement for an annual audit, as required by Section 215.981, Florida Statutes..

Should you have any questions or need additional information, please call or email:

Charles Alkire, President 941-Melinda Coulter, Treasurer 850-

941-922-2852 850-445-3271 charles.alkire@verizon.net coultermom@aol.com

Respectfully submitted,

Me ulter Treasurer

ec: Chante Jones

A not-for-profit 501 (c)(3) charitable corporation Supporting the Florida Department of Elder Affairs, Office of Public and Professional Guardians To assure that all Floridians who need decision making assistance can live safely and well Charles Alkire, President Edward O'Sheehan, Vice President F oundation for Indigent Guardianship, Inc.

Melinda Coulter, Treasurer

4040 Esplanade Way, Suite 280F Tallahassee, FL 32399-7000

> Annual Report FY 21-22

History and Statutory Authority

Initially section 744.7082, Florida Statutes, gave the Statewide Public Guardianship Office (SPGO) within the Department of Elder Affairs (DOEA) the authority to create a direct-support organization. In 2005 SPGO contracted with the Foundation for Indigent Guardianship (FIG) to become its first direct-support organization and act in this capacity. As such and in 2005 FIG incorporated under Chapter 617, Florida Statutes, was approved by the Florida Department of State, as well as was approved by the Internal Revenue Service as a 501(c)(3) organization.

Since that time FIG has continued in that capacity, SPGO's name has been changed to the Office of Public and Professional Guardians (OPPG) and the direct-support organization authority was moved to section 744.2105, Florida Statutes.

FIG's address continues to be 4040 Esplanade Way, Suite 280F, Tallahassee, FL 32399-7000. Our telephone number is 850.907.1299. We do not currently have a website.

Mission and Description of Results Obtained

The mission of FIG continues to be to support the OPPG. To do so, in March 2006 FIG created the Florida Public Guardianship Pooled Special Needs Trust (FPGPSNT). Acting as the founding trustee and with the encouragement and support of DOEA, FIG established this pooled special needs trust to supplement funding for Florida's public guardian programs. Anyone in need of a pooled special needs trust is encouraged to use the FPGPSNT since the residual funds, upon the death of a beneficiary, go directly to support public guardianship in Florida. Information regarding FIG's FPGPSNT can be found at http://trustaged.org/the-florida-public-guardianship-pooled-special-needs-trust/. Residue from subaccounts in this trust were used to establish public guardianship services statewide and resulted in continuation funding by the Florida Legislature

During fiscal year 2021-2022 FIG distributed \$131,429.70 to public guardianship programs from the residue of subaccounts in the FPGPSNT. The following programs were recipients of these funds:

5th Circuit Public Guardian	\$ 1,449.13
Charlotte/ Collier County Public Guardian	\$ 3,420.01
Council on Aging – Volusia	\$ -3,143.80*

Guardianship Care Group	\$ 336.56
Guardianship Program of Dade County	\$ 72,443.27
Legal Aid Society of Palm Beach County	\$ 18,347.57
Lutheran Services – 1st Judicial Circuit	\$ 20,325.00
North Florida Office of Public Guardian	\$ 3,889.92
St. Thomas University College of Law	
Office of Public Guardian	\$ 14,362.04

*\$8,241.20 was awarded to the Council in FY 21-22 but two checks paid in FY 20-21 totaling \$11,385.00 were voided resulting in the -\$3,143.80 reflected for this fiscal year.

In collaboration with OPPG and as reported as a goal in last year's report, FIG adopted two new procedures to increase the accountability for FIG funding awarded to public guardianship offices. The first has to do with new requirements related to timely responses from programs to FIG award announcements. Programs are now required to respond to award announcements within 4 months of a notice. When the public guardian program does **not** respond **within four (4) months** of the award announcement with a Proposal as to how the funds are to be spent, then the award dollars are considered unclaimed and go into FIG's general budget to be used for emergency purposes or other requests to support public guardianship in Florida (such as holiday gifts for clients or emergency needs by any program). Should the initially-awarded public guardianship program later have an emergency need or unfunded need, it may submit a request itemizing the need and how the requested funds would be spent. Approval of this type of FIG award is based upon the availability of funds and the approval of the FIG Board. However, it should be noted that FIG continues to honor its commitment to first offer the proposed award (a portion of the residue a trust upon the death of the beneficiary) to the public guardian serving the county from which the pooled special needs trust account originated.

The second procedural change relates to FIG strengthening its funding distribution process. To minimize and simplify record keeping and to be auditable, each program is asked to state in its award proposal, for items over \$1000, whether they prefer approved funds to be reimbursed to the program (after initial payment by the program) or paid directly to a vendor. In either case, a copy of the vendor's invoice is required (noting that all items or services ordered have been received). If the program chooses for FIG to pay the vendor, FIG provides the program with a check payable to the vendor for its transmittal to them. For auditing purposes, documentation for items or services costing less than \$1000 is the responsibility of each program and records are required to be maintained for seven (7) years as to the receipt of and use of the award funds. Additionally, each program must acknowledge that these records are subject to auditing by FIG, OPPG, or other auditing agencies as may be directed.

Additionally, in October 2022 FIG hired an administrative staff person to address the significant deficiency in internal controls identified by Lanigan and Associates in its last several audits. The internal control structure has been modified as follows:

- The treasurer makes all deposits and writes all check (a copy of income checks and deposit slips as well as a copy of checks stubs and backup information is provided monthly to the new employee);
- The new employee maintains the books of record (a copy of the checking account journal for each month is provided to a separate officer the vice president);
- The vice-president receives the bank statement and uses the journal provided to reconcile the statement with the books of record.

As of June 30, 2021 there were 63 FGPSNTs. During this fiscal year, thirty (30) new trusts were established with Advocates and Guardians for the Elderly and Disabled (AGED) and thirteen (13) were closed (ten due to the death of the beneficiary, two due to spenddowns and one was never funded). Therefore, as of June 30, 2022, FPGPSNT contains eighty (80) subaccounts with a total market value of \$ 1,624,531

Due to the continuation of Covid, the educational programs in which FIG previously collaborated with the staff of AGED were discontinued. These programs were designed to educate the public about pooled special needs trust, as well as to promote FPGPSNT and will be resuming in FY 22-23.

Plans of the Organization for the Next Three Years

FIG looks forward to continuing to collaborate with the Office of the Public and Professional Guardians by supporting the goals of that office, and in accordance with the adopted goals and mission of the Department of Elder Affairs. FIG continues to encourage attorneys specializing in guardianship throughout the state to seek out their respective public guardians and offer pro bono services.

Additionally, for the coming fiscal years, FIG plans to focus on the following activities:

- 1. Continue to support OPPG and Florida's public guardianship programs to provide guardianship services to persons who do not have adequate income or assets to afford a private guardian and there are no willing family or friends to serve;
- 2. Finalize a website and expand advertising of the FPGPSNT;
- 3. Increase the number of board members in collaboration with OPPG;
- 4. Continue to recognize staff of the public guardianship offices for the work they do; and
- 5. Continue to focus on the accountability for FIG funding granted to public guardianship offices in collaboration with OPPG;

Code of Ethics

Attached is FIG's code of ethics that has been signed by each board member.

The most recent federal Internal Revenue Service Return of Organization Exempt from Income Tax form (Form 990) is attached as well as FIG's most recent audit.

Foundation for Indigent Guardianship, Inc.

4040 Esplanade Way, Tallahassee, FL 32399-7000

Code of Ethics

We are committed to act honestly, truthfully and with integrity in all of our transaction and dealings.

We are committed to avoid conflicts of interest and the appropriate handling of actual or apparent conflicts of interest in our relationships.

We are committed to treat every individual with dignity and respect.

We are committed to treat our employees with respect, fairness, and good faith and to provide conditions of employment that safeguard their rights and welfare.

We are committed to be a good corporate citizen and to comply with both the spirit and the letter of the law.

We are committed to act responsibly toward the communities in which we work and for the benefit of the communities that we serve.

We are committed to be responsible, transparent, and accountable for all of our actions.

We are committed to improve the accountability, transparency, ethical conduct and effectiveness of the nonprofit field.

ANNUAL CERTIFICATION OF COMPLIANCE WITH CONFLICT OF INTEREST POLICY Pursuant to F.S. 496.4055(2), the Foundation for Indigent Guardianship, Inc. has adopted the above policy regarding conflict of interest transactions. All directors, officers, and trustees of the charitable organization hereby certify compliance with the adopted policy.

	NAME	SIGNATURE	DATE
1.	Charles Alkire, President		7-11-2022
2.	Edward O'Sheehan, Vice President		
3.	Melinda Coulter, Treasurer		

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NAME

SIGNATURE

Charles

DATE

President

1.

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2. Celevanf OSh

<u>28 Jul 20</u>22 Melinda

O'Sheehan,

Vice

Alkire,

President

Coulter,

3. Treasurer

> A not-for-profit 501 (c)(3) charitable corporation Providing for Florida's most Vulnerable Citizens

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SIGNATURE

DATE

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2. Edward O'Sheehan, Vice President

3. Melinda Coulter, Treasurer

LANIGAN & ASSOCIATES, P. C. 2630 CENTENNIAL PLACE, SUITE 1 TALLAHASSEE, FL 32308

> FOUNDATION FOR INDIGENT GUARDIANSHIP, INC. 4040 ESPLANADE WAY, NO. 315M TALLAHASSEE, FL 32399-7000

TAX RETURN FILING INSTRUCTIONS

7

FORM 990

FOR THE YEAR ENDING

June 30, 2021

Prepared For:

Foundation for Indigent Guardianship, Inc. 4040 Esplanade Way No. 315M Tallahassee, FL 32399-7000

Prepared By:

Lanigan & Associates, P. C. 2630 Centennial Place, Suite 1 Tallahassee, FL 32308

Amount Due or Refund:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

Not applicable

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-EO to our office. We will transmit the return electronically to the IRS and no further action is required. Return Form 8879-EO to us by May 16, 2022

Form 8879-EO	IRS e-file Signature Authorizati	ion I	OMB No. 1545
Form 0013-EV	IRS e-file Signature Authorizati for an Exempt Organization		
	For calendar year 2020, or fiscal year beginning JUL 1 , 2020, and ending JU	JN 30 ,2021	000
Department of the Treasury Internal Revenue Service	Do not send to the IRS. Keep for your records.		202
Name of exempt organization	Go to www.irs.gov/Form8879EO for the latest information Or Derson subject to tax		
	R INDIGENT GUARDIANSHIP,	Taxpayer id	lentification num
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Name and title of officer or pe	rson subject to tax	IN 30 , 20 21 2020 ation. Taxpayer identification number 02-0763591 t, if any, from the return. If you g filed with this form was if you entered -0 on the 1b 246,931 2b 3b line 5) 4b 5b 6b 7b et to Tax berson subject to tax with respect to and that I have examined a edge and belief, they are copy of the electronic return. and that I have examined a edge and belief, they are copy of the electronic return. and that I have examined a edge and belief, they are copy of the electronic return. and that I have examined a edge and belief, they are copy of the electronic return. and the reason for any delay in and its designated Financial and the tax preparation ay to this account. To revoke ays prior to the payment ment of taxes to receive elected a personal if one enter my PIN	
MELINDA COULT	ER		
TREASURER			
Part I Type of I	Return and Return Information (Whole Dollars Only)		
blank, then leave line 1b, 2	rn for which you are using this Form 8879-EO and enter the applicable amoun 2a, 3a, 4a, 5a, 6a, or 7a below, and the amount on that line for the return bein 2b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, blank (do not enter -0-). But, applicable line below. Do not complete more than one line in Part I.		
1a Form 990 check have			
2a Form 990-EZ check he	X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	246,
3a Form 1120-POL check	Chere D Total tax (Form 1120,POL Line 22)	2b	- 10
4a Form 990-PF check he			
5a Form 8868 check here	Plante due (Form 8888, Ine 30)	E.h.	
6a Form 990-T check here		Ch	
7a Form 4720 check here Part II Declarate			
Under negative et aut	on and Signature Authorization of Officer or Person Subject	ct to Tax	
(name of organization)	declare that X I am an officer of the above organization or I am a p	person subject to tax wit	h respect to
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Form 8879-EO (2020)

Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

File by the due date for flag your return. See first or the organization does not have an office or place of business in the United States, check this box Number, street, and room or suite no. If a P.O. box, see instructions.	63591
The byte we date for the return street, and room or suite no. If a P.O. box, see instructions. 4040 ESPLANADE WAY, NO. 315M 4040 ESPLANADE WAY, NO. 315M City, town or post office, state, and ZIP code. For a foreign address, see instructions. TALLAHASSEE, FL 32399-7000 City, town or post office, state, and ZIP code. For a foreign address, see instructions. Application Return Application Return Is For Code Form 990 or Form 990-EZ 01 Form 990-BL 02 Form 1041-A Form 990-FF 04 Form 990-FF 04 Form 990-FF 04 Form 990-F 05 Form 990-F 06 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 990-T (sec. 401(a) or 408(a) trust) 06 Form 990-T (sec. 401(a) or 408(a) trust) 06 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 990-T (sec. 401(a) or 408(a) trust) 06 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 990-T (sec. 401(a) or 408(a) trust) 05	
City, town or post office, state, and ZIP code. For a foreign address, see instructions. TALLAHASSEE, FL 32399-7000 Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return Application Is For Code Is For Form 990 or Form 990-EZ 01 Form 990-T (corporation) Form 990-BL 02 Form 1041-A Form 990-BL 03 Form 4720 (other than individual) Form 990-FF 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 8870 Form 990-T (trust other than above) 06 Form 8870 MELINDA COULTER Fax No.	
Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return Application Is For Code Is For Form 990 or Form 990-EZ 01 Form 990-T (corporation) Form 990-BL 02 Form 1041-A Form 990-BL 03 Form 4720 (other than individual) Form 990-PF 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 Form 990-T (trust other than above) 06 Form 8870 MELINDA COULTER MELINDA COULTER • The books are in the care of ▶ 707 PARKER DRIVE - TALLAHASSE, FL 32304 • The organization does not have an office or place of business in the United States, check this box • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	01
Application Return Application Is For Code Is For Form 990 or Form 990-EZ 01 Form 990-T (corporation) Form 990-BL 02 Form 1041-A Form 990-PF 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 Form 990-T (trust other than above) 06 Form 8870 MELINDA COULTER • MELINDA COULTER • The books are in the care of ▶ 707 PARKER DRIVE - TALLAHASSE, FL 32304 • Telephone No. ▶ 850 - 445 - 3271 Fax No. ▶ • If the organization does not have an office or place of business in the United States, check this box	
Form 990 or Form 990-EZ 01 Form 990-T (corporation) Form 990-BL 02 Form 1041-A Form 990-BL 03 Form 4720 (other than individual) Form 990-PF 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 Form 990-T (trust other than above) 06 Form 8870 MELINDA COULTER 70.7 PARKER DRIVE - TALLAHASSE, FL 32304 Telephone No. ▶ 850-445-3271 Fax No. ▶	Code
Form 990 or Form 990-EZ 01 Form 990-T (corporation) Form 990-BL 02 Form 1041-A Form 990-PF 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 Form 990-T (trust other than above) 06 Form 8870 Form 990-T (trust other than above) 06 Form 8870 MELINDA COULTER 05 Form 8870 • The books are in the care of ▶ 707 PARKER DRIVE - TALLAHASSE, FL 32304 • The books are in the care of ▶ 707 PARKER DRIVE - TALLAHASSE, FL 32304 • If the organization does not have an office or place of business in the United States, check this box	07
Form 990-BL 02 Form 1041-A Form 4720 (individual) 03 Form 4720 (other than individual) Form 990-PF 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 Form 990-T (trust other than above) 06 Form 8870 Form 990-T (trust other than above) 06 Form 8870 Form 990-T (trust other than above) 06 Form 8870 Form 990-T (trust other than above) 06 Form 8870 Form 990-T (trust other than above) 06 Form 8870 Image: the care of ▶ 707 PARKER DRIVE - TALLAHASSE, FL 32304 Telephone No. ▶ 850-445-3271 Fax No. ▶ If the organization does not have an office or place of business in the United States, check this box	08
Form 4720 (individual) 03 Form 4720 (other than individual) Form 990-PF 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 Form 990-T (trust other than above) 06 Form 8870 Form 990-T (trust other than above) 06 Form 8870 MELINDA COULTER • TallAHASSE, FL 32304 • Telephone No. ► 850 - 445 - 3271 Fax No. ► • If the organization does not have an office or place of business in the United States, check this box	09
Form 990-PF 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 Form 990-T (trust other than above) 06 Form 8870 Form 990-T (trust other than above) 06 Form 8870 MELINDA COULTER 05 Form 8870 • The books are in the care of ▶ 707 PARKER DRIVE - TALLAHASSE, FL 32304 • Telephone No. ▶ 850-445-3271 Fax No. ▶ • If the organization does not have an office or place of business in the United States, check this box	10
Form 990-T (sec. 401(a) of 400(a) (red); 06 Form 8870 MELINDA COULTER • The books are in the care of ▶ 707 PARKER DRIVE - TALLAHASSE, FL 32304 • Telephone No. ▶ 850-445-3271 Fax No. ▶ • If the organization does not have an office or place of business in the United States, check this box	11
Form 990-T (trust other than above) 06 Form 8870 MELINDA COULTER • The books are in the care of ▶ 707 PARKER DRIVE - TALLAHASSE, FL 32304 Telephone No. ▶ 850-445-3271 Fax No. ▶ • If the organization does not have an office or place of business in the United States, check this box • • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the group, check this box ▶ • If the organization named above. The extension of time until the organization named above. The extension is for the organization's return for: MAY 16, 2022 , to file the exempt organization's return for:	12
MELINDA COULTER • The books are in the care of ▶ 707 PARKER DRIVE - TALLAHASSE, FL 32304 • Telephone No. ▶ 850-445-3271 • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and TINs of all members the extension of time until the organization named above. The extension is for the organization's return for: ▶	1 12
 Telephone No. ▶ 850-445-3271 Fax No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and TINs of all members the extension of time until MAY 16, 2022 , to file the exempt organization's return for: 	
 Calendar year of of and ending JUN 30, 2021 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period 	
3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 3a \$	0
any nonrefundable credits. See instructions. 3a \$ b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$	0
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by 3c \$	0
using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$ Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 88 instructions. LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form	79-EO for payment

		Return of Organization Exempt	From I	ncome Tax	OMB No. 1
		Childer Section 50 (C), 527, or 4947(a)(1) of the Internal Revenue	e Corle (eve	ant primte formalation	ns) 20 2
1	nternal Revenue Service	Go to www.irs.gov/Form990 for instructions on	as it may b	e made public.	Open to
4	A For the 2020 cal			UN 30, 2021	Inspec
E	Check if C Nam	e of organization	Chang U		
[Address FO	UNDATION FOR INDIGENT GUARDIANSHIP,	5.4	D Employer identific	cation number
[Name change Doin	g business as		00.0550	
[return Num	bot and almost (as D.O. b., 11	Danas In 11	02-076359	
B Check if applicable: C Nar C Address Name Change Doi Num Prinal return Prinal Pri	LU ESPLANADE WAY	Room/suite 315M	E Telephone number 850-414-2	2129	
Г	Amended TAT	or town, state or province, country, and ZIP or foreign postal code LAHASSEE, FL 32399-7000		G Gross receipts \$	246,
ī	Applica- tion E Name	and address of principal officer: MELINDA COULTER		H(a) Is this a group ret	um
Ŧ	pending 707	PARKER DRIVE, TALLAHASSE, FL 32303		for subordinates? H(b) Are all subordinates incl	
- j	Website: WWW	: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) o • GUARDIANSHIPFOUNDATION • ORG	r 527	If "No," attach a li	st. See instructio
ĸ	Form of organization	V Gauge with the second s		H(c) Group exemption	number 🕨
P	Part I Summar	X Corporation Trust Association Other	L Year of	formation: 2005 M	State of legal dom
	1 Briefly desc	ribe the organization's mission or much in the second second			
ę	STATEW	ribe the organization's mission or most significant activities: PROVI	DES FU	NDING TO THI	E FLORIDA
	2 Check this h	IDE PUBLIC GUARDIANSHIP DEPARTMENT (OF ELDI	SR AFFAIRS W	HICH
101	3 Number of v	box [] if the organization discontinued its operations or dispose	d of more th	nan 25% of its net asset	ts.
Ĝ	A Number of v	oung members of the doverning body (Part VI line 1a)			
2	B Total	ruependent voting members of the doverning body (Part VI line 1b)			
ies	5 Total numbe	v inuiviudis elluloved in calendar vear 2020 (Dart V, line on)			
livi	6 lotal numbe	or volumeers (estimate if necessary)		6	
Ac	7 a Total unrelat				
	b Net unrelated	d business taxable income from Form 990-T, Part I, line 11		·····	
	8 Contribution			Prior Year	
Ð		s and grants (Part VIII, line 1h)			
enue	1 Program serv	s and grants (Part VIII, line 1h) vice revenue (Part VIII, line 2g)		239,127.	
evenue	1 Program serv	rice revenue (Part VIII, line 20)		239,127.	
Revenue	10 Investment in	ice revenue (Part VIII, line 2g) icome (Part VIII, column (A), lines 3, 4, and 7d)		239,127. 0. 23.	
Revenue	10 Investment in 11 Other revenue	ice revenue (Part VIII, line 2g) icome (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		239,127. 0. 23. 0.	246,9
Revenue	10 Investment in 11 Other revenue 12 Total revenue	ice revenue (Part VIII, line 2g) icome (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) - add lines 8 through 11 (must equal Part VIII, column (A), line 12) milar amounts paid (Part V), acknow (A), fine 12)		239,127. 0. 23. 0. 239,150.	246,9
Revenue	 10 Investment in 11 Other revenue 12 Total revenue 13 Grants and si 	ice revenue (Part VIII, line 2g) icome (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) - add lines 8 through 11 (must equal Part VIII, column (A), line 12) milar amounts paid (Part IX, column (A), lines 1-3) to 0 f for member (Part IX, column (A), lines 1-3)		239,127. 0. 23. 0. 239,150. 49,325.	246,9
_	 Program service Investment in Other revenue Total revenue Grants and si Benefits paid 	ice revenue (Part VIII, line 2g) icome (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) - add lines 8 through 11 (must equal Part VIII, column (A), line 12) milar amounts paid (Part IX, column (A), lines 1-3) to or for members (Part IX, column (A), line 4)		239,127. 0. 23. 0. 239,150. 49,325. 0.	246,9
_	 Program service Investment in Other revenue Total revenue Grants and si Benefits paid 	ice revenue (Part VIII, line 2g) icome (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) and lines 8 through 11 (must equal Part VIII, column (A), line 12) milar amounts paid (Part IX, column (A), lines 1-3) to or for members (Part IX, column (A), line 4) r compensation, employee benefits (Part IX, column (A), line 5, 10)		239,127. 0. 23. 0. 239,150. 49,325. 0. 0.	246,9
_	 Program service Investment in Other revenue Total revenue Grants and si Benefits paid 	ice revenue (Part VIII, line 2g) icome (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <u>- add lines 8 through 11 (must equal Part VIII, column (A), line 12)</u> milar amounts paid (Part IX, column (A), lines 1-3) to or for members (Part IX, column (A), line 4) r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e)		239,127. 0. 23. 0. 239,150. 49,325. 0.	246,9
_	 Program service Investment in Other revenue Total revenue Grants and si Benefits paid Salaries, othe Professional fi b Total fundrais 	ice revenue (Part VIII, line 2g) icome (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) - add lines 8 through 11 (must equal Part VIII, column (A), line 12) milar amounts paid (Part IX, column (A), lines 1-3) to or for members (Part IX, column (A), line 4) r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25)		239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0.	246,9
_	 10 Investment in 11 Other revenue 12 Total revenue 13 Grants and si 14 Benefits paid 15 Salaries, othe 16a Professional f b Total fundrais 17 Other expense 	ice revenue (Part VIII, line 2g) icome (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 		239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0.	<u>Current Yea</u> 246,9 246,9 107,0
_	 10 Investment in 11 Other revenue 12 Total revenue 13 Grants and si 14 Benefits paid 15 Salaries, othe 16 Professional fi b Total fundrais 17 Other expense 18 Total expense 	ice revenue (Part VIII, line 2g) icome (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) - add lines 8 through 11 (must equal Part VIII, column (A), line 12) milar amounts paid (Part IX, column (A), lines 1-3) to or for members (Part IX, column (A), line 4) r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) es (Part IX, column (A), lines 11a-11d, 11f-24e) s. Add lines 13-17 (must equal Part IX, column (A) line 25)		239,127. 0. 23. 0. 239,150. 49,325. 0. 0.	246,9 246,9 107,0
Expenses	 10 Investment in 11 Other revenue 12 Total revenue 13 Grants and si 14 Benefits paid 15 Salaries, othe 16 Professional fi b Total fundrais 17 Other expense 18 Total expense 	ice revenue (Part VIII, line 2g) icome (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) - add lines 8 through 11 (must equal Part VIII, column (A), line 12) milar amounts paid (Part IX, column (A), lines 1-3) to or for members (Part IX, column (A), line 4) r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) es (Part IX, column (A), lines 11a-11d, 11f-24e) s. Add lines 13-17 (must equal Part IX, column (A) line 25)		239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0. 25,136. 74,461.	246,9 246,9 107,0 107,1 117,1
or Expenses	 Program service Investment in Other revenue Total revenue Grants and si Benefits paid Salaries, othe Salaries, othe Professional fi Total fundrais Other expense Total expense Revenue less 	ince revenue (Part VIII, line 2g) income (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) e add lines 8 through 11 (must equal Part VIII, column (A), line 12) milar amounts paid (Part IX, column (A), lines 1-3) to or for members (Part IX, column (A), line 4) r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) S. Add lines 13-17 (must equal Part IX, column (A), line 25) expenses, Subtract line 18 from line 12	Beginn	239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0. 0. 25,136. 74,461. 164,689.	246,9 246,9 107,0 107,0 117,10 129,7
ssets or Expenses	 Program service Investment in Other revenue Total revenue Grants and si Benefits paid Salaries, othe Salaries, othe Professional fi b Total fundrais Other expense Revenue less Total assets (F 	And the second secon	Beginn	239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0. 0. 25,136. 74,461. 164,689. ing of Current Year	246,9 246,9 107,0 107,0 117,10 129,7 End of Year
Assets or Expenses	 10 Investment in 11 Other revenue 12 Total revenue 13 Grants and si 14 Benefits paid 15 Salaries, othe 16 Professional f b Total fundrais 17 Other expense 19 Revenue less of 20 Total assets (F 21 Total liabilities 	And the second secon	Beginn	239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0. 0. 25,136. 74,461. 164,689. ing of Current Year 248,451.	246,9 246,9 107,0 107,0 117,10 129,7' End of Year 381,4'
Net Assets or Expenses	 Fridgram service Investment in Other revenue Total revenue Grants and si Benefits paid Salaries, othe Salaries, othe Professional f Total fundrais Other expense Revenue less of Total assets (F Total liabilities Net assets or f 	Add lines 13-17 (must equal Part IX, column (A), lines 114, line 25) Add lines 8 through 11 (must equal Part VIII, column (A), line 12) add lines 8 through 11 (must equal Part VIII, column (A), line 12) milar amounts paid (Part IX, column (A), lines 1-3) to or for members (Part IX, column (A), line 4) r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) S. Add lines 13-17 (must equal Part IX, column (A), line 25) es (Part X, line 13 from line 12 Part X, line 16) (Part X, line 26) und balances, Subtract line 21 from line 20	Beginn	239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0. 25,136. 74,461. 164,689. ing of Current Year 248,451. 0.	246,9 246,9 107,0 107,0 117,1 129,7 End of Year 381,4 3,25
The Assets or Expenses	 10 Investment in 11 Other revenue 12 Total revenue 13 Grants and si 14 Benefits paid 15 Salaries, othe 16a Professional f 16 Total fundrais 17 Other expense 19 Revenue less 20 Total assets (F 21 Total liabilities 22 Net assets or f 11 Signature 	And the second secon	Beginn	239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0. 0. 25,136. 74,461. 164,689. ing of Current Year 248,451. 0. 248,451.	246,9 246,9 107,0 107,0 117,1 129,7 End of Year 381,4 3,2! 378,22
The Assets or Expenses	 10 Investment in 11 Other revenue 12 Total revenue 13 Grants and si 14 Benefits paid 15 Salaries, othe 16 Professional f 17 Other expense 18 Total fundrais 17 Other expense 19 Revenue less 20 Total assets (F 21 Total liabilities 22 Net assets or f til Signature penalties of perjury, I 	ince revenue (Part VIII, line 2g) income (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	Beginn	239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0. 0. 25,136. 74,461. 164,689. ing of Current Year 248,451. 0. 248,451.	246,9 246,9 107,0 107,0 117,1 129,7 End of Year 381,4 3,2! 378,22
Final 4040 City or tr Amended Pending F Name ar Poplica- F Name ar pending F Name ar J Website: WWW.0 K Form of organization: Part I Summary 1 Briefly describe STATEWII 2 Check this box 3 Number of inde 5 Total number of 6 Total number of 7 a Total number of 7 a Total number of 7 a Total number of 9 Program service 10 Investment inco 11 Other revenue (F 12 Total fundraising 17 Other expenses (18 Total sard simili 14 Benefits paid to f 15 Salaries, other ca 16a Professional fund b Total assets (Part 20 Total assets (Part 21 Total liabilities (Part 22 Net assets or fund <td< td=""><td>ince revenue (Part VIII, line 2g) income (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td><td>Beginn</td><td>239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0. 0. 25,136. 74,461. 164,689. ing of Current Year 248,451. 0. 248,451.</td><td>246,9 246,9 107,0 107,0 117,10 129,7 End of Year 381,4 3,25 378,22</td></td<>		ince revenue (Part VIII, line 2g) income (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	Beginn	239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0. 0. 25,136. 74,461. 164,689. ing of Current Year 248,451. 0. 248,451.	246,9 246,9 107,0 107,0 117,10 129,7 End of Year 381,4 3,25 378,22
The contracts or the contracts or the contracts of the contract of the contrac	 10 Investment in 11 Other revenue 12 Total revenue 13 Grants and si 14 Benefits paid 15 Salaries, othe 16a Professional fi b Total fundrais 17 Other expense 18 Total expense 19 Revenue less 20 Total assets (F 21 Total liabilities 22 Net assets or f til Signature penalties of perjury, I 	And the second secon	Beginn	239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0. 0. 25,136. 74,461. 164,689. ing of Current Year 248,451. 0. 248,451.	246,9 246,9 107,0 107,0 117,10 129,7 End of Year 381,4 3,25 378,22
The contracts or the contracts or the contracts of the contract of the contrac	 10 Investment in 11 Other revenue 12 Total revenue 13 Grants and si 14 Benefits paid 15 Salaries, othe 16a Professional f 17 Other expense 19 Revenue less 20 Total assets (F 21 Total liabilities 22 Net assets or f 11 Signature correct, and complete. 	A come (Part VIII, line 2g) A come (Part VIII, column (A), lines 3, 4, and 7d) A come (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) A comparison of the equal Part VIII, column (A), line 12 A milar amounts paid (Part IX, column (A), lines 1-3) to or for members (Part IX, column (A), line 4) r compensation, employee benefits (Part IX, column (A), lines 5-10) A comparison of the examined this return, including accompanying schedules and Declaration of preparer (other than officer) is based on all information of which point of officer	Beginn	239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0. 0. 25,136. 74,461. 164,689. ing of Current Year 248,451. 0. 248,451. and to the best of my know	246,9 246,9 107,0 107,0 117,10 129,7 End of Year 381,4 3,25 378,22
Under true, c Sign	 10 Investment in 11 Other revenue 12 Total revenue 13 Grants and si 14 Benefits paid 15 Salaries, othe 16 Professional f 17 Other expense 18 Total fundrais 17 Other expense 19 Revenue less 20 Total assets (F 21 Total liabilities 22 Net assets or f til Signature penalties of perjury, I correct, and complete. 	Income (Part VIII, line 2g) Income (Part VIII, column (A), lines 3, 4, and 7d) Income (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Income add lines 8 through 11 (must equal Part VIII, column (A), line 12) Imilar amounts paid (Part IX, column (A), lines 1-3) to or for members (Part IX, column (A), line 4) In compensation, employee benefits (Part IX, column (A), lines 5-10) In undraising fees (Part IX, column (A), line 11e) Ing expenses (Part IX, column (D), line 25) Ing expenses, Subtract line 18 from line 12 Part X, line 16) (Part X, line 26) Ing balances, Subtract line 21 from line 20 Ing balances, Subtr	Beginn	239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0. 0. 25,136. 74,461. 164,689. ing of Current Year 248,451. 0. 248,451.	246,9 246,9 107,0 107,0 117,10 129,7 End of Year 381,4 3,25 378,22
Under true, c Sign	 10 Investment in 11 Other revenue 12 Total revenue 13 Grants and si 14 Benefits paid 15 Salaries, othe 16 Professional f 17 Other expense 18 Total fundrais 17 Other expense 19 Revenue less 20 Total assets (F 21 Total liabilities 22 Net assets or f til Signature penalties of perjury, I correct, and complete. 	And the second secon	Beginn	239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0. 0. 25,136. 74,461. 164,689. ing of Current Year 248,451. 0. 248,451. and to the best of my know	246,9 246,9 107,0 107,0 117,10 129,7 End of Year 381,4 3,25 378,22
Under true, c Sign	 Program service Investment in Other revenue Grants and si Grants and si Benefits paid Salaries, othe Salaries, othe Professional f Total fundrais Other expense Total expense Revenue less Total assets (F Total assets of f Signature Signature MELTN Type or pr 	And the second seco	Beginn	239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0. 0. 25,136. 74,461. 164,689. ing of Current Year 248,451. 0. 248,451. and to the best of my know iny knowledge. Date	246,9 246,9 107,0 107,0 117,10 129,7 End of Year 381,4 3,25 378,22 Wledge and belief, f
Expenses Under true, c Sign Here	 Program service Investment in Other revenue Total revenue Grants and si Benefits paid Salaries, othe Salaries, othe Professional fi Total fundrais Other expense Total expense Revenue less Total assets (F Total assets of f Signature Signature MELIN Type or pr 	Income (Part VIII, column (A), lines 3, 4, and 7d) income (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) income (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) income (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) income (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) income (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) indication int name and title int name and title	Beginn	239,127. 0. 23. 0. 239,150. 49,325. 0. 0. 0. 0. 25,136. 74,461. 164,689. ing of Current Year 248,451. 0. 248,451. and to the best of my know uny knowledge. Date	246,9 246,9 107,0 107,0 117,10 129,7 End of Year 381,4 3,25 378,22

	INDIALASSEE, FD 32308	Phone no. 850-8
May the IRS di	scuss this return with the preparer shown above? See instructions	Filone 10,0 J 0-0;
	above? See instructions	
032001 12-23-20	LHA For Paperwork Reduction Act Notice, see the separate instructions.	
SEE	SCHEDULE O FOR ORGANIZATION MISSION STATEMEN	T CONTINUATION

X	Yes	No
		-

Form 990 (2020)

	FOUNDATION FOR INDIGENT GUARDIANSHIP, 02-0763591 Page 2
orm	000 (0000) NC.
Par	Check if Schedule O contains a response or note to any line in this Part III
_	Check if Schedule O contains a response or note to any line in this Part in
1	Briefly describe the organization's mission: PROVIDES FUNDING TO THE FLORIDA STATEWIDE PUBLIC GUARDIANSHIP
	A THE AT A THE ATTACK WITCH SKRVKS UISABLED INDIVIDUADO DICLASS
	DEPARTMENT OF ELDER AFFAIRS WHICH DERVED DEDUTED INCAPACITATED AND PLACED UNDER THE PROTECTION OF A COURT-APPOINTED
	INCAPACITATED AND FLACED ONDER THE INCODE
	PUBLIC GUARDIAN. Did the organization undertake any significant program services during the year which were not listed on the Yes X No
2	Did the organization undertake any signmeant program services during the year which not
	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
3	n an Anna Anna Anna Anna Anna Anna Anna
	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses, and
4	Describe the organization's program service accomplishments for each of the three lagest programs to others, the total expenses, and 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
	Section 501(c)(3) and 501(c)(4) organizations are required to toport sho another organization
_	revenue, if any, for each program service reported.
4a	(Code /LEAST AND THE ALLOCATIONS TO THE PUBLIC GUARDIANS IN TEN
	TOTAL CONTRACT AND TOTAL AND TOTAL AND THE STATEMENT FUDITO CONTRACTATIONS
	THE PROPERTY AND DRAWTING FUNDING WOR THE FUDDLL GUARDING FILLOWING FURDING
	THE THE PRESENCE AND DECOMPTER FOR THE LIKE, REALTH, AND CAME OF
	THE PUBLIC GUARDIANS ARE RESPONSIBIL FOR THE FLORIDA JUDICIARY FOR THE WARDS ASSIGNED TO THE PUBLIC GUARDIAN BY THE FLORIDA JUDICIARY FOR
	THE WARDS ASSIGNED TO THE FOREST
	THAT COUNTY.
_	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4b	(Code:) (Expenses \$ including grains of \$
	а
_	(contraction and the second se
40	Code:) (Expenses \$ Including grants or \$ / Note that the second se
4	d Other program services (Describe on Schedule O.)
	including grants of \$ (Revenue \$
4	(Expenses \$ 107,080. Form 990 (2020)
	I Olimetet (Zozo

[Part IV Checklist of Required Schedules	635	91	F	Page 3
	1 Is the organization described in section 501(a)(2) or 4047(a)(4) (a)the stress of the stress of the section 501(a)(2) or 4047(a)(4) (a)the stress of the stress o	_		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				
	 If "Yes," complete Schedule A	. L	1	X	
	3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? (# "Yoo " complete Octoor of the opposition of	L	2		X
	The second of the rest complete Schedule C. Part I				
			3		<u>X</u>
	- The second secon	ct			
			4		X
	and an its as a since an its active Flocedule 98-197 If Voo Loomalate Oak at a since				-
			5		<u>X</u>
	in the dation of the distribution of investment of amounts in such funde or accounted	, .			v
			3		X
	instone land areas. Or historic structurge? Is when the method is a	17	.		X
	of the similar concerns of works of art, historical treasures, or other similar concerna, which is		+	-+	-
		8			x
4	of the second state of the second sec	F	+	-	
	and the notice in the art A, or provide credit counseling, debt management, credit repair, or debt paratietite and the				
10	" ros, complete schedule D, Part IV	9			x
	a second of an every of a reaction of the second in a second		+	-	
11	or in quasi endowments? If "Yes," complete Schedule D. Part V	10			X
• •	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.			NE D	1000
		2.42	-	18	CT IS
	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		Т		
		11a			X
			T		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	116			X
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	110			X
e	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d			K
f	The second magnitudes in Fart A, inter 201 if "Yes" complete Schedule D. Dent V	11e		2	K
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X	111	X		-
b	Schedule D, Parts XI and XII	12a	X	_	
	If "Yes," and if the organization answered "No" to line 120, then according to the second time of the tax year?				
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b	_	X	
14a	The second of th	13		X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from our the standard the	14a		X	_
	and program service activities outside the United States or oppressite feature to a				
	1 co, complete schedule F. Parts Land N/			1.	
15		14b			-
	Schedule F. Parts II and IV	40		1.	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15	-		-
	The second	- 40			
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		X	-
	(4) Intel o and the II res. complete Schedule G. Port I	47		x	
		17	-		-
	The second	18		x	
	a structure of the state of 0,000 of gross income from gaming activities on Dort VIII. Enc. 0-0	10	-		-
	somplete Schedule G. Part II	19		x	
		20a		X	-
	and a second a copy of its another than the second of the second	206	-		•
	and the organization report more than \$5,000 of grante or other applicate as the second				-0.
	somestic government on Part IX, column (A), jine 1? If "Yes " complete Schedule L During the set	21	x		

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Form	990 (2020) INC. 02-0783	<u> </u>	Fa	10 .
Par	t IV Checklist of Required Schedules (continued)		Yes	No
			103	140
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22		X
	manufacture (a) Vice 00 ((IV/ce II complete Schodule Parts and III			
23	Did the emperiation answer "Ves" to Part VII. Section A, line 3, 4, or 5 about compensation of the organization of our entering			
	and former officers, directors, trustees, key employees, and highest compensated employees? If yes, complete	23		X
	Schedule J			
2 4a	Schedule J			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	24a		X
	Schedule K. If "No," go to line 25a	24b		
b	Schedule K. If "No," go to line 25a			
c	Did the organization invest any process of taxes on the borner borne	24c		
	any tax-exempt bonds?	24d		
d	any tax-exempt bonds?			
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		X
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I			
b	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	25b		X
	Schedule L, Part I			
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	1		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		X
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II			
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	Did the organization provide a grant or other association to any extreme for a grant selection committee member, or to a 35% controlled creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	27	-	X
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III			
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	100	16 21	- 18
	instructions, for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	28a		X
	"Yes, " complete Schedule L, Part IV	28b		X
ł	"Yes, " complete Schedule L, Part IV			
c	A farming member of any individual deterior individuals and/or organizations described in lines 28a or 28b? If	280		X
	"Yes, " complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	. 29	-	X
29	Did the organization receive more than \$25,000 in non-cash contributions if the similar assets, or qualified conservation Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
30	Did the organization receive contributions of art, historical deasards, of other children and a	30	-	X
	contributions? If "Yes," complete Schedule M	. 31	-	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes, " complete Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
32	Did the organization sell, exchange, dispose of, or transfer more than 2010 of the first and the second s	32		X
	Did the organization sell, exchange, dispessed, or random and the organization under Regulations Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
33	bid the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity dislegated as soparate into the organization own 100% of an entity disleg	. 33	4	X
	Sections 301.7701-2 and 301.7701-37 if "Yes," complete Schedule II, I are supported to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			1
34	Part V, line 1	34	-	X
	Part V, line 1	35	a	X
35	 b) If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity 			
	the second	. 35	b	
	The second s			
36		. 36	3	X
	and the standard more than 5% of its activities through an entity that is not a related organization			1.77
37	Lite the transferd as a partnership for faderal income tax purposes? If "Yes," complete Schedule R, Fall VI	37	4	X
	and provide explanations in Schedule O and provide explanations in Schedule O for Part VI, lines 110 and 10.			
38	All Come 000 filere are required to complete Schedule O		BX	
	Part V Statements Regarding Other IRS Filings and Tax Compliance			
1	Check if Schedule O contains a response or note to any line in this Part V			- <u> </u>
_			Ye	s No
	1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0	200	Elone
	The second discrete the se	0		語行
	of the arrangements to vehicles and reportable garming	128	178 12 (2)	
	c Did the organization comply wan backap wanterens, the		C	

(gambling) winnings to prize winners?

	Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)	0.0.	100	-	P
	(continued)	_		_	-
	2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	ſ		Yes	-
	filed for the calendar year ending with or within the year environd hugh the method			1	ł
	b if at least one is reported on line 2a, did the organization file all required to have	0		2.00	ł
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b		ļ
:	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)		1.0.	San F	l
	 b If "Yes," has it filed a Form 990-T for this year? (# We "to "to "to "to "to "to "to "to "to "to		3a		ļ
	To line 3D. Drovide an explanation on Scherule O		3b		
	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	- 1			l
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	L	4a		L
	b If "Yes," enter the name of the foreign country	_ 1	Print R	and a	ſ
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		316	관음	
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	. L	5a		
	b Did any taxable party notity the organization that it was or is a party to a prohibited tax shelter transaction?		5b		
	c in res to line 52 or 50, did the organization file Form 8886-T?		5c		[
6	a boost the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	Г			Ī
	any contributions that were not tax deductible as charitable contributions?		6a		
	The res, did the organization include with every solicitation an express statement that such contributions or offe		-		1
	were not tax deductible?		6b		
7	organizations that may receive deductible contributions under section 170(c).			165	l
1	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payer	2	7a	and the second	
	Trives, "did the organization notify the donor of the value of the goods or services provided?		7b		1
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	· -			ī
	to file Form 8282?	1.	,		
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	19	7c	REAL R	
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a semanal house the set				1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		e		-
ç	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		74	-+	-
ł	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	· -	g	-	-
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	17	'n	Sec. 1	-
	sponsoring organization have excess business holdings at any time during the year?	1000		12912	
9	Sponsoring organizations maintaining donor advised funds.		3	-	÷
а	Did the sponsoring organization make any taxable distributions under section 4966?	199	1	8.10	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9	a	-	_
10	Section 501(c)(7) organizations. Enter:	9	b	_	
а	Initiation fees and capital contributions included on Dert VIII line to				
	Initiation fees and capital contributions included on Part VIII, line 12	198		Stores.	
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1000	学校		
a	Gross income from members as a web at the	10.3			
	Gross income from members or shareholders	16	215		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			193	
120	amounts due or received from them.)	1	同论	5	
128 L	Section 4347 (a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10412	12	a		
12	12h	101	1	11	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	194		13-142	
a	Is the organization licensed to issue qualified health plans in more than one state?	13		-	f
	Note: Gee the instructions for additional information the organization must report on Schedule O		1	3	Ĩ
b	Enter the amount of reserves the organization is required to maintain by the states in which the	Sale	1	Re	
	organization is licensed to issue qualified health plans		- Sal	1	
C	Enter the amount of reserves on hand	12	1		
1ªtd	Did the organization receive any payments for indoor tanning services during the tax year?	4.4-	1	X	111 2
b	ff "Yes," has it filed a Form 720 to report these payments? /f "No." provide an explanation on Schedule O	142		1-1	•
	o the organization subject to the section 4900 tax on payment(s) of more than \$1,000,000 in remuneration or	146	-	+-	-
	excess parachute payment(s) during the year?		1-	1	,
	f "Yes," see instructions and file Form 4720, Schedule N.	15	4 - 351 - 3	X	
	s the organization an educational institution subject to the section 4968 excise tax on net investment income?	12.15	a series	1	
	f "Yes," complete Form 4720, Schedule O.	16	-	X	,
			A CALL R	Smill	

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Form	990 (2020) INC.	02-076			ge b
Parl	VI Governance, Management, and Disclosure For each "Yes" response to lines 2 thr	rough 7b below, and for	a "No" res	sponse	•
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI				X
Sect	ion A. Governing Body and Management				
				Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year	1a	3	and I	
102	If there are material differences in voting rights among members of the governing body, or if the governing			LOT LA	
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.		Sec.	8.6	
L.	Enter the number of voting members included on line 1a, above, who are independent	tb	3	124	
0	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with any other	-		
	officer, director, trustee, or key employee?		2		<u>X</u>
•	Did the organization delegate control over management duties customarily performed by or under the	e direct supervision			
3	of officers, directors, trustees, or key employees to a management company or other person?	•	3		<u>X</u>
	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was filed?	4		X_
4	Did the organization become aware during the year of a significant diversion of the organization's ass	iets?	5		X
5			6		X
6	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or ap	noint one or			
7a	Did the organization have members, stockholders, of other persons who had the power to elect of the		7a		X
	more members of the governing body?	tockholders or			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st		7b		X
	persons other than the governing body?	ar by the following:	STAR.		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	at by the following.	8a	X	
а	The governing body?	***************************************	8b	X	
b	Each committee with authority to act on behalf of the governing body?				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	iched at the	9		x
_	organization's mailing address? If "Yes." provide the names and addresses on Schedule O				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue Code.)		Vee	No
			400	Yes	X
1 0a	Did the organization have local chapters, branches, or affiliates?		. <u>10a</u>		44
b	If "Yes," did the organization have written policies and procedures governing the activities of such cl	napters, affiliates,	401		
	and branches to ensure their operations are consistent with the organization's exempt purposes?			X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	ly before filing the form?	<u>11a</u>	-	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		A1 201	v	1961-1
1 2a	Did the organization have a written conflict of interest policy? If "No," go to line 13		. 12a	X	
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to conflicts?	<u>12b</u>		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," describe			
-	in Schedule O how this was done		. <u>12c</u>	X	37
13	Did the organization have a written whistleblower policy?		. 13		X
14	Did the organization have a written document retention and destruction policy?		14		X
15	Did the process for determining compensation of the following persons include a review and approv	al by independent	States.	Circle)	
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	2	1 at the	Syn-	Call of the
а	The second		<u>15a</u>		X
b	out the second second of the organization		. 15b		X
, D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				13.5
46-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment with a	<u>10</u>		
	taxable entity during the year?		. 16a		X
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate its participation			1 Arts
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	anization's	a dest		0.12
	exempt status with respect to such arrangements?		16b		
Red	exempt status with respect to such analgements				
-	List the states with which a copy of this Form 990 is required to be filed FL				
17	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990,	and 990-T (Section 501(c)(3)s only) avail	able
18	for public inspection. Indicate how you made these available. Check all that apply.		-		
	With Other fund	ain on Schedule O)			
	Own website Another's website X Upon request Other (explain Describe on Schedule O whether (and if so, how) the organization made its governing documents, or		, and final	ncial	
19	Describe on Schedule O whether (and if so, now) the organization made its governing documents, t				
	statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's b	ooks and records			
20	State the name, address, and telephone number of the person who possesses the organization's b				
	MELINDA COULTER - 850-445-3271 707 PARKER DRIVE, TALLAHASSE, FL 32304				
	U/ PAKASK DALVE, TANDARADDE, PD 32304			00	0.0000

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Down A ATT	0		02-0763
Part VII	Compensation of Officers	Directors, Trustees, Key Employees,	02-070.
		Directors, mustees, key Employees.	Highest Compensated
	Employees, and Independ	ant Contractors	
	and machenia		

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, and 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.

X 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	(C) Position (do not check more than one box, unless person is both at officer and a director/trustee						Compensation	(E) Reportable compensation from related	(F) Estimated amount of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	other Compensation from the organization and related organizations
(1) MELINDA COULTER	1.00									
TREASURER				X				0.	0.	0.
(2) CHARLES ALKIRE PRESIDENT	1.00	•		T						
(3) EDWARD O'SHEEHAN ESQUIRE	1.00	-	-	X	-	-	-	0.	0.	0.
VICE-PRESIDENT	1.00	-	_	X				0.	0.	0.
		-	_	_	_	_	_			1
<u></u>		+	+	-	-	-	-			
			1	1	1					
				-						
					T					
				T			T			
			T	T	T	T	T			
		T	T	T	T	T	T			
		T	T	T	T	1	T			

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(A) Name and title	(B) Average hours per week	(do i	not ch unles	(C Posi leck n s pers	tion nore the	han on both a /truste	ie an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estima amour oth	ated nt of er
	(list any hours for related organizations below line)	hours for the particulation (M related asset the particulation (W-2/1099-MISC) ganizations the particulation (W-2/1099-MISC)		organizations (W-2/1099-MISC)		compensatio from the organizatior and related organization						
	_	-	_			-	+			+		-
		-			-					1		
										T		
		t	T									
		T		T	T							
		T	T	T								
		-										
		-	-	-	-			0.		-		0
b Subtotal							5				1	0
c Total from continuation sheets to P	Part VII, Section A							0.	. 0).		
c Total from continuation sheets to P d Total (add lines 1b and 1c) Total number of individuals (including	Part VII, Section A							0.	. 0			0
c Total from continuation sheets to P d Total (add lines 1b and 1c) 2 Total number of individuals (including compensation from the organization	Part VII, Section A	hose	e list	ed a	bove	e) wh		0 a 0 a acceived more than \$100	0 0,000 of reportable		Y	0 0 /es N
 c Total from continuation sheets to P d Total (add lines 1b and 1c) compensation of individuals (including compensation from the organization Did the organization list any former of individuals (including compensation lincline)) 	but not limited to the section A	hose	e list	ed a emp	bove	e) wh	no re	0 . 0 . ceived more than \$100 hest compensated em	0,000 of reportable		3	0
 c Total from continuation sheets to P d Total (add lines 1b and 1c) 2 Total number of individuals (including compensation from the organization 3 Did the organization list any former of line 1a? <i>If</i> "Yes," complete Schedule 	but not limited to the sum of reportal	hose tee,	key	ed a emp	bove	e) wh ee, or	r hig	0 a ceived more than \$100 hest compensated em	0,000 of reportable		1. 1.	() (es N
 c Total from continuation sheets to P d Total (add lines 1b and 1c) 2 Total number of individuals (including compensation from the organization 3 Did the organization list any former of line 1a? <i>If</i> "Yes," complete Schedule 4 For any individual listed on line 1a, is 	but not limited to the sum of reportation of reportation of the sum of the su	tee,	key	ed a emp	bove	e) wh ee, or n and	r hig	0 a occived more than \$100 phest compensated em her compensation from for such individual	0,000 of reportable		1. 1.	O Yes N 2
 c Total from continuation sheets to P d Total (add lines 1b and 1c) 2 Total number of individuals (including compensation from the organization 3 Did the organization list any former of line 1a? <i>If</i> "Yes," complete Schedule 4 For any individual listed on line 1a, is and related organizations greater that 5 Did any person listed on line 1a receir rendered to the organization? <i>If</i> "Yes" 	but not limited to the pofficer, director, trus J for such individual the sum of reportation \$150,000? If "Yestive or accrue competition	hose tee, ble c s, " c ansa	key	ed a emp pens plete from	bove bloye ation Sch	e) wh ee, or n and nedul	r hig d other	0 a ceeived more than \$100 phest compensated em ner compensation from for such individual ed organization or Indivi	0 0,000 of reportable ployee on the organization vidual for services		1. 1.	0 /es N 2
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 c Total from continuation sheets to P d Total (add lines 1b and 1c) 2 Total number of individuals (including compensation from the organization 3 Did the organization list any former of line 1a? <i>If</i> "Yes," complete Schedule 4 For any individual listed on line 1a, is and related organizations greater that 5 Did any person listed on line 1a receir rendered to the organization? <i>If</i> "Yes 5 Section B. Independent Contractors 	Part VII, Section A but not limited to the pofficer, director, trus J for such individual the sum of reportation in \$150,000? If "Yes ive or accrue competence s," complete Schedu	hose tee, t ble c s, " c ensa <i>ile J</i>	key comp tion	ed a emp pens blete from such	bloye ation Schn any	e) wh ee, or n and nedul y unr son	no re r hig d oth relate	0 a occived more than \$100 whest compensated em her compensation from for such individual ed organization or Indivi-	0,000 of reportable ployee on the organization vidual for services		3 4 5 tion from	O Yes N 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
 d Total (add lines 1b and 1c)	but not limited to the bufficer, director, trus J for such individual the sum of reportation is \$150,000? If "Yes ive or accrue competence is " complete Schedu mest compensated in tion for the calendar (A)	hose tee, ble c s, " c ansa ile d ndep year	key comp comp tion	ed a emp pens plete from such ent o	bloye ation Schn any	e) wh ee, or n and nedul y unr son	no re r hig d oth relate	0 a occived more than \$100 whest compensated em her compensation from for such individual ed organization or Indivi-	0 0,000 of reportable ployee on the organization vidual for services	nsat	3 4 5	O res N 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
 c Total from continuation sheets to P d Total (add lines 1b and 1c) 2 Total number of individuals (including compensation from the organization 3 Did the organization list any former of line 1a? <i>If</i> "Yes," complete Schedule 4 For any individual listed on line 1a, is and related organizations greater that 5 Did any person listed on line 1a receir rendered to the organization? <i>If</i> "Yes Section B. Independent Contractors 1 Complete this table for your five high the organization. Report compensation 	but not limited to the pofficer, director, trus J for such individual the sum of reportation in \$150,000? If "Yes ive or accrue competents ive or accrue competents is completents of the test compensated in the for the calendar	hose tee, ble c s, " c ansa ile d ndep year	key comp tion	ed a emp pens plete from such ent o	bloye ation Schn any	e) wh ee, or n and nedul y unr son	no re r hig d oth relation	0 a 0 a 0 a 0 a 0 a 0 a 0 a 0 a	0 0,000 of reportable ployee on the organization vidual for services	nsat	3 4 5 tion from	O res N 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
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FOUNDATION FOR INDIGENT GUARDIANSHIP, INC. Statement of Revenue

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			Check if Schedule C					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Grants	nts	1 8	- and a second and			<u> </u>			The state and state	A REAL PROPERTY.	
Contributions. Gifts. Grants	101	b			<u>1b</u>			EU ERA	1991 A. 1991	ALCO AND DESCRIPTION	Tetan Title
9	A	C	Fundraising events	•••••	1c	÷			Service Manual Providence	ATHERE WITH	
9	ilar	d	and a gain material to	•••••	<u>1d</u>				and the second	Cent Vi politica	and the second
SUS.	S	e	Government grants (cont	ribution	s) <u>1e</u>	-			and the second second	n nino de Maries	
utic	ler	f	Station Contraction of States	, grants,	and		046 000			The fight and the	
trib	a		similar amounts not included				246,938	•	AN LATINE BE	WITH MUSICE ELEP	
No.	pu	9 h	Noncash contributions included in							新国际情报性 当	
2	tu		Total. Add lines 1a-1f					246,938.	Die Demission web-	CLEAN D. Service	Destant and
đ		2 a					Business Code		1		N Alexandra
<u>Vic</u>		b									
Program Service	a	c				-					
E	Nel 1	d		_							1
-BC	ř	e				-					
Рг		f	All other program service	revenue							
		g		i overiud		• • • • •					
	3	3	Investment income (includ	lina divi	dends i	ntor	Poet and				
			other similar amounts)	ang ann	uoriuo, i	n.ci					
	4	L.	Income from investment or	f tax-exe	empt bo	nd	proceeds				
	5		Royalties								
					(i) Real		(ii) Personal	ED DE SED COLOS OF	The second second		10
	6	a	Gross rents	6a				ALL STREET		「老」の目前にお供いた	
		b	Less: rental expenses	6b					WE ALL REAL PROPERTY		
				6c				industry in the second	E MARTINE AND	at the resources of	
			Net rental income or (loss)						10		Charles and the
	7		Gross amount from sales of	0	Securiti	es	(ii) Other	NAME OF A DESCRIPTION OF A	Contraction and the second second second	The second second second	and the second second
				7a				THE SECTION OF		mettering and benering	and the store
			Less: cost or other basis					[1988年3月11日]		Second and the second sec	Partition Section
anu		í		7b		_				The second s	Turing Mills
eve		C (Gain or (loss)	7c							and the second second
Ř.		d	Net gain or (loss)				>				and a
Other Revenue	8	a (Gross income from fundraising) events	(not			Care May Sent			States and
<u>ہ</u>		Į.	ncluding \$		of				A REAL PROPERTY AND A REAL PROPERTY AND A	Series and the series of the	The Part in the
		C	contributions reported on lin	ne 1c). S	See			A State State of the state of the	一行道道和法律的创始。	STR. BIRT STREET	in inter
		۲ ۱	Part IV, line 18	•••••••		8a		Strain guie 11	The all the Print and	and the state of the	
			ess: direct expenses		l	8b					Due 14 and
			let income or (loss) from fu			5			NEW REAL PROPERTY.	1.5.751.154	
	31		aross income from gaming a					and the second second	and some section of		S)= 24 185
		ь. Б. L.	Part IV, line 19 ess: direct expenses	•••••	······ }	9a			Inter A state and		
			let income or (loss) from ga			9b		WARDER AND ANY			
	10 =	G	iross sales of inventory, les	uming ac			>	Contraction of the		and the second	-
			nd allowances								dir and a
	h	a Le	ess: cost of goods sold		F	0a Ob			The second second second	and an in the	17422 5 18
		N	et income or (loss) from sal	las of in					THE LOCATE DESTINATION OF		2
		1 41	station of possimon sal	ica ul IN	ventory	_	Business Code	CALL PROPERTY OF			
	11 a	1				ŀ				N. F. L. L. S. L. S. L.	
Revenue	b	_				• -					
BVB	c					٠ŀ				- The state	
m m	d	All	l other revenue			ŀ					
	e	Та	stal. Add lines 11a-11d		•••••	L.		10.7	Contraction of the state		
1	2	To	tal revenue. See instructions		6.0			246,938.	0.	0.	RIGHER WEEKS
									V • 1	U a l	11.

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Form 990 (2020) Part VIII

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Form 990 (2020) INC -Part X Statement of Functional Expenses

	Check if Schedule O contains a response	e or note to any line in the (A)	(B)		(D)
7b, 8b, 9b, and		Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	other assistance to domestic organizations	107 000	107 090	AND I FROM ST	
and domesti	c governments. See Part IV, line 21	107,080.	107,080.		
2 Grants and	other assistance to domestic			The second second	
individuals	. See Part IV, line 22				
	other assistance to foreign			Party of the second of the	
	ons, foreign governments, and foreign				
individuals	. See Part IV, lines 15 and 16				
4 Benefits pa	aid to or for members				
5 Compensa	tion of current officers, directors,				
trustees, a	nd key employees	-			
6 Compensati	on not included above to disqualified				
persons (as	defined under section 4958(f)(1)) and				
persons des	scribed in section 4958(c)(3)(B)				
	ries and wages				
	n accruals and contributions (include				
section 401	(k) and 403(b) employer contributions)				
	loyee benefits				
10 Payroll tax	(es				
11 Fees for s	ervices (nonemployees):				
	ent				
b Legal				6,500.	
	Ig	6,500.		0,500.	
e Profession	al fundraising services. See Part IV, line 17				
	nt management fees				
	line 11g amount exceeds 10% of line 25,				
	amount, list line 11g expenses on Sch O.)			1 500	
	g and promotion	1,500.		1,500.	
	penses	293.		293.	
	on technology				
	cy				
18 Payments	s of travel or entertainment expenses				
	deral, state, or local public officials				
	ces, conventions, and meetings				
20 Interest					
	s to affiliates				
	tion, depletion, and amortization	S			
23 Insurance		1,378.		1,378.	
24 Other exte	anses Itemize expenses not covered				
above (Lis	t miscellaneous expenses on line 24e. If		A - United States		TEND, IN P. T.
line 24e ar	mount exceeds 10% of line 25, column (A) st line 24e expenses on Schedule 0.)		and subserve		and the second
	LLANEOUS	417.		417.	
-					
b					
d	expenses				
e All other	expenses	117,168.	107,080.	. 10,088.	
	s. Complete this line only if the organization				
	n column (B) joint costs from a combined				
	al campaign and fundraising solicitation.				
	if following SOP 98-2 (ASC 958-720)				

Form 990 (2020)

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			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	248 451		381,47
	2	Savings and temporary cash investments		2	JOL/4/.
	3	redges and grants receivable, net			
	4	Accounts receivable, net		3	
	5	Loans and other receivables from any current or former officer, director,	Second and the second second	4	
		trustee, key employee, creator or founder, substantial contributor, or 35%			
- 1		controlled entity or family member of any of these persons			
	6	Loans and other receivables from other disqualified persons (as defined		5	
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	a president a respectivities and		
B	7	Notes and loans receivable, net		6	
Assets	8	Inventories for sale or use	2 D24 1 D24	7	
₹	9	Prepaid expenses and deferred charges		8	
	10a	a Land, buildings, and equipment: cost or other		9	
		basis. Complete Part VI of Schedule D 10a	We true to set to be and the	ne le st	
	b	Less: accumulated depreciation	and the second sec	12020200	Man Man Markey
	11	Investments - publicly traded securities		10c	
1	12	Investments - other securities. See Part IV, line 11		11	
1	13	Investments - program-related. See Part IV, line 11		12	
1.	14	Intangible assets		13	
1.	15	Other assets. See Part IV, line 11		14	
1	16	Total assets. Add lines 1 through 15 (must equal line 33)	240 454	15	
	17	Accounts payable and accrued expenses	248,451.		381,471
1	18	Grants pavable		17	3,250
11	19	Grants payable		18	
2	20	Deferred revenue		19	
2	21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D		20	
	2	Loans and other payables to any current or former officer, director,		21	
		trustee, key employee, creator or founder, substantial contributor, or 35%			HERE WELLER
		controlled optity of family many and a set	The second s	S. Marker	·····································
2	3	Secured mortgages and notes payable to unrelated third parties		22	
2	4	Unsecured notes and loops poughts to unrelated third parties		23	
2	5	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third		24	
1	-	parties, and other liabilities not included on lines 17-24). Complete Part X			
20				25	
T		Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here X		26	3,250.
		and complete lines 27, 28, 32, and 33.		1.54	
27	7	Net assets without donor restrictions		125	
28	3	Net assets with donor restrictions	. 248,451.	27	378,221.
1		Net assets with donor restrictions	···	28	
		and complete lines 29 through 33.		623	
29	r i	Capital stock or trust principal, or current 5 and	The second states and the	1	
27 28 29 30 31 32) F	Capital stock or trust principal, or current funds		29	
31		Paid-in or capital surplus, or land, building, or equipment fund		30	
32	1	Retained earnings, endowment, accumulated income, or other funds		31	
33		Fotal liabilities and net assets (mainteen in the second s	248,451.	32	378,221.
		Total liabilities and net assets/fund balances	. 248,451.	33	381,471.

Form 990 (2020)

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Form 990 (2020)
Part X Balance Sheet

i

Form S	990 (2020) INC -				
Parl	Will Reconciliation of Net Assets			ſ	
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			
			246		8.
1	Total revenue (must equal Part VIII, column (A), line 12)	1	117		
2	Total expenses (must equal Part IX, column (A), line 25)	3	129		
9	Povenue less expenses. Subtract line 2 from line 1	4	248	_	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		2140	1 4 4	
5	Net unrealized gains (losses) on investments	6			
6	Donated services and use of facilities			-	
7	Investment expenses	7			
8		8			0.
9	Other changes in net assets or fund balances (explain on Schedule O)	9.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		378	3,22	21.
	column (B))	10	570	, 41	3
Par	t VIII Cinoncial Statements and Reporting				X
	Check if Schedule O contains a response or note to any line in this Part XII	•••••	1	Yes	No
			1		1105
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the examination changed its method of accounting from a prior year or checked "Other," explain in Schedule O		2a	distant in a	·X
2a	More the emergization's financial statements compiled or reviewed by an independent accountant a		20	1201	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed o	na			
	congrate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		2b	x	
b	Were the organization's financial statements audited by an independent accountant?		20	1000	(1911) 1
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate l	Dasis,			ina i
	consolidated basis, or both:	·		1	1000
	X Separate basis Consolidated basis Both consolidated and separate basis		(IIII) COL	1 Martin	-
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,	2c	x	
-	interview in the financial statements and selection of an independent accountant r		20		
	the stand of the s		A MARKED	- Taul	1
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set form in the Sing	ne Auan	3a		x
	1 0 1 0 0 m l = 1 1 0 0 0		- oa		+
ь	It lives I did the experization undergo the required audit or audits? If the organization did not undergo the required	andir	3b		
-	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			990	(2020
-			1 0011		from pix size page

Form 990 (2020)

(Form 990 or 990-EZ)	Complete if the o	harity Status	1 501(c)(3) o	roanizat	ion or a section	ſ	2020
Department of the Treasury Internal Revenue Service		Attach to Form 990	charitable	trust.			Open to Public
Name of the organization	FOUNDATION F	S.gov/Form990 for instr OR INDIGENT	CITA DDT	I the late		18.18	Inspection
							dentification num
Part I Reason for	r Public Charity Statu	S. (All organizations m	ist complete	this par	t.) See instructions	02	-0763591
1 A church, convertight 2 A school describ 3 A hospital or a c 4 A medical researt 5 An organization of section 170(b)(1) 6 A federal, state, of 7 7 X 8 A community true of the section 170(b)(1) 9 An agricultural research	Availe foundation because it intion of churches, or assoc- bed in section 170(b)(1)(A)(i ooperative hospital service in rch organization operated in operated for the benefit of a 1)(A)(iv). (Complete Part II.) or local government or gove hat normally receives a sub- t)(A)(vi). (Complete Part II.) st described in section 170 search organization describ	IS: (For lines 1 through 1 iation of churches descr ii). (Attach Schedule E (organization described in conjunction with a hosp college or university ow mmental unit described stantial part of its suppo (b)(1)(A)(vi). (Complete F ed in section 170(b)(1)	2, check on ibed in section 1 section 1 bital describe ned or operation in section fr from a gov Part II.)	ly one bo tion 170(990-EZ). 70(b)(1)(/ ated by a 170(b)(1) vernment	x.) b)(1)(A)(i). A)(iii). ction 170(b)(1)(A)(iii). governmental unit de (A)(v). cal unit or from the ge	escribed	in Iic described in
university:	non-land-grant college of ag nat.normally receives (1) mo	riculture (see instruction	s). Enter the	name, c	ity, and state of the c	ollege or	
See section 509(a An organization or An organization or more publicly supplines 12a through a Type I. A support the supported or organization. You b Type II. A support control or manage organization(s). You that is not function its supported org that is not function requirement (see Check this box if functionally integr	o its exempt functions, subj ated business taxable incom a)(2). (Complete Part III.) rganized and operated exclu- ganized and operated exclu- ported organizations descrite 12d that describes the type tring organization operated, ganization(s) the power to re- u must complete Part IV, S rting organization supervise rement of the supporting org four must complete Part IV ally integrated. A supportin- anization(s) (see instructions ctionally integrated. A sup- mally integrated. The organi- instructions). You must con- the organization received a rated, or Type III non-function	isively to test for public isively for the benefit of, bed in section 509(a)(1) of supporting organizati supervised, or controlle egularly appoint or elect Sections A and B. d or controlled in conne- ganization vested in the Sections A and C. ng organization operated s). You must complete porting organization operated zation generally must samplete Part IV, Section written determination fro	trom busines safety. See to perform t on and comp d by its supp a majority o ction with its same persor l in connecti Part IV, See rated in con tisfy a distrik s A and D , a	sses acq section s he functi 509(a)(2) plete line ported on f the dire s support is that co ion with, ctions A, nection vo pution rec and Part	uired by the organiza 509(a)(4). ons of, or to carry our 1. See section 509(a) s 12e, 12f, and 12g. ganization(s), typically octors or trustees of the ed organization(s), by pontrol or manage the and functionally integ D, and E. with its supported org quirement and an attention by	tion after t the purp (3). Chec y by givin he support y having supported yrated wit janization entiveness	June 30, 1975. Doses of one or k the box in g rting d
Enter the number of supp							
Provide the following info	mation about the supporte	d organization(s).				L	
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	(IV) is the organiz in your governing	zation listed document?	(v) Amount of monetar		Amount of other
		above (see instructions))	Yes	No	support (see instruction	suppo	rt (see instructions)
				and the second data			

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FOUNDATION FOR INDIGENT GUARDIANSHIP, ribed in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Schedule A (Form 990 or 990-EZ) 2020 INC.

Part	Support Schedule for Organizations Described in Sections in other field to guilt under Part III If the organization
	(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
	fails to gualify under the tests listed below, please complete Part III.)
	fails to qualify under the tests listed below, please complete t at my

line.

Sec	ion A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not					046 020	639,520.
	include any "unusual grants.")	98,421.	37,275.	17,759.	239,127.	246,938.	039,540.
	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge					246 029	639,520.
	Total. Add lines 1 through 3	98,421.	37,275.	17,759.	239,127.	246,938.	039,520.
	The portion of total contributions		and the surger that		Sold Michael Song		
5	by each person (other than a	and to be			ENF WEREN STUT	The Part of the Real	
	governmental unit or publicly				印度水台 如此 中国主义	Martin House	
	supported organization) included	2005.00	E THEAD SWA		S. Terreto pel	10月1日日 台市国	
	on line 1 that exceeds 2% of the	State Change	- Bellena-Witter	Company alter	后出的表示的UN27	Martine Control of the	
	amount shown on line 11,	and the second second		DO CATHORNES	(13)2·耳马(13)	Ref. Low Park	
	column (f)					1	639,520.
6	Public support. Subtract line 5 from line 4.		and the state				039,520.
Sec	tion B. Total Support				1	1	(0 Total
	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total 639,520.
	Amounts from line 4	98,421.	37,275.	17,759.	239,127.	246,938.	039,5200
8	Gross income from interest,						
0	dividends, payments received on						
	securities loans, rents, royalties,					0.	219.
	and income from similar sources	99.	62.	35.	. 23.	· · ·	
9	Net income from unrelated business						
а	activities, whether or not the						
	business is regularly carried on						
40	and the Demot include onin						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	1					639,739
	Add lines 7 through 10	MERCAL MILLER PLANE	and the second		Street Problem	A Compression of the	039,139
11		oto (eeo instructi	ions)			12	
12	If the Form 000 in for t	the organization's	first, second, third,	fourth, or fifth tax	k year as a section	501(c)(3)	
13	organization, check this box and sto	op here					
Se	ction C. Computation of Pub	lic Support Pe	ercentage				99.97
	Public support percentage for 2020	(line 6, column (f),	divided by line 11,	column (f))		14	
		O O - La duda A Dar	+ II lino 14				the second se
10	an station and teast 2000 If the	organization did r	not check the box (on line 13, and line	e 14 is 33 1/3% ur	more, chook and a	box and
			norted ordanizatio	n			
	sector that 0040 lf the	organization did r	not check a box of	line 13 or loa, ar	ID IN P IS IS OF IV.		
		- PE	LOUIDDORLOG OF CONTRACT	791100			
		-+ 0000 lf the o	ragnization did 001	r check a dox un i	[[16] [3, [0a, 0] [04	, build link it is is in	
1/	and if the ergenization meets the fai	cts-and-circumstar	ices test, check in	is now and aroth	not or Explorent in a	art VI how the orga	nization
		test The ergenized	tion augistice as a f	JUDIICIV SUUDORIOC	i viganization .		
		-+ 0040 If the 0	reanization did ho	r check a dux un i		or 17a, and line 15	is 10% or
	. Utility examination monte	the facts and circl	umstances test. Cl	IBCK THIS DOX ANU	Stoh Heler Doho		e
		toot	The organization (uairies as a bubli	city supported orge		
	organization meets the facts and cill Private foundation. If the organization	tion did not check	a box on line 13. 1	6a, 16b, 17a, or 1	17b, check this bo	x and see instruction	ons 🕨
11	A Private toundation. If the organization	NOTE ON THE OTION				haded A /Earner C	000 or 000-E7) 9(

Ø Schedule A (Form 990 or 990-1

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ge 3

(Complete only if you checked qualify under the tests listed b	the box on line 10	of Dart Law Hith		(2)		
	ON DOOD OPPOR	of Part 1 or if the	organization failed	to qualify under Pa	art II. If the organiz	ation fails to
Section A. Public Support	elow, please comp	lete Part II.)				
alendar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(D T-44)
1 Gifts, grants, contributions, and				(0) 2010	(e) 2020	(f) Total
membership fees received. (Do not			1			
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per-					(
formed, or facilities furnished in						
any activity that is related to the	5		· · · · · · · · · · · · · · · · · · ·			
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization'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					· · · · · · · · · · · · · · · · · · ·	
Total. Add lines 1 through 5						
a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disgualified persons that						
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						

8 Public support. (Subtract line 7c from line 6.) Section B. Total Support

c Add lines 7a and 7b

Calendar year (or fiscal year beginning in) 🕨 🗌	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(0 T-+-1
9 Amounts from line 6			10/ =0/10	(0) 2013	10/2020	(f) Total
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						
 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) 						
14 First 5 years. If the Form 990 is for the	reanization's for	the second third for				
14 First 5 years. If the Form 990 is for the o	rganization s ms	si, second, third, to	ourth, or fifth tax ye	ear as a section 5	01(c)(3) organization	l,
check this box and stop here	Support Perc	entage				
15 Public support percentage for 2020 (line	8 column (f) div	ided by line 12 as	human (0)		1	
16 Public support percentage from 2019 Sc Section D. Computation of Investor	bedule A Part III	line 16	iunnin (II)		15	%
Section D. Computation of Investment	ent income	Percentage			16	%
17 Investment income percentage for 2020	fine 10c. column	(f) divided by line	10			
18 Investment income percentage from 201	9 Schedule A D	art III Jino 17	, 13, column (r))		17	%
19a 33 1/3% support tests - 2020. If the org	anization did not				18	%
more than 33 1/3%, check this box and	ton here. The o	Check the box on	Ine 14, and line 1	5 is more than 33	1/3%, and line 17 i	s not
more than 33 1/3%, check this box and s b 33 1/3% support tests - 2019. If the org	apization did not	ganzauon quame	s as a publicly sup	ported organizati	on	
line 18 is not more than 33 1/3% check t	his hoy and stor	bore The erest	10 14 or line 19a, a	and line 16 is more	e than 33 1/3%, and	1
line 18 is not more than 33 1/3%, check to 20 Private foundation. If the organization di	d not check a ba	vinere. The organiz	ation qualmes as	a publicly support	ed organization	
20 Private foundation. If the organization di	a not check a Du	A UT 1110 14, 198,	or 19D, Check this	box and see instr	uctions	

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020 INC . **Supporting Organizations** Part IV (Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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? If "No," describe in Part VI how the supported organizations are designated. If designated by 1 class or purpose, describe the designation. If historic and continuing relationship, explain. 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported 2 organization was described in section 509(a)(1) or (2). 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a lines 3b and 3c below. 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)? If "Yes," describe in Part VI when and how the 3b organization made the determination. c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) 3c purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 4a Was any supported organization not organized in the United States ("foreign supported organization")? // 4a "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion **4b** despite being controlled or supervised by or in connection with its supported organizations. 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)? 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) **4**c purposes. 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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 5a was accomplished (such as by amendment to the organizing document). b Type I or Type II only. Was any added or substituted supported organization part of a class already 5b designated in the organization's organizing document? 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? If "Yes," provide detail in 6 Part VI. Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor 7 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with 7 regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? 8 8 if "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 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 <u>9a</u> in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which **9b** the supporting organization had an interest? If "Yes," provide detail in Part VI. 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? If "Yes," provide detail in Part VI. 9c 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 10a supporting organizations)? // "Yes," answer line 10b below.

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Schedule A (Form 990 or 990-EZ) 2020

10b

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 b) reaction in the relationship described in line 2, above, 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? If "Yes," describe in Part VI the role the organization's supported organization is played in this regard. Supported organizations played in this regard. Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a The organization satisfied the Activities Test. Complete line 2 below. b The organization is the parent of each of its supported organization. 	11a 11b 11c	Yes	5
 A passion with directly or indirectly controls, either alone or together with persons described in lines 11b and 11 to below, the governing body of a supported organization? A family member of a person described in line 11a above? A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. Section B. Type I Supporting Organizations Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization of softcers, effectively operated, supervised, or controlled the organization far more supported organization fave the power to regularly appoint or elect at least a majority of the organization softcers, effectively operated, supervised, or controlled the organization appoint on the two the supported organization fave the power to regularly appoint or elect at least to have the organization fave the power to regularly appoint or elect at least to majority of the organization soft and conditions or restrictons, if any supported organization fave mere allocated among the supported organization (see the power sto appoint and/or remove officers, directors, or trustees were allocated among the supported organization (see the purposes of the supported organization) for a variation. Bection C. Type II Supporting Organizations 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 supporting Organizations (% 11 % %, "describe in Part VI how control or management of the supporting Organizations. Were a majority of the organization's as was near electroning (% 11 % %, "describe in Part VI how control or management of the supporting Organizations. Did the organization provide to each of it	11b 11c	Yes	
 A passion with directly or indirectly controls, either alone or together with persons described in lines 11b and 11 to below, the governing body of a supported organization? A family member of a person described in line 11a above? A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. Section B. Type I Supporting Organizations Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization of softcers, effectively operated, supervised, or controlled the organization far more supported organization fave the power to regularly appoint or elect at least a majority of the organization softcers, effectively operated, supervised, or controlled the organization appoint on the two the supported organization fave the power to regularly appoint or elect at least to have the organization fave the power to regularly appoint or elect at least to majority of the organization soft and conditions or restrictons, if any supported organization fave mere allocated among the supported organization (see the power sto appoint and/or remove officers, directors, or trustees were allocated among the supported organization (see the purposes of the supported organization) for a variation. Bection C. Type II Supporting Organizations 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 supporting Organizations (% 11 % %, "describe in Part VI how control or management of the supporting Organizations. Were a majority of the organization's as was near electroning (% 11 % %, "describe in Part VI how control or management of the supporting Organizations. Did the organization provide to each of it	11b 11c	Yes	
 A family member of a person described in line 11a above? A 33% controlled entity of a person described in line 11a above? A 33% controlled entity of a person described in line 11a above? A 33% controlled entity of a person described in line 11a above? A 33% controlled entity of a person described in line 11a above? Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>II</i> *No, * describe in Part VI how the supported organization of describe how the powers to appoint and/or remove officers, directors, or trustees are allocated among the supported organization operate for the benefit of any supported organization of describe how the powers to expoint and/or remove officers, directors, or trustees are allocated among the supported organization operate for the benefit of any supported organization of the time the supported organization (s) that operated, supervised, or controlled the supported organization for <i>II</i> *Yes,* explain in Part VI how providing such benefit cardia cut the purposes of the supported organizations). Section C. Type II Supporting Organizations Were a majority of the organization's supported organization(s)? <i>II</i> *No,* describe in Part VI how control or managed the supporting organization supported organizations). Section D. All Type III Supporting Organizations Were any of the organization's 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 supported organization supported organization? Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization	11b 11c		
 b A family member of a person described in line 11a above? c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. Section B. Type I Supporting Organizations 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, of trustees at all times during the tax yea? If 'No,' describe in Part VI how the supported organization's officers, or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization describe how the powers to appoint and/or memore officers, directors, or trustees use allocated among the supported organization, describe how the powers to appoint and/or memore officers, directors, or trustees during the tax year. 2 Did the organization operated, supporting organization, supported organization officers, directors, or trustees during the tax year. 2 Did the organization perated, supporting organization. Section C. Type II Supporting Organization. Section C. Type II Supporting Organization as vested in the same persons that controlled or managed the supporting organization (§)? If 'No,' describe in Part VI how control or management of the supporting Organizations. Section D. All Type III Supporting Organizations 1 Did the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization is supported organization, and (ii) copies of the organization's use years (i) a copy of the form provide to each of its supported organization, and (ii) copies of the organization's directors, or trustees during the tax year (i) a copy of the form sporting Organizations, by the last day of the fifth month of the organization's directors, or trustees either (i)	11b 11c		
 a A35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detailing Part M. Section B. Type I Supporting Organizations 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax yea? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the arganization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organization caparate for the benefit of any supported organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization spectred, supervised, or controlled the supporting organization (s) that operated, supervised, or controlled the supporting organization. Section C. Type II Supporting Organization. 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)? If 'No,' describe in Part VI how control or management of the supporting organization. 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization. 2 Did the organization provide to each of its supported organization, supported organization(s)? If 'No,' explain in Part VI how the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (i) a copy of the Form 990 that was most recently filed as of the date of notification, and (ii) copies of the organization's filed, as doff the directors, or t	11c 1 2		
Section B. Type I Supporting Organizations 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organizations of directors, or trustees at all times during the tax yea? // "\AD," 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 operate for the benefit of any supported organization of the tax year. 2 Did the organization operate for the benefit of any supported organization of the supported organization (be effective), or trustees were allocated among the supported organization (be effective), apported organization), the benefit of any supported organization? 2 Did the organization operate for the benefit of any supported organization of the support day organization (be more than the support of organization), supported organization? 3 Supervised, or controlled the supporting organization. 4 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 was vested in the same persons that controlled or managed the supporting organization was vested in the same persons that controlled or managed the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (i) a copy of the Form S90 that was most recently filed as of the date of notification, and (ii) copies of the organization's directors, or trustees either (i) apoported organization's have a significant voice in the organiza	11c 1 2		
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Prov (i) douby of the rolline solutiat 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? 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> By reason of the relationship described in line 2, above, 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 organization's Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).</i>		17.2	
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By reason of the relationship described in line 2, above, did the organization's supported organization(s). By reason of the relationship described in line 2, above, 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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Ction E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organization.	1 million		257
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The organization is the parent of each of its supported organizations			
The organization is the parent of each of its supported organizations			
The second			
The organization supported a governmental entity. Describe in Part VI becaute a			
The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instruct Activities Test. Answer lines 2a and 2b below.			
Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	tion <u>s).</u>	s N	lo
the supported organization(s) to which the organization was recently further the exempt purposes of	tions). Ye		80.
the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	tions) Ye		
those supported organizations and explain how these activities directly furthered their exempt purposes,	tions). Ye	18193	
and how the organization was responsive to those supported organizations, and how the organization determined	tions). Ye		
shar those activities consuluted substantially all of its activities	tions). Ye	3100	
and the detrinics described in the 2a, above, constitute activities that but for the enserting that the	Ye	0.03	
end of more of the organization's supported organization(s) would have been engaged in 2. It is a standard in 2.	Ye		
the reasons for the organization's position that its supported organization(s) would have an even it is	Ye		
these activities but for the organization's involvement.	Ye		

- 3 Parent of Supported Organizations. Answer lines 3a and 3b 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? If "Yes" or "No" provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard,

032025 01-25-21

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Schedule A (Form 990 or 990-EZ) 2020

3a

3b

	All other Type III non-functionally integrated supporting organizations must	I		(B) Current Year
ectio	n A - Adjusted Net Income	-	(A) Prior Year	(optional)
1 1	let short-term capital gain	1		
	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
-	Add lines 1 through 3.	4		
	Depreciation and depletion	5		
3	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		
	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	-		A CARLON CONTRACTOR
	instructions for short tax year or assets held for part of year):			a construction of the second
	Average monthly value of securities	1a	· · · · · · · · · · · · · · · · · · ·	
	Average monthly cash balances	1b		
0	Fair market value of other non-exempt-use assets	10		
	Total (add lines 1a, 1b, and 1c)	1d		and the second second
a	Discount claimed for blockage or other factors			Summer I.
e	(explain in detail in Part VI):	line a	-7	
-	Acquisition indebtedness applicable to non-exempt-use assets	2		
-	Subtract line 2 from line 1d.	3		
3	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
-	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
5		6		
6	Multiply line 5 by 0.035.	7		
7	Recoveries of prior-year distributions	8		
8 Sect	Minimum Asset Amount (add line 7 to line 6)			Current Year
4	Adjusted net income for prior year (from Section A, line 8, column A)	1		
0	Enter 0.85 of line 1.	2	and the second	
2	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
3	Enter greater of line 2 or line 3.	4		
4	Income tax imposed in prior year	5		
5 6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). Check here if the current year is the organization's first as a non-function.	.6		

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-FZ) 2020 [NC	OR INDIGENT GUA		0:	2-0763591 _P
Part V Type III Non-Functionally Integrated 50 Section D - Distributions	9(a)(3) Supporting Orga	anizations (conti	nued)	
			-	Current Year
e and to supported organizations to accomplish e	kempt purposes		1	
2 Amounts paid to perform activity that directly furthers exen organizations, in excess of income from activity	npt purposes of supported			
3 Administrative excesses paid to accomplish events and			2	
 Administrative expenses paid to accomplish exempt purport Amounts paid to acquire exempt-use assets 	S	3		
5 Qualified set-aside amounts (prior IPS approval provided		4		
- contraction and amounts (phorn to approval required - c		5		
 Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. 		6		
		7		
8 Distributions to attentive supported organizations to which (orovide details in Part VI). See instructions.				
 9 Distributable amount for 2020 from Section C, line 6 		8		
10 Line 8 amount divided by line 9 amount			9	
	1		10	
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ns	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			212	
2 Underdistributions, if any, for years prior to 2020 (reason-		of the list	-	the second s
able cause required - explain in Part VI). See instructions.	have been a start			
3 Excess distributions carryover, if any, to 2020	States of the second			
a From 2015			-	and the second second
b From 2016				
c From 2017				the second second
d From 2018				the second s
e From 2019				
f Total of lines 3a through 3e			North P	
g Applied to underdistributions of prior years			10	
h Applied to 2020 distributable amount		15 M. 19 19 19	1000	
i Carryover from 2015 not applied (see instructions)	1	S. C. AND		the state of the s
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		S. THOMAN STREET		
4 Distributions for 2020 from Section D,			-	
line 7: \$			1	
a Applied to underdistributions of prior years	A State of the second second			
b Applied to 2020 distributable amount		ant also share		
c Remainder. Subtract lines 4a and 4b from line 4.				
5 Remaining underdistributions for years prior to 2020, if		the second second	1.	19
any. Subtract lines 3g and 4a from line 2. For result greater			1	
than zero, explain in Part VI. See instructions.				
8 Remaining underdistributions for 2020. Subtract lines 3h		and the second second		
and 4b from line 1. For result greater than zero, explain in			- 1	
Part VI. See instructions.				
Excess distributions carryover to 2021. Add lines 3j and 4c.				
Breakdown of line 7:		A REAL PROPERTY AND A REAL		and the second second
a Excess from 2016				The second s
b Excess from 2017		and the second second	129	and a state of the
c Excess from 2018			-	
d Excess from 2019	N.N. S.	The second second		
e Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

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		FOUNDATIO.	N FOR .	TNDIGENT	GUARDIAL	NSHIP,		
Schedule A	(Form 990 or 990-EZ) 2020	INC.					02-0763591	Page 8
Part VI	Supplemental Inform	mation. Provide t	he explanatio	ons required by	Part II line 10- D	art II line 179 or	17h Part III line 12	
	Part IV, Section A, lines 1,	2 2b 2a 4b 4a 5	a 6 0a 0b		rail ii, iiile IU, r	artin P lines 1	and Q: Dort N/ Soction	<u>^</u>
	line 1; Part IV, Section D, I	2, 30, 30, 40, 40, 9	a, 0, 9a, 90,	SC, 118, 110, at	20 and 2b Day	+ V line 1, Bort V	Soction P line 10: Da	−0, +1/
	Section D, lines 5, 6, and 8	nieszanus, raitn	, Section E,	F and C Alac	, sa, anu su, rai	tv, mer, rattv	, Section B, inte re, Fa	πν,
	(See instructions.)	o, and Part V, Secul	$n \in$, lines 2 ,	5, and 6. Also (complete this par	t for any addition	lar mormation,	
	(See instructions.)							
		and the second second				and the second second second second		
							a local de la companya de la company	
	and the second se							
							Contraction of the second	
	the second second second	and the second second second second				and the second s	- spinster and a second	

		Supplement	al Financial Statements		F	OMB No. 1545-0047
(Form 9 Departmen	t of the Treasury	Part IV, line 6, 7, 8, 9, 1	ganization answered "Yes" on Form 990, 0, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b			2020 Open to Public
	f the organizatio	PGO to www.irs.gov/Forms	90 for instructions and the latest i.c.	tion.	12.0	Inspection
Part I		INC.	IGENT GUARDIANSHIP,	1	Employer ide 02-	entification number 0763591
	organization	answered "Yes" on Form 990, Part IV, lir	d Funds or Other Similar Funds o	r Acco	ounts. Cor	nplete if the
	3	anonoica res on ronn 990, Part IV, IIr	ae 6. (a) Donor advised funds			
1 To	al number at end	l of year	(a) Donor advised funds	(b) f	Funds and ot	her accounts
Z Ay	gregate value of (contributions to (during year)				
3 Ag	gregate value of g	grants from (during year)				
4 Ag	gregate value at e	and of year		-		
9 1/10	the organization	inform all donors and donor advisors in v	writing that the appets held in domain the	funds		
	and an gran mathematical	S Property, Subject to the Amanization's	avelucing land an two lo			
					·····	Yes No
	parboo	of and not for the penetit of the donor or	dopor advisor on far and all			
Part II						Yes No
	the second se		HITZELOD SOCIATOR "Ves" as Farms 600 b	t IV, line	7.	
		ación easements nelo DV the ornanizatio	D (check all that apply)			
	Protection of n	land for public use (for example, recreati		nistorical	ly important i	and area
	Preservation of		Preservation of a c	ertified h	nistoric struct	ure
2 Com	plete lines 2a thr	ough 2d if the organization held a qualifier				
day	of the tax year.	e see a ste organization risid a qualite	ed conservation contribution in the form of a	conserv	ation easeme	ent on the last
a Tota	number of conse	ervation easements		1	Held at the	End of the Tax Year
b Tota	acreage restricte	ed by conservation easements		100 C 100 C 100 C		
c Num	ber of conservation	on easements on a certified historic struc	ture included in (a)	. <u>2b</u>		
		on pasements included in ic) scottined at				
1000	mano nanonal r	vegister				
3 Num	per of conservation	on easements modified, transferred, relea	sed, extinguished, or terminated by the orga	. 2d		
	the second se			anization	ouring the ta	ŧx
4 Numi	er of states when	re property subject to conservation easer	nent is located 🕨			
5 Does	the organization	have a written policy regarding the period	lic monitoring, inspection, handling of			
rioicat	ons, and emorce	ment of the conservation easements it he	olde2	8		Yes No
	and volunteer not	urs devoted to monitoring, inspecting, ha	ndling of violations, and enforcing conservat	tion ease	ments during	the vear
▶\$		correcting, inspecting, handling	g of violations, and enforcing conservation e	asement	s during the	year
					_	
and se	ction 170(h)(4)(B)	Viii?	atisfy the requirements of section 170(h)(4)(E	3)(ï)		
In Par	XIII, describe ho	w the organization reports conservation a	asements in its revenue and expense state			'es 🛄 No
balanc	e sheet, and inclu	ude, if applicable, the text of the footnote	to the organization's financial statements the	ment and	1	
organi	ation's accountin	ng for conservation easements.	to the organization's financial statements th	nat descr	ibes the	
	Organization	is Maintaining Collections of Ar	t, Historical Treasures, or Other S	Similar	Acceto	1
the second se	and the state of the state of the	gamzadon answered tes on Form 99	Part IV line 9			
a ir me o	rganization electe	ed, as permitted under FASB ASC 958 n	of to report in its second of the	onna aha		
		of or other similar assets neighfor bublic a	Yhibition education or measure in the	ance of p	Hio	
	active electe	u, as permitted under FASB ASC 958 to	report in He recently states and	e sheet v	vorks of	
		a serier entriter assers held for DUDIIC exh	ibition, education, or research in furtherance	e of publi	ic service	
(ii) Ass	enue included on ets included in Fo	rorm 990, Part VIII, line 1		▶ \$		
the folio	Wing amounts rev	ou or neid works of art, historical treasure	S Or other similar assets for Ensure to the	provide		
Revenue	included on For	quired to be reported under FASB ASC 9 m 990. Part VIII. line 1	bo relating to these items:			
Assets i	cluded in Form	990. Part X	or relating to these items:	▶ \$_		
For Pap	erwork Reductio	on Act Notice, see the Instructions for I				
1 12-01-20		the manual of the second seconds for the	-orm 950.	Sc	hedule D (F	orm 990) 2020

	FOUNDAT								2-076			e 2
	III Organizations Maintaining C	ollections	of Art	Histori	cal Trea	sures, or C	other S	Similar	Assets	(continue	ed)	
Part	Ising the organization's acquisition, access	ion and other	records	check an	v of the fo	llowing that m	ake sigr	ificant us	se of its			
3 L	Ising the organization's acquisition, access	on, and other	1000.00	,		-						
1	ollection items (check all that apply):		ď	Loa	n or exch	ange program						
a	Public exhibition		e	Oth	ner							
b	Scholarly research Preservation for future generations		-									
¢	and the experimentation of the organization's of	ollections and	explain	how they	further the	e organization's	s exemp	ot purpos	e in Part)	311.		
	a transfer uses did the organization solicit	or receive don	ations o	of art, histo	ncal treas	ures, or other a	Summer er	3000		2		
5 [the second s	ointoined as r	art of th	ne ofganiza	tion's coll	ection				Yes		No
Part		gements.	Comple	te if the or	ganization	answered "Ye	es" on F	orm 990	, Part IV, li	ne 9, or		
the second	Pine and an amount on Form 990 Pi	art X line 21.										
40.1	a the ergenization an agent trustee, custor	tian or other in	ntermed	iary for cor	tributions	or other asset	ts not in	cluded		1		N.
	on Form 990 Part X?						•••••		L	Yes	L	No
	f "Yes," explain the arrangement in Part XII	and complet	e the fol	lowing tab	le:					A		
										Amount		
•	Beginning balance							10				
С - н	Additions during the year							1d				
a .	Distributions during the year											
	t									1	[Ma
	Did the emerization include an amount on	Form 990, Pa	rt X, line	21, for es	crow or cu	islouial account		у?	L	Yes		No
	K IN/20 II attralain the arrangement in Part XI	 Check here 	if the ex	planation	nas deen	provided on Fa	allAn					
Dor	Endowment Funds. Complete	e if the organiz	zation ar	nswered "\	'es" on Fo	111 330, 1 4111	v, 1110	0				
I. CI.		(a) Currer	nt year	(b) Pri	or year	(c) Two years	back	(d) Three	years back	(e) Four	years	Jack
	De significant palanna											
	Beginning of year balance											
	Contributions											
	Net investment earnings, gains, and losses										_	
	Grants or scholarships											
e	Other expenditures for facilities											
	and programs			1								
f	Administrative expenses											
g	End of year balance Provide the estimated percentage of the c		d halan	ce (line 1a.	column (a	a)) held as:						
2	Provide the estimated percentage of the c	unent year en	G Delesin	%								
а	Board designated or quasi-endowment	%										
b	Permanent endowment	%										
С	Term endowment		00%									
	The percentages on lines 2a, 2b, and 2c s Are there endowment funds not in the pos	noulu equal I		zation that	are held a	and administer	ed for th	ne organi:	zation			
3a	Are there endowment funds not in the pos	session of un	e organi	Lation unat							Yes	No
	by:									3a(i)		
	(i) Unrelated organizations	••••••	•••••							3a(ii)		
	(ii) Related organizations (ii) Related organizations If "Yes" on line 3a(ii), are the related organ			uired on Sc	bedule B	2				<u>3b</u>		
b	If "Yes" on line 3a(ii), are the related organ	nizations listed	as 1640	lowmont fi	inde	• • • • • • • • • • • • • • • • • • • •						
4	Describe in Part XIII the intended uses of	ine organizati	011 5 8110	ACTIVITIES IN T								
Pa	tt VI Land, Buildings, and Equip Complete if the organization answ		Form Q	Q0 Part IV	line 11a	See Form 990	, Part X	line 10.				
-			Cost o	rother	(b) Co	st or other	(C)/	-CCUIIIUIC	ated	(d) Boo	ok valu	16
	Description of property		sis (inves		basi	is (other)	de	epreciatio	n			
			NO MINOS				No.					
	Land											
b	Buildings											
c	Leasehold improvements											
c	Equipment						1					
	Other				(D) 15-	1001						0.
Tet	al Add lines 1a through 1e. (Column (d) mu	ist equal Form	990, Pa	ALL COLUM	in ici, line	West man						0000

20 Schedule D (Form 990)

FOUNDATION	FOR	INDIGENT	GUARDIANSHIP,
INC.			, and the state of

			2-0763591
Complete if the organization answered "Yes	" on Form 990, Part IV lin	e 11b See Form 990 Port V line 10	
(including name or security)	(b) Book value	(c) Method of valuation: Cost or e	and of your meriliest web
1) Financial derivatives		(4) motion of valuation. Obst of a	anu-oi-year market vall
2) Closely held equity interests			
3) Other			
(A)			
(B)		1	
(C)		1	
(D)			
(E)			
(F)			
(G)			
(H)			
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Voo"	on Form 000, Deat By It		
Complete if the organization answered "Yes" (a) Description of Investment	(b) Book value	(a) Mothed of relation 2	
(1)	(a) book ratue	(c) Method of valuation: Cost or en	d-of-year market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
al. (Col. (b) must equal Form 990, Part X, col. (B) line 13)			
al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) art IX Other Assets. Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
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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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

- h - c	Jule D (Form 990) 2020 INC.		02-076	3591 Page 4
	Aule D (Form 990) 2020 INC. XI Reconciliation of Revenue per Audited Financial State	ments With Revenu	e per Return.	
1 01	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.		
1			1	246,938.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		10.5	
	Net unrealized gains (losses) on investments	2a	202	
a b	Donated services and use of facilities		175	
	Recoveries of prior year grants		100	
C L	Other (Describe in Part XIII.)	2d		
d	Add lines 2a through 2d		2e	0.
e	Subtract line 2e from line 1		3	246,938.
3	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		5353	
4	Investment expenses not included on Form 990, Part VIII, line 7b	4a	200	
a	Other (Describe in Part XIII.)	4b	100	
D	Add lines 4a and 4b		40	0.
C			5	246,938.
Dai	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part , line 12). T XII Reconciliation of Expenses per Audited Financial Stat	ements With Exper	ises per Return.	
I ISI	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.		
	Total expenses and losses per audited financial statements		1	117,168.
1	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
2	Donated services and use of facilities	2a	1 S	
a 	Prior year adjustments	2b	01	
D	Other losses	20		
C	Other losses Other (Describe in Part XIII.)	2d		•
a	and the second field		2e	0.
e	Subtract line 2e from line 1		3	117,168.
3	Amounts included on Form 990, Part IX, line 25, but not on line 1:	105. 12		
4	the second s	4a		
a	Other (Describe in Part XIII.)	4b	1994 B	
b			40	0.
C	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18		5	117,168.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 550, Part 7, line 15 at XIII Supplemental Information.			
LLC L	Completional information	m + 0.4 House the and Ohr	Clert V line 4: Dart Y li	ine 2. Part XI

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.

PART X, LINE 2:

THE FOUNDATION HAS IMPLEMENTED THE NEW ACCOUNTING REQUIREMENTS ASSOCIATED
WITH UNCERTAINTY IN INCOME TAXES, USING THE PROVISIONS OF FASE ASC 740,
INCOME TAXES. USING THAT GUIDANCE, TAX POSITIONS INITIALLY NEED TO BE
INCOME TAXES. USING THAT GUIDANCE, TAX FOBILIOND INTEREST
RECOGNIZED IN THE FINANCIAL STATEMENTS WHEN IT IS MORE-LIKELY-THAN-NOT THE
POSITIONS WILL BE SUSTAINED UPON EXAMINATION BY THE APPROPRIATE TAXING
AUTHORITIES. IT ALSO PROVIDES GUIDANCE FOR DERECOGNITION, CLASSIFICATION,
INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, DISCLOSURE AND
TRANSITION. MANAGEMENT DETERMINED THAT THERE WERE NO TAX UNCERTAINTIES
THAT MET THE RECOGNITION THRESHOLD DURING THE YEAR ENDED JUNE 30, 2021.

Part XIII Our source 02-0763591 p	Schedule D (Form 990) 2020 Part XIII Supplemental In		 GUARDIANSHIP,	02-0763591	Page
		(continued)	 		-
				a	
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Form 990) Governments, Complete if the organization Department of the Treasury Internal Revenue Service Go to www	Attach to Form Attach to Form w.irs.gov/Form990 for RDIANSHIP, ants or assistance, the grant funds in the United estic Governments. C	s in the Unit on Form 990, Part n 990. the latest informa grantees' eligibility f	ed States IV, line 21 or 22. ation.	istance, and the selecti	2020 Open to Public Inspection Employer identification number 02-0763591
Internal Revenue Service Go to www. Name of the organization FOUNDATION FOR INDIGENT GUAN INC. Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the gra criteria used to award the grants or assistance?	w.irs.gov/Form990 for RDIANSHIP, ants or assistance, the grant funds in the United estic Governments. C	the latest information of the latest informa	or the grants or assi	istance, and the select	Employer identification number 02-0763591
Name of the organization FOUNDATION FOR INDIGENT GUAL INC. Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the gra criteria used to award the orants or assistance?	RDIANSHIP, ants or assistance, the g rant funds in the United estic Governments. C	grantees' eligibility f	or the grants or assi	istance, and the select	02-0763591
Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the gractice organization maintain records or assistance?	rant funds in the United estic Governments. C	States.	or the grants or assi	istance, and the selecti	
1 Does the organization maintain records to substantiate the amount of the graciteria used to award the grants or assistance?	rant funds in the United estic Governments. C	States.	or the grants or assi	istance, and the selecti	
Citteria dised to award the grants of assertion of the same of a	rant funds in the United estic Governments. C	States.		•••••	ion Yes X No
Describe in Part IV the organization's procedures for monitoring the use of gr	estic Governments. C			the second se	
2 Describe in Part IV the organization's procedures for monitoring the use or gr Part II Grants and Other Assistance to Domestic Organizations and Dome recipient that received more than \$5,000. Part II can be duplicated if an	dditional space is neede	omplete it the orga ed.		Yes" on Form 990, Par	1
1 (a) Name and address of organization or government (b) EIN (c) IRC section (if applicable)	n (d) Amount of	(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
NORTH FLORIDA OFFICE OF THE PUBLIC GUARDIAN	6,361.	0.			ORGANIZATIONAL MISSION
GUARDIANSHIP PROGRAM OF DADE COUNTY	27,160.	0.			ORGANIZATIONAL MISSION
COLLIER/CHARLOTTLE/MONROE/GLADES AND DESOTO COUNTY PUBLIC GUARDIAN	60,480.	0.			ORGANIZATIONAL MISSION
GUARDIANSHIP/CLIENT SERVICES PRGRAM OF THE COUNCIL ON AGING OF VOLUSIA CO.	12,885.	0.			ORGANIZATIONAL MISSION
2 Enter total number of section 501(c)(3) and government organizations listed	I in the line 1 table				
3 Enter total number of other organizations listed in the line 1 table					Schedule I (Form 990) 2020

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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

FOUNDATION	FOR	INDIGENT	C
Thia			0

GUARDIANSHIP, Schedule I (Form 990) 2020 INC.

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.

02-0763591

Page 2

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
	_	100			
IV Supplemental Information. Provide the information	tion required in Part I, line :	2; Part III, column	(b): and any other add	litional information	
				adonal Information,	
		-			
	1 '				

Part III

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization 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. FOUNDATION FOR INDIGENT GUARDIANSHIP,



Employer identification number 02-0763591

INC.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SERVES DISABLED INDIVIDUALS DECLARED INCAPACITATED AND PLACED UNDER THE

PROTECTION OF A COURT-APPOINTED PUBLIC GUARDIAN.

FORM 990, PART VI, SECTION B, LINE 11B:

EACH DIRECTOR, PRINCIPAL OFFICER, AND MEMBER OF A COMMITTEE WITH GOVERNING

BOARD DELEGATED POWERS SHALL ANNUALLY MEET TO REVIEW THE ORGANIZATION'S TAX

RETURN BEFORE FINAL FILING WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

IF THE GOVERNING BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A

MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT

SHALL INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORD TO THE

MEMBER AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. IF,

AFTER HEARING THE MEMBER'S RESPONSE AND AFTER MAKING FURTHER INVESTIGATION

AS WARRANTED BY THE CIRCUMSTANCES, THE GOVERNING BOARD OR COMMITTEE

DETERMINES THE MEMBER HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT

OF INTERST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.

FORM 990, PART VI, SECTION C, LINE 19:

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE

OBTAINED FROM THE STATE OF FLORIDA DIVISION OF CONSUMER SERVICES BY CALLING

TOLL-FREE (800-435-7352).

FORM 990, PART XII, LINE 2C

ORGANIZATION HAS NOT CHANGED THE SELECTION PROCESS OF AN INDEPENDENT

Schedule O (Form 990 or 9 Name of the organization	FOU	NDATI	ON I	OR 1	INDIC	JENT	GIJA	RDT	ANSH	TD				Pa
	INC									±		1217	ployer identi 02-076	fication num
ACCOUNTANT OR	THE	OVER	SIGH	T OF	THE	AUD	IT 1	FOR	THE	CURREN	тт	AX	YEAR.	
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FOUNDATION FOR INDIGENT GUARDIANSHIP, INC. (A NONPROFIT ORGANIZATION)

FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

CONTENTS

Independent Auditor's Report	1
Financial Statements	
Statements of Financial Position	3
Statements of Activities	4
Statements of Functional Expenses	5
Statements of Cash Flows	6
Notes to the Financial Statements	7

LANIGAN & ASSOCIATES, P.C. CERTIFIED PUBLIC ACCOUNTANTS MANAGEMENT CONSULTANTS www.lanigancpa.com

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors Foundation for Indigent Guardianship, Inc. Tallahassee, Florida

Opinion

We have audited the financial statements of Foundation for Indigent Guardianship, Inc., which comprise the statements of financial position as of June 30, 2021 and 2020, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of Foundation for Indigent Guardianship, Inc. as of June 30, 2021 and 2020, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Foundation for Indigent Guardianship, Inc. and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Independent Auditor's Report Page Two

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Foundation for Indigent Guardianship, Inc.'s ability to continue as a going concern for one year after the date that the financial statements are issued.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Foundation for Indigent Guardianship, Inc.'s internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Foundation for Indigent Guardianship, Inc.'s ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Lanigan & Associates, PC

Tallahassee, Florida March 1, 2022

FOUNDATION FOR INDIGENT GUARDIANSHIP, INC. STATEMENTS OF FINANCIAL POSITION AS OF JUNE 30, 2021 AND 2020

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	2021	2020
ASSETS ASSETS		
Cash and cash equivalents	\$ 381,471	\$ 248,451
TOTAL ASSETS	\$ 381,471	\$ 248,451
LIABILITIES AND NET AS	SETS	
Accounts Payable	3,250	-
Total Current Liabilities	3,250	-
Net assets		
Without donor restrictions	\$ 378,221	\$ 248,451
TOTAL LIABILITIES AND NET ASSETS	\$ 381,471	<u>\$ 248,451</u>

7

FOUNDATION FOR INDIGENT GUARDIANSHIP, INC. STATEMENTS OF ACTIVITIES FOR THE YEARS ENDED JUNE 30, 2021 AND 2020

	2021	2020		
Revenues, gains and other support				
Program service revenues	\$ 241,938	\$ 237,027		
Corporate contributions	5,000	¢ 257,027 2,100		
Investment income		23		
Total revenue, gains and other support	246,938	239,150		
Expenses				
Program services - guardianship	107,080	58,075		
Management and general	10,088	16,386		
Total expenses	117,168	74,461		
Change in net assets	129,770	164,689		
Net assets, beginning of year	248,451	83,762		
Net assets, end of year	\$ 378,221	\$ 248,451		

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FOUNDATION FOR INDIGENT GUARDIANSHIP, INC. STATEMENTS OF FUNCTIONAL EXPENSES FOR THE YEARS ENDED JUNE 30, 2021 AND 2020

Divert exists	5	Program Services - Iardianship	nagement d General	Total 2021		,	
Direct assistance Client assistance	\$	107,080	\$ -	\$	107,080	\$	49,325
Other expenses							
Contracted services		-	-		-		17,500
Conferences and meetings		-	-		-		61
Accounting fees		-	6,500		6,500		6,000
Insurance		-	1,378		1,378		1,337
Travel		-	90		90		-
Advertising		-	1,703		1,703		188
Miscellaneous			 417		417		50
Total expenses	\$	107,080	\$ 10,088	\$	117,168	\$	74,461

FOUNDATION FOR INDIGENT GUARDIANSHIP, INC. STATEMENTS OF CASH FLOWS FOR THE YEARS ENDED JUNE 30, 2021 AND 2020

Cash flows from operating activities	2021	2020
Cash receipts from program services Investment income	\$ 246,938	\$ 239,127
Cash payments for program services	- (107,080)	23 (49,325)
Cash payments for supporting services	(6,838)	(25,136)
Net cash provided by operating activities	133,020	164,689
Net change in cash and cash equivalents	133,020	164,689
Cash and cash equivalents, beginning of year	248,451	83,762
Cash and cash equivalents, end of year	\$ 381,471	\$ 248,451
Cash flows from operating activities		
Change in net assets Adjustments to Reconcile Change in Net Assets to Net	\$ 129,770	\$ 164,689
Cash Provided by Operating Activities:		
Increase in Accounts Payable	3,250	
Net cash provided by operating activities	\$ 133,020	\$ 164,689

FOUNDATION FOR INDIGENT GUARDIANSHIP, INC. NOTES TO THE FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

NOTE 1: Organization and Summary of Significant Accounting Policies

Nature of Activities

The Foundation for Indigent Guardianship, Inc. (the Foundation) is a not-for-profit organization formed on December 21, 2005. The Foundation conducts programs and raises funds for the direct and indirect benefit of the public guardianship offices throughout the State of Florida. The Foundation's office is located in Tallahassee, Florida.

The Foundation is supported by a single trust, as determined by the State of Florida Office of Public and Professional Guardians, which was created for the purpose of providing funding for public guardianship for the indigent.

Basis of Presentation

The accompanying financial statements have been prepared on the accrual basis in accordance with accounting principles generally accepted in the United States of U.S. generally accepted accounting principles (GAAP). Net assets, support and revenues, and expenses are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets and changes therein are classified and reported as follows:

Without Donor Restrictions: Net assets available for use in general operations and not subject to donor restrictions. Grants and contributions gifted for recurring programs are generally not considered "restricted" under GAAP, though for internal reporting, the Foundation tracks such grants and contributions to verify that the disbursement matches the intent. Assets restricted solely through the actions of the Board are reported as net assets without donor restrictions, board designated.

With Donor Restrictions: Net assets subject to donor-imposed stipulations that are more restrictive than the Foundation's mission and purpose. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Donor-imposed restrictions are released when the restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both. Other donor-imposed restrictions are perpetual in nature, when the donor stipulates that resources be maintained in perpetuity.

Contributions

Contributions are recorded as net assets with donor restrictions, or without donor restrictions depending on the existence and nature of donor restrictions. All contributions are considered to be available for unrestricted use in the appropriate time period, unless specifically restricted by the donor.

Contributed Goods and Services

During the year ended June 30, 2021, the Foundation was the recipient of in-kind services. The value of the contributed services meeting the requirements for recognition in the financial statements was not and has not been recorded. In addition, many individuals volunteer their time and perform a variety of tasks to assist the Foundation, but these services do not meet the criteria for recognition as contributed services.

Accounting Period

The accounting period of the Foundation is a fiscal year from July 1st to June 30th.

Income Taxes

The Foundation is a not-for-profit entity as described in Section 501(c)(3) of the Internal Revenue Code and is exempt from federal income taxes, other than unrelated business income, pursuant to Section 501(a) of the Code.

The Foundation utilizes the accounting requirements associated with Financial Accounting Standards Board (FASB) ASC 740, *Income Taxes*. Using that guidance, tax positions initially need to be recognized in the financial statements when it is more-likely-than-not the positions will be sustained upon examination by the tax authorities. It also provides guidance for derecognition, classification, interest and penalties, accounting in interim periods, disclosure, and transition. As of June 30, 2021 and 2020, the Foundation has no uncertain tax provisions that qualify for either recognition or disclosure in the financial statements.

Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Cash and Cash Equivalents

For purposes of the statement of cash flows, the Foundation considers all cash on hand, demand deposits and all highly liquid investments available for current use with an initial maturity of three months or less to be cash and cash equivalents. Accounts are insured by the Federal Deposit Insurance Corporation up to \$250,000. At June 30, 2021, the uninsured cash balance exposure was \$131,471. However, the Foundation mitigates this risk by banking with a very large reputable institution.

NOTE 1: Organization and Summary of Significant Accounting Policies (continued)

Revenue Recognition

FASB issued Accounting Standards Update (ASU) No. 2014-09, Revenue from Contracts with Customers (Topic 606), to improve the financial reporting of revenue from contracts with customers and related costs. The core principle of the revised revenue recognition standards is that an entity should recognize revenue to depict the transfer of goods or services to customers in an amount that reflects the consideration to which the entity expects to be entitled in exchange for those goods or services. The standards also require enhanced disclosures about revenues that are aimed at allowing users to understand the nature, amount, timing, and uncertainty of revenue and cash flows from contracts with customers. Management has determined the effect of ASU 2014-09 to be limited.

Advertising

Advertising expenses are expensed as incurred for year ending June 30, 2021.

Expense Allocation

The costs of providing various programs and other activities have been summarized on a functional basis in the statement of activities and in the schedule of functional expenses. Accordingly, certain costs have been allocated among the programs and supporting services benefited based on management's assessment of time incurred.

Subsequent Events

Subsequent events were evaluated through March 1, 2022, which is the date the financial statements were available to be issued. As of this date, there were no subsequent events requiring disclosure.

NOTE 2: *Risks and Uncertainties*

Program Service Revenue

The Foundation's revenue is mainly derived from the surplus property of individual trusts within a pooled special needs trust (the Florida Public Guardianship Pooled Special Needs Trust (FPGPSNT)), of which the program is the founding trustee. According to the FPGPSNT master trust agreement, any amount that remains in a deceased trust beneficiary's trust sub account is deemed "surplus property" and is retained and administered strictly according to 42 USC 1396(d)(4(c) and related federal and State statutes, rules and regulations. Therefore, once the beneficiary passes, the remaining funds (surplus property) will be used in one of two ways:

- 1. to pay back public benefits in full if sufficient funds remain; or
- 2. to support public guardianship throughout Florida.

Since FIG's sole purpose is to support public guardianship in Florida, when public benefits cannot be paid back to the State in full, 100% of those funds are paid to FIG.

NOTE 3: Liquidity and Availability of Funds

The following reflects the Foundation's liquid financial assets as of the balance sheet date.

	Ju	ne 30, 2021	June 30, 2020			
Operating Account	\$	381,471	\$	248,451		
Total	\$	381,471	\$	248,451		

As part of the Foundation's liquidity management, the bank balance is continuously monitored by the board of directors. The board reviews the budget and anticipated funding and makes adjustments accordingly.

NOTE 4: Coronavirus

In early 2020, an outbreak of a novel strain of coronavirus (COVID-19) emerged globally. As a result, events have occurred domestically in the United States and globally, including mandates from federal, state, and local authorities, leading to an overall decline in economic activity. The ultimate impact of the epidemic on the financial performance of the Company cannot be reasonably estimated at this time.

LANIGAN & ASSOCIATES, P.C. CERTIFIED PUBLIC ACCOUNTANTS

www.lanigancpa.com

Please reply to: Tailahassee

Bernard Lanigan (1918-1982) Bernard Lanigan, Jr., CPA Frank J. Mercer, CPA, CFP C. Bradford Jackson, CPA, CFA D Mark Fletcher, CPA, CFE G. Thomas Harrison, Jr., CPA, CFP John W. Keillor, CPA Robert M. Milberg, CPA (of Counsel) 314 Gordon Avenue Thomasville, GA 31792 (229) 226-8320 (229) 226-0038 Fax

2630 Centennial Place, Suite 1 Tallahassee, FL 32308 (850) 893-8418 (850) 893-9745 Fax

3353 Peachtree Road, NE North Tower, Suite 545 Atlanta, GA 30326 (404) 848-7221 (404) 442-2728 Fax

March 1, 2022

To the Board of Directors of Foundation for Indigent Guardianship, Inc. Tallahassee, FL

In planning and performing our audit of the financial statements of Foundation for Indigent Guardianship as of and for the year ended June 30, 2021, in accordance with auditing standards generally accepted in the United States of America, we considered Foundation for Indigent Guardianship's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we do not express an opinion on the effectiveness of Foundation for Indigent Guardianship's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the preceding paragraph and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and, therefore, material weaknesses or significant deficiencies may exist that were not identified. Given these limitations, during our audit we did not identify any deficiencies in internal control over financial reporting that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified. We did identify a certain deficiency in internal control, described on the following page that we consider to be a significant deficiency as item 2021-001.

Board of Directors March 1, 2022 Page 2 of 2

in.

It should be noted that smaller not-for-profit organizations like the Foundation for Indigent Guardianship have limited resources available to maintain an optimal internal control structure. As a result, it is common for control deficiencies like the one presented below to be identified during the audit.

2021-01 Segregation of Duties:

Criteria – It is important for an entity to segregate the authorization of transactions, recording of transactions, and custody of the related assets. Independent performance of each of these functions reduces the opportunity for any one person to be in a position both to perpetrate and to conceal errors or irregularities in the normal course of his or her duties.

Condition – Separation of certain accounting and administrative duties among employees, which is recommended as an effective internal control, was not adequate. The limited number of employees within certain offices precludes ideal segregation of duties.

Cause/Effect — The failure to maintain separation of these functions subjects the Foundation to the risk that material misstatements due to error or fraud may occur and not be detected by employees in a timely manner during the performance of their assigned tasks.

Recommendation – We recommend that in the absence of the ability to hire additional employees, alternative procedures, including addition oversight with regard to certain functions, be performed regularly to mitigate the risk caused by this deficiency in internal controls.

Classification – Significant Deficiency.

This communication is intended solely for the information and use of management, board of directors, others within the organization, and is not intended to be, and should not be, used by anyone other than these specified parties.

Best Regards,

Lanigan & Associates, PC

Lanigan and Associates, P.C.



Foundation for Indigent Guardianship

Charles Alkire, President Edward O'Sheehan, Vice President 4040 Esplanade Way, Suite 280.08 Tallahassee, FL 32399-7000

Melinda Coulter, Treasurer

June 1, 2022

Response to March 1, 2022 Letter from Lanigan and Associates RE: 2021-01 Segregation of Duties

For Fiscal Year 20-21 the Foundation for Indigent Guardianship's (FIG) internal control procedures consisted of one officer making all deposits, writing all checks and maintaining the books of record, while a different officer received and reconciled the bank statements. Financial reports were made to the full board at each meeting, which included bank account balances. As noted in the Lanigan letter referenced above, FIG did not maintain "an optimal internal control structure." Because of limited resources and the fact that the officers are spread around the state, additional oversight was not achievable during the fiscal year covered by this audit.

However, FIG is pleased to advise that as of October 1, 2021 a person has been hired to assist with administrative functions. The internal control structure has been modified as follows:

- The treasurer makes all deposits and writes all check (a copy of income checks and deposit slips as well as a copy of checks stubs and backup information is provided monthly to the new employee);
- The new employee maintains the books of record (a copy of the checking account journal for each month is provided to a separate officer);
- The vice-president receives the bank statement and uses the journal provided to reconcile the statement with the books of record.

By making these administrative changes, FIG believes it has addressed the significant deficiency in internal controls identified by Lanigan and Associates.

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Bernard Lanigan (1918-1982) Bernard Lanigan, Jr., CPA Frank J. Mercer, CPA, CFP C. Bradford Jackson, CPA, CFA D. Mark Fletcher, CPA, CFE G. Thomas Harrison, Jr., CPA, CFP John W. Keillor, CPA Robert M. Milberg, CPA (of Counsel) 314 Gordon Avenue Thomasville, GA 31792 (229) 226-8320 (229) 226-0038 Fax

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March 1, 2022

To the Board of Directors of Foundation for Indigent Guardianship, Inc. Tallahassee, FL

We have audited the financial statements of Foundation for Indigent Guardianship, Inc., Inc. as of and for the year ended June 30, 2021, and have issued our report thereon dated March 1, 2022. Professional standards require that we advise you of the following matters relating to our audit.

Our Responsibility in Relation to the Financial Statement Audit

As communicated in our engagement letter dated January 3, 2022 our responsibility, as described by professional standards, is to form and express an opinion about whether the financial statements that have been prepared by management with your oversight are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America. Our audit of the financial statements does not relieve you or management of its respective responsibilities.

Our responsibility, as prescribed by professional standards, is to plan and perform our audit to obtain reasonable, rather than absolute, assurance about whether the financial statements are free of material misstatement. An audit of financial statements includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control over financial reporting. Accordingly, as part of our audit, we considered the internal control of Foundation for Indigent Guardianship, Inc. solely for the purpose of determining our audit procedures and not to provide any assurance concerning such internal control.

We are also responsible for communicating significant matters related to the audit that are, in our professional judgment, relevant to your responsibilities in overseeing the financial reporting process. However, we are not required to design procedures for the purpose of identifying other matters to communicate to you.

Planned Scope and Timing of the Audit

We conducted our audit consistent with the planned scope and timing we previously communicated to you.

Compliance with All Ethics Requirements Regarding Independence

The engagement team and our firm have complied with all relevant ethical requirements regarding independence.

Qualitative Aspects of the Entity's Significant Accounting Practices

Significant Accounting Policies

Management has the responsibility to select and use appropriate accounting policies. A summary of the significant accounting policies adopted by Foundation for Indigent Guardianship, Inc. is included in Note 1 to the financial statements. There have been no initial selection of accounting policies and no changes in significant accounting policies or their application during 2021. No matters have come to our attention that would require us, under professional standards, to inform you about (1) the methods used to account for significant unusual transactions and (2) the effect of significant accounting policies in controversial or emerging areas for which there is a lack of authoritative guidance or consensus.

Significant Accounting Estimates

Accounting estimates are an integral part of the financial statements prepared by management and are based on management's current judgments. Those judgments are normally based on knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive because of their significance to the financial statements and because of the possibility that future events affecting them may differ markedly from management's current judgments.

There are no sensitive accounting estimates affecting the financial statements.

Financial Statement Disclosures

Certain financial statement disclosures involve significant judgment and are particularly sensitive because of their significance to financial statement users. There are no sensitive disclosures affecting Foundation for Indigent Guardianship, Inc.'s financial statements.

Significant Unusual Transactions

For purposes of this communication, professional standards require us to communicate to you significant unusual transactions identified during our audit. There were no significant unusual transactions identified during the audit.

Identified or Suspected Fraud

We have not identified or obtained any information that indicates that fraud may have occurred.

Significant Difficulties Encountered during the Audit

We encountered no significant difficulties in dealing with management relating to the performance of the audit.

Uncorrected and Corrected Misstatements

For purposes of this communication, professional standards require us to accumulate all known and likely misstatements identified during the audit, other than those that we believe are trivial, and communicate them to the appropriate level of management. Further, professional standards require us to also communicate the effect of uncorrected misstatements related to prior periods on the relevant classes of transactions, account balances or disclosures, and the financial statements as a whole.

In addition, professional standards require us to communicate to you all material, corrected misstatements that were brought to the attention of management as a result of our audit procedures. None of the misstatements identified by us as a result of our audit procedures and corrected by management were material, either individually or in the aggregate, to the financial statements taken as a whole.

Disagreements with Management

For purposes of this letter, professional standards define a disagreement with management as a matter, whether or not resolved to our satisfaction, concerning a financial accounting, reporting, or auditing matter, which could be significant to Foundation for Indigent Guardianship, Inc.'s financial statements or the auditor's report. No such disagreements arose during the course of the audit.

Circumstances that Affect the Form and Content of the Auditor's Report

For purposes of this letter, professional standards require that we communicate any circumstances that affect the form and content of our auditor's report. There were no circumstances affecting the form and content of the auditor's report.

Representations Requested from Management

We have requested certain written representations from management, which are included in a separate letter dated March 1, 2022.

Management's Consultations with Other Accountants

In some cases, management may decide to consult with other accountants about auditing and accounting matters. Management informed us that, and to our knowledge, there were no consultations with other accountants regarding auditing and accounting matters.

Board of Directors March 1, 2022 Page 4 of 4

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Other Significant Matters, Findings or Issues

In the normal course of our professional association with Foundation for Indigent Guardianship, Inc., we generally discuss a variety of matters, including the application of accounting principles and auditing standards, operating conditions affecting the entity, and operating plans and strategies that may affect the risks of material misstatement. None of the matters discussed resulted in a condition to our retention as Foundation for Indigent Guardianship, Inc.'s auditors.

This report is intended solely for the information and use of the board of directors and management of Foundation for Indigent Guardianship, Inc. and is not intended to be and should not be used by anyone other than these specified parties.

Best Regards,

Lanigan & Associates, PC Lanigan and Associates, P.C.